

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

Price for Congress

ADDRESS (number and street)

Check if different than previously reported. (ACC)    -

2. **FEC IDENTIFICATION NUMBER** ▼  CITY ▲  STATE ▲  ZIP CODE ▲ STATE ▼ DISTRICT

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

### 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  /  /  through  /  /

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 Rose Auman

Signature of Treasurer Rose Auman [Electronically Filed] Date  /  /

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

Office Use Only								
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Price for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	39620.00	1090541.13
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	154.95
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	39620.00	1090386.18
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	28702.41	943230.73
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	2746.03
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	28702.41	940484.70
8. Cash on Hand at Close of Reporting Period (from Line 27).....	129844.71	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Price for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	9245.00	477760.50
(ii) Unitemized.....	5575.00	118780.63
(iii) TOTAL of contributions from individuals ▶	14820.00	596541.13
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	24800.00	494000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	39620.00	1090541.13
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	2746.03
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	39620.00	1093287.16

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	28702.41	943230.73
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	154.95
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	154.95
21. OTHER DISBURSEMENTS .....	28090.13	85353.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	56792.54	1028738.68

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	147017.25
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	39620.00
25. SUBTOTAL (add Line 23 and Line 24).....	186637.25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	56792.54
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	129844.71

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 34
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Price for Congress**

Full Name (Last, First, Middle Initial) <b>A. Laura Ballance</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 10 / 2012	
Mailing Address 1800 Glendale Ave		<b>Transaction ID : C6628751</b>	
City Durham	State NC	Zip Code 27701	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C _____	
Name of Employer merge records	Occupation owner		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Shula Bernard</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 17 / 2012	
Mailing Address 110 Linnaeus Place		<b>Transaction ID : C6746455</b>	
City Chapel Hill	State NC	Zip Code 27514	Amount of Each Receipt this Period _____ 75.00
FEC ID number of contributing federal political committee.		C _____	
Name of Employer RTI	Occupation Policy Consultant		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 225.00		

Full Name (Last, First, Middle Initial) <b>C. Mary Hughes Brookhart</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 15 / 2012	
Mailing Address 105 Rocky Pt		<b>Transaction ID : C6736411</b>	
City Carrboro	State NC	Zip Code 27510-1287	Amount of Each Receipt this Period _____ 35.00
FEC ID number of contributing federal political committee.		C _____	
Name of Employer none	Occupation retired		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1027.00		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 34
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Price for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mary Ann K. Buck**

Mailing Address 312 Carolina Meadows Villa

City Chapel Hill State NC Zip Code 27517-8571

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 09 / 2012

**Transaction ID : C6627650**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Julius L. Chambers**

Mailing Address 568 N. Church Street

City Charlotte State NC Zip Code 28202

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

Name of Employer Ferguson Stein Chambers Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 09 / 2012

**Transaction ID : C6627658**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
**Mary Margaret Conway**

Mailing Address PO Box 357242

City Gainesville State FL Zip Code 32635-7242

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 03 / 2012

**Transaction ID : C6607725**

Amount of Each Receipt this Period  
50.00

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

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

350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 34
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Price for Congress**

Full Name (Last, First, Middle Initial) <b>A. Nailesh Dave</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 03 / 2012	
Mailing Address 504 Arborhill Ln		<b>Transaction ID : C6607373</b>	
City Holly Springs	State NC	Zip Code 27540-6245	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Self	Occupation Physician		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) <b>B. Arthur DeBerry</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 09 / 2012	
Mailing Address 5102 Durham-Chapel Hill Blvd.		<b>Transaction ID : C6627668</b>	
City Durham	State NC	Zip Code 27707-3394	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00	
Name of Employer n/a	Occupation Retired		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 275.00		

Full Name (Last, First, Middle Initial) <b>C. Peter R. Decker</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 09 / 2012	
Mailing Address 395 Race Street		<b>Transaction ID : C6627671</b>	
City Denver	State CO	Zip Code 80203	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Self	Occupation Consultant		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1125.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 34
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Price for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robin L. Dennis**

Mailing Address 50 W. Newman Road

City Chapel Hill State NC Zip Code 27517-7697

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

Name of Employer US EPA Occupation Scientist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : C6746458**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Donald L. Fowler**

