

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

Keep Conservatives United

ADDRESS (number and street) Post Office Box 246

Wake Forest NC 27588

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

C C00499525

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)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 - Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 - Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P) General (12G) Runoff (12R)
 - Convention (12C) Special (12S)

Election on [MM] / [DD] / [YYYY] in the State of []

- (d) 30-Day POST-Election Report for the:
- General (30G) Runoff (30R) Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [07] / [01] / [2014] through [09] / [30] / [2014]

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Bob Harris

Signature of Treasurer Bob Harris [Electronically Filed] Date 10 / 01 / 2014

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

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Keep Conservatives United

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="3034.59"/>	<input type="text" value="3034.59"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="24246.48"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="62000.00"/>	<input type="text" value="366150.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="86246.48"/>	<input type="text" value="369184.59"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="59913.87"/>	<input type="text" value="342851.98"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="26332.61"/>	<input type="text" value="26332.61"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="94500.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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 3X (Rev. 06/2004)

Write or Type Committee Name

Keep Conservatives United

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	35000.00	292150.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	35000.00	292150.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	35000.00	292150.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	27000.00	74000.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	62000.00	366150.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	62000.00	366150.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	6876.76	79819.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	6876.76	79819.81
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	53037.11	252032.17
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	11000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	59913.87	342851.98
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	59913.87	342851.98

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	35000.00	292150.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	35000.00	292150.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	6876.76	79819.81
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	6876.76	79819.81

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

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

FOR LINE NUMBER: PAGE 6 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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)
Keep Conservatives United

Full Name (Last, First, Middle Initial)
A. Glen Raven, Inc.

Mailing Address 1831 North Park Avenue

City State Zip Code
Glen Raven NC 27217

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 08 / 2014
Transaction ID : SA11AI.4423

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. Robert L Luddy

Mailing Address 4641 Paragon Park Rd

City State Zip Code
Raleigh NC 27616

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

Name of Employer Occupation
Captive Aire Systems CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
60000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 08 / 2014
Transaction ID : SA11AI.4389

Amount of Each Receipt this Period
10000.00

Full Name (Last, First, Middle Initial)
C. Republican State Leadership Committee

Mailing Address 1201 F Street, NW, #675

City State Zip Code
Washington DC 20004

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
95000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 07 / 2014
Transaction ID : SA11AI.4388

Amount of Each Receipt this Period
20000.00

SUBTOTAL of Receipts This Page (optional).....▶	35000.00
TOTAL This Period (last page this line number only).....▶	35000.00

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

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

FOR LINE NUMBER: PAGE 7 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Keep Conservatives United

A. Bob Harris
 Full Name (Last, First, Middle Initial)
 Mailing Address 3806 Lassiter Mill Rd
 City Raleigh State NC Zip Code 27609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Research Consulting
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 65750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 02 / 2014
Transaction ID : SA13.4377
 Amount of Each Receipt this Period
 15000.00
 Loan

B. Bob Harris
 Full Name (Last, First, Middle Initial)
 Mailing Address 3806 Lassiter Mill Rd
 City Raleigh State NC Zip Code 27609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Research Consulting
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 77750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2014
Transaction ID : SA13.4428
 Amount of Each Receipt this Period
 12000.00
 Loan

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) ▼
 Aggregate Year-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).....▶	27000.00
TOTAL This Period (last page this line number only).....▶	27000.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Keep Conservatives United

Full Name (Last, First, Middle Initial)

A. BB&T

Mailing Address 6659 Falls of Neuse Rd

City Raleigh State NC Zip Code 27615

Purpose of Disbursement
PAC Bank Service Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 21 / 2014

Transaction ID : SB21B.4429

Amount of Each Disbursement this Period

64.00

Full Name (Last, First, Middle Initial)

B. BB&T

Mailing Address 6659 Falls of Neuse Rd

City Raleigh State NC Zip Code 27615

Purpose of Disbursement
PAC Bank Service Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2014

Transaction ID : SB21B.4433

Amount of Each Disbursement this Period

156.00

Full Name (Last, First, Middle Initial)

C. CM&Co, LLC

Mailing Address PO Box 97275

City Raleigh State NC Zip Code 27624

Purpose of Disbursement
PAC Accounting Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 21 / 2014

Transaction ID : SB21B.4432

Amount of Each Disbursement this Period

2161.10

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

2381.10

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Keep Conservatives United

Full Name (Last, First, Middle Initial)

A. Ellis Boyle Law PLLC

Mailing Address 507 N Blount St

City Raleigh State NC Zip Code 27604

Purpose of Disbursement
PAC Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 14 / 2014

Transaction ID : SB21B.4436

Amount of Each Disbursement this Period

501.66

Full Name (Last, First, Middle Initial)

B. Impact Strategies, Inc.

Mailing Address PO Box 18165

City Raleigh State NC Zip Code 27619

Purpose of Disbursement
Advertising Production - IE Prepayment

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 21 / 2014

Transaction ID : SB21B.4431

Amount of Each Disbursement this Period

3850.00

Full Name (Last, First, Middle Initial)

C. Ogletree, Deakins, Nash, Smoak & Stewart,

Mailing Address Post Office Box 89

City Columbia State SC Zip Code 29202

Purpose of Disbursement
PAC Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 14 / 2014

Transaction ID : SB21B.4434

Amount of Each Disbursement this Period

144.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

4495.66

6876.76

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Keep Conservatives United** Transaction ID : **SC/10.4103**

LOAN SOURCE Full Name (Last, First, Middle Initial) Bob Harris	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3806 Lassiter Mill Rd	
City Raleigh State NC ZIP Code 27609	

Original Amount of Loan 3500.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 3500.00
------------------------------------	------------------------------------	--------------------------------------------------------

TERMS

Date Incurred: M M / D D / Y Y Y Y Y Y / /

Date Due: M M / D D / Y Y Y Y Y Y

Interest Rate: % (apr)

Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. 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)..... ▶	<input type="text" value="3500.00"/>
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 3X)

LOANS

NAME OF COMMITTEE (In Full) **Keep Conservatives United** Transaction ID : **SC/10.4104**

LOAN SOURCE Full Name (Last, First, Middle Initial) Bob Harris	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3806 Lassiter Mill Rd	
City Raleigh State NC ZIP Code 27609	

Original Amount of Loan 3000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 3000.00
------------------------------------	------------------------------------	--------------------------------------------------------

TERMS

Date Incurred: M M / D D / Y Y Y Y Y Y / /

Date Due: M M / D D / Y Y Y Y Y Y

Interest Rate: % (apr)

Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. 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)..... ▶	<input type="text" value="