Mailing Address 2725 Devine Street

City Columbia State SC Zip Code 29205-2411

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

Name of Employer Fowler Communications Occupation Executive

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : C6746468**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Irene G. Galloway**

Mailing Address 104 Shirley Dr

City Cary State NC Zip Code 27511-3848

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : C6746471**

Amount of Each Receipt this Period  
**50.00**

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

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

**350.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 34
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Price for Congress**

Full Name (Last, First, Middle Initial) <b>A. Hakan Golbasi</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 17 / 2012	
Mailing Address 915 Delaronde Ln.		<b>Transaction ID : C6746414</b>	
City Morrisville	State NC	Zip Code 27560	Amount of Each Receipt this Period _____ 350.00
FEC ID number of contributing federal political committee.		C _____	
Name of Employer Navis	Occupation consultant		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 350.00		

Full Name (Last, First, Middle Initial) <b>B. Geraldine G. Guess</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 05 / 2012	
Mailing Address 21145 Cardinal Pond Terrace Apt. 1		<b>Transaction ID : C6610312</b>	
City Ashburn	State VA	Zip Code 20147	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C _____	
Name of Employer N/A	Occupation Retired		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Fern E. Gunn-Simeon</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 03 / 2012	
Mailing Address 4009 Cottonwood Dr		<b>Transaction ID : C6607761</b>	
City Durham	State NC	Zip Code 27705-5369	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee.		C _____	
Name of Employer NC State Bar	Occupation Attorney		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 700.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 34
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Price for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Muharrem Ekrem Hatip**

Mailing Address 306 Cole Canyon Ct

City State Zip Code  
Cary NC 27513-8372

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

Name of Employer Occupation  
Divan Cultural Center Executive Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 03 / 2012

**Transaction ID : C6607933**

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
**J. William Herndon Jr.**

Mailing Address 1526 W English Rd

City State Zip Code  
High Point NC 27262

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

Name of Employer Occupation  
US Postal Svc Bldg Mech BEM-9

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 01 / 2012

**Transaction ID : C6601106**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Carlyle S. Hodges**

Mailing Address 281 Carolina Meadows Villa

City State Zip Code  
Chapel Hill NC 27517-8528

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
905.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 03 / 2012

**Transaction ID : C6607765**

Amount of Each Receipt this Period  
50.00

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

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

1350.00

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

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

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NAME OF COMMITTEE (In Full)  
**Price for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ronald Katz**

Mailing Address 3717 Wyatt St

City Fayetteville State NC Zip Code 28304-1544

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

Name of Employer Cape Center Dental Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 03 / 2012

**Transaction ID : C6608024**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Thomas S. Kenan III**

Mailing Address PO Box 4150

City Chapel Hill State NC Zip Code 27515

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

Name of Employer Self Occupation Investor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : C6746357**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Brian Kileff**

Mailing Address 403 Clayton Road

City Chapel Hill State NC Zip Code 27514-7613

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

Name of Employer Oenophilia Occupation Retail

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : C6746515**

Amount of Each Receipt this Period  
**500.00**

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

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

**1000.00**

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

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

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NAME OF COMMITTEE (In Full)  
**Price for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Quentin W. Lindsey**

Mailing Address 156 Wee Loch Dr

City Cary State NC Zip Code 27511-3885

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 03 / 2012

**Transaction ID : C6607361**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Robert Lowman**

Mailing Address 104 Chesley Ln

City Chapel Hill State NC Zip Code 27514-1459

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

Name of Employer UNC-Chapel Hill Occupation Administration

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 09 / 2012

**Transaction ID : C6627686**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Camille B. Massie**

Mailing Address 501 High Street

City Alexandria State VA Zip Code 22302

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 09 / 2012

**Transaction ID : C6627688**

Amount of Each Receipt this Period  
**500.00**

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

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

**850.00**

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

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

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NAME OF COMMITTEE (In Full)  
**Price for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Marguerite D. McAdoo**

Mailing Address 480 Park Ave  
# 2E

City State Zip Code  
New York NY 10022-1741

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
775.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 03 / 2012

**Transaction ID : C6607822**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Betty Ray McCain**

Mailing Address 1134 Woodland Drive NW

City State Zip Code  
Wilson NC 27893-2122

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 03 / 2012

**Transaction ID : C6607824**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
**Walter McCann**

Mailing Address 920 Damascus Church Rd

City State Zip Code  
Chapel Hill NC 27516-8318

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

Name of Employer Occupation  
Self Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2012

**Transaction ID : C6746520**

Amount of Each Receipt this Period  
50.00

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

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

200.00

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

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

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NAME OF COMMITTEE (In Full)  
**Price for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ismail Ozdemir**

Mailing Address 1300 Laurel Springs Dr. #1310

City Durham	State NC	Zip Code 27713-6737
----------------	-------------	------------------------

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

Name of Employer Northrop Grumman	Occupation Administrator
--------------------------------------	-----------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		03		2012

**Transaction ID : C6607947**

Amount of Each Receipt this Period  
350.00

**B.** Full Name (Last, First, Middle Initial)  
**Hasu Patel**

Mailing Address 10510 Arnold Palmer Dr

City Raleigh	State NC	Zip Code 27617-7775
-----------------	-------------	------------------------

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

Name of Employer N/A	Occupation Homemaker
-------------------------	-------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2424.50

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		03		2012

**Transaction ID : C6607375**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Marilyn C. Pizer**

Mailing Address 115 Stateside Drive

City Chapel Hill	State NC	Zip Code 27514
---------------------	-------------	-------------------

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

Name of Employer UNC-CH	Occupation Professor
----------------------------	-------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		03		2012

**Transaction ID : C6607840**

Amount of Each Receipt this Period  
100.00

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

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

1450.00

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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 15 OF 34

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NAME OF COMMITTEE (In Full)  
**Price for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**William H. Race**

Mailing Address 601 W. Rosemary St. Unit 602

City Chapel Hill State NC Zip Code 27516

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

Name of Employer UNC Occupation Professor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 235.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2012

**Transaction ID : C6734899**

Amount of Each Receipt this Period  
 35.00

**B.** Full Name (Last, First, Middle Initial)  
**William H. Race**

Mailing Address 601 W. Rosemary St. Unit 602

City Chapel Hill State NC Zip Code 27516

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

Name of Employer UNC Occupation Professor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 235.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2012

**Transaction ID : C6734914**

Amount of Each Receipt this Period  
 200.00

**C.** Full Name (Last, First, Middle Initial)  
**Bryna B. Rapp**

Mailing Address 6819 Morrow Mill Rd

City Chapel Hill State NC Zip Code 27516-7370

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

Name of Employer Rapp Productions, Inc Occupation Architect

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 03 / 2012

**Transaction ID : C6607887**

Amount of Each Receipt this Period  
 100.00

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

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

335.00

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

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

FOR LINE NUMBER: PAGE 16 OF 34  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Price for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Howard J. Silver**

Mailing Address 9105 Windflower Lane

City Annandale State VA Zip Code 22003

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

Name of Employer Consortium of Social Science Assocs. Occupation Lobbyist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 09 / 2012

**Transaction ID : C6627767**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Bonnie L. Smith**

Mailing Address 2620 St. Mary's Street

City Raleigh State NC Zip Code 27609

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

Name of Employer Museum of Natural Science Occupation Development Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 03 / 2012

**Transaction ID : C6607367**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Maxine S. Stern**

Mailing Address 1201 Damascus Church Road

City Chapel Hill State NC Zip Code 27516

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

Name of Employer Self Occupation CPA

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : C6746533**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

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

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

\_\_\_\_\_ 850.00

\_\_\_\_\_



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 34
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Price for Congress**

Full Name (Last, First, Middle Initial) <b>A. Frank T. Stritter</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 17 / 2012	
Mailing Address 167 Ocean Blvd W		<b>Transaction ID : C6746342</b>	
City Holden Beach	State NC	Zip Code 28462-5024	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer N/A	Occupation Retired		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>B. Joseph G. Vicars</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 03 / 2012	
Mailing Address 804 Hermitage Court Drive		<b>Transaction ID : C6607873</b>	
City Durham	State NC	Zip Code 27707-1639	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Merrill Lynch	Occupation financial advisor		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>C. C. Allen Mullinix</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 09 / 2012	
Mailing Address 576 Fearington Post		<b>Transaction ID : C6627866A</b>	
City Pittsboro	State NC	Zip Code 27312-8570	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00	
Name of Employer n/a	Occupation Retired		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 425.00		

\* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....	325.00
<b>TOTAL</b> This Period (last page this line number only).....	325.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 34
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Price for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ACT BLUE**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
25.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 09 / 2012

**Transaction ID : C6627866AB**

Amount of Each Receipt this Period  
25.00

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

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

0.00

9245.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 34
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Price for Congress**

**A. Accenture PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800-600 Connecticut Ave  
 City Washington State DC Zip Code 20006  
 FEC ID number of contributing federal political committee. **C** C00300707  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 6000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012  
**Transaction ID : C6746305**  
 Amount of Each Receipt this Period  
 3000.00

**B. American Podiatric Medical Assn- Podiatry PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9312 Old Georgetown Road  
 City Bethesda State MD Zip Code 20814  
 FEC ID number of contributing federal political committee. **C** C00008839  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 09 / 2012  
**Transaction ID : C6627825**  
 Amount of Each Receipt this Period  
 300.00

**C. AMPAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1101 Vermont Ave., NW  
 City Washington State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C** C00000422  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012  
**Transaction ID : C6746306**  
 Amount of Each Receipt this Period  
 1000.00

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

4300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 34
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Price for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BUILD PAC**

Mailing Address 1201 15th Street, NW

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 03 / 2012

**Transaction ID : C6607326**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Credit Union Leg. Action Council**

Mailing Address P.O. Box 576

City Washington State DC Zip Code 20044

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : C6746307**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Honeywell International PAC**

Mailing Address 1001-500W Pennsylvania Ave NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : C6746311**

Amount of Each Receipt this Period  
1500.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 34
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Price for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**KBR PAC**

Mailing Address 601 JEFFERSON  
SUITE 3455B

City HOUSTON State TX Zip Code 77002

FEC ID number of contributing federal political committee. **C** C00431114

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 09 / 2012

**Transaction ID : C6627829**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Mid-Atlantic Laborers' Political League**

Mailing Address 12355 Sunrise Valley Dr

City Reston State VA Zip Code 20191-3467

FEC ID number of contributing federal political committee. **C** C00429175

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : C6746313**

Amount of Each Receipt this Period  
 5000.00

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Connie R. Woodburn**

Mailing Address Cardinal Heath Inc. PAC  
7000 Cardinal Place

City Dublin State OH Zip Code 43017

FEC ID number of contributing federal political committee. **C** C00332833

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 09 / 2012

**Transaction ID : C6627828**

Amount of Each Receipt this Period  
 1000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 34
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Price for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**National Association of Insurance and**

Mailing Address **Financial Advisors PAC**  
1922 F Street, NW

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C00005249**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 09 / 2012

**Transaction ID : C6627837**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**NOVO NORDISK INC. PAC**

Mailing Address **500 New Jersey Avenue NW**  
Suite 350

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00424838**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : C6746339**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Palmetto PAC**

Mailing Address **PO BOX 30811**

City BETHESDA State MD Zip Code 20824

FEC ID number of contributing federal political committee. **C C00414631**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 09 / 2012

**Transaction ID : C6627858**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 34
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Price for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Realtors PAC**

Mailing Address 430 N. Michigan Avenue

City Chicago State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : C6746340**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
**TEXAS INSTRUMENTS INCORPORATED POLITICAL ACTION COMMITTEE (TI PAC)**

Mailing Address PO BOX 742496

City DALLAS State TX Zip Code 75374

FEC ID number of contributing federal political committee. **C** C00007070

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : C6746341**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**US Airways Group PAC**

Mailing Address 1401 H STREET, NW  
SUITE 1075

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00313650

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 03 / 2012

**Transaction ID : C6607332**

Amount of Each Receipt this Period  
1000.00

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

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

7000.00

24800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 34			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Price for Congress**

Full Name (Last, First, Middle Initial) <b>A. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2012
Mailing Address 4101 Doie Cope Road		Amount of Each Disbursement this Period 85.80
City Raleigh	State NC	
Zip Code 27613	Purpose of Disbursement Payroll Processing	<b>Transaction ID : D386364</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mr. Gordon Anderson</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2012
Mailing Address 500 North Franklin Drive		Amount of Each Disbursement this Period 268.40
City Sanford	State NC	
Zip Code 27330	Purpose of Disbursement Reimbursement - mileage	<b>Transaction ID : D386363</b>
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2012
Mailing Address P.O. Box 85950		Amount of Each Disbursement this Period 37.73
City Louisville	State KY	
Zip Code 40285	Purpose of Disbursement Office Phones	<b>Transaction ID : D386346</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	391.93
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 34		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Price for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2012
Mailing Address P.O. Box 85950		Amount of Each Disbursement this Period 416.31 <b>Transaction ID : D386347</b>
City Louisville	State KY	
Zip Code 40285	Purpose of Disbursement Office Phones	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Mrs. Sonia Barnes</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2012
Mailing Address 138 White Deer Trail		Amount of Each Disbursement this Period 71.55 <b>Transaction ID : D386340</b>
City Garner	State NC	
Zip Code 27529	Purpose of Disbursement Reimbursement mileage	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. First Data Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2012
Mailing Address 1307 Walt Whitman Road		Amount of Each Disbursement this Period 213.60 <b>Transaction ID : D386355</b>
City Melville	State NY	
Zip Code 11747	Purpose of Disbursement Bank Charge	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	701.46
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 34		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Price for Congress**

Full Name (Last, First, Middle Initial) <b>A. First Data Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2012
Mailing Address 1307 Walt Whitman Road		Amount of Each Disbursement this Period 101.16 <b>Transaction ID : D386356</b>
City Melville State NY Zip Code 11747	Purpose of Disbursement Bank Charge Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. First Data Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2012
Mailing Address 1307 Walt Whitman Road		Amount of Each Disbursement this Period 24.10 <b>Transaction ID : D386357</b>
City Melville State NY Zip Code 11747	Purpose of Disbursement Bank Charge Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Fraioli &amp; Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2012
Mailing Address P. O. Box 75214		Amount of Each Disbursement this Period 204.73 <b>Transaction ID : D386361</b>
City Washington State DC Zip Code 20013-5214	Purpose of Disbursement Reimb - Event Beverages Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> expenditures > \$200 listed
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	125.26
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 34	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Price for Congress**

Full Name (Last, First, Middle Initial) <b>A. Lasting Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2012
Mailing Address P. O. Box 18361		Amount of Each Disbursement this Period 276.48 <b>Transaction ID : D386351</b>
City Raleigh	State NC	
Zip Code 27619	Purpose of Disbursement Printing	Category/Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. McLaurin Parking</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address PO Box 781		Amount of Each Disbursement this Period 625.00 <b>Transaction ID : D386345</b>
City Raleigh	State NC	
Zip Code 27602	Purpose of Disbursement Parking	Category/Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>C. Ms. Dana Neely</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2012
Mailing Address 817 Hillsborough St Apt A302		Amount of Each Disbursement this Period 80.91 <b>Transaction ID : D386360</b>
City Raleigh	State NC	
Zip Code 27603-1462	Purpose of Disbursement Reimbursement - Mileage	Category/Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	982.91
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 34	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Price for Congress**

Full Name (Last, First, Middle Initial) <b>A. NGP VAN Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2012
Mailing Address 1101 15th Street NW Suite 500		Amount of Each Disbursement this Period 2700.00 <b>Transaction ID : D386358</b>
City Washington State DC Zip Code 20005	Purpose of Disbursement invoice # 48302 Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Orange Enterprises, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2012
Mailing Address 348 Elizabeth Brady Road		Amount of Each Disbursement this Period 1618.03 <b>Transaction ID : D386350</b>
City Hillsborough State NC Zip Code 27278	Purpose of Disbursement Mailing Services Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Paychex Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2012
Mailing Address 4625-130 Creekstone Drive		Amount of Each Disbursement this Period 44.00 <b>Transaction ID : D386349</b>
City Durham State NC Zip Code 27703	Purpose of Disbursement Payroll Processing Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4362.03
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 34	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Price for Congress**

Full Name (Last, First, Middle Initial) <b>A. Piedmont Natural Gas</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2012
Mailing Address P.O. Box 660920		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : D386365</b>
City Dallas	State TX	
Zip Code 75266-0920	Purpose of Disbursement Gas & Electric	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. SKDKnickerbocker LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2012
Mailing Address 1818 N Street, NW Suite 450		Amount of Each Disbursement this Period 20454.06 <b>Transaction ID : D386354</b>
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement Direct Mail	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. U.S. Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2012
Mailing Address 310 New Bern Avenue		Amount of Each Disbursement this Period 220.00 <b>Transaction ID : D386343</b>
City Raleigh	State NC	
Zip Code 27611	Purpose of Disbursement Postage (general)	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	20684.06
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 34			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Price for Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2012
Mailing Address One Verizon Way			Amount of Each Disbursement this Period 212.62
City Basking Ridge	State NJ	Zip Code 07920-1097	Transaction ID : D386352
Purpose of Disbursement mobile phone		001 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. YoginKrupa Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2012
Mailing Address 10450 Durant Road Suite 101			Amount of Each Disbursement this Period 1000.00
City Raleigh	State NC	Zip Code 27614	Transaction ID : D386370
Purpose of Disbursement Catering		003 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Mrs. Sonia Barnes</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2012
Mailing Address 138 White Deer Trail			Amount of Each Disbursement this Period 125.62
City Garner	State NC	Zip Code 27529	Transaction ID : D386341
Purpose of Disbursement Reimb - refreshments		007 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1338.24
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 34		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Price for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ms. Dana Neely</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2012
Mailing Address 817 Hillsborough St Apt A302		Amount of Each Disbursement this Period 96.06 <b>Transaction ID : D386359</b>
City Raleigh State NC Zip Code 27603-1462	Purpose of Disbursement Reimbursement - FedEx Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. FedEx Office</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2012
Mailing Address 2712 Hillsborough St		Amount of Each Disbursement this Period 96.06 <b>Transaction ID : D386399</b> <b>[MEMO ITEM]</b>
City Raleigh State NC Zip Code 27607-7133	Purpose of Disbursement event supplies Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Mr. William Munn</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2012
Mailing Address 201 Pony Path		Amount of Each Disbursement this Period 19.99 <b>Transaction ID : D386362</b>
City Raeford State NC Zip Code 28376	Purpose of Disbursement Reimb -office supplies Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	116.05
<b>TOTAL</b> This Period (last page this line number only).....	28701.42

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 34
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Price for Congress**

Full Name (Last, First, Middle Initial) <b>A. DCABP PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2012
Mailing Address P. O. Box 428		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : D386353</b>
City Durham	State NC	
Zip Code 27702	Purpose of Disbursement Contribution	Category/ Type 011
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Foriest for Congress Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2012
Mailing Address 2211 Quail Drive		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : D386367</b>
City Graham	State NC	
Zip Code 27253	Purpose of Disbursement Contribution	Category/ Type 011
Candidate Name <b>Mr. Anthony Foriest</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: NC District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Hayden Rogers for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2012
Mailing Address P.O. Box 400		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : D386366</b>
City Murphy	State NC	
Zip Code 28906-0400	Purpose of Disbursement Contribution	Category/ Type 011
Candidate Name <b>Hayden Rogers</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: NC District: 11	Other (specify)	

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 34
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Price for Congress**

Full Name (Last, First, Middle Initial) <b>A. NC Democratic Party</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2012
Mailing Address 220 Hillsborough Street		Amount of Each Disbursement this Period 20000.00 <b>Transaction ID : D386344</b>
City Raleigh State NC Zip Code 27603	Purpose of Disbursement Transfer of Funds/Coord Campaign Category/Type: 011	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. People's Alliance State PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2012
Mailing Address P.O. Box 3053		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : D386342</b>
City Durham State NC Zip Code 27705	Purpose of Disbursement Contribution Category/Type: 011	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. RWCA M-PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2012
Mailing Address P.O. Box 27016		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : D386368</b>
City Raleigh State NC Zip Code 27611	Purpose of Disbursement Contribution Category/Type: 011	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	23000.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 34	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Price for Congress**

Full Name (Last, First, Middle Initial) <b>A. Wake County Voter Education Coalition</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2012	
Mailing Address 5216 Cardinal Grove Blvd			Amount of Each Disbursement this Period 2000.00	
City Raleigh	State NC	Zip Code 27616	Transaction ID : D386369	
Purpose of Disbursement Contribution		011 Category/ Type		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2000.00
<b>TOTAL</b> This Period (last page this line number only).....	28000.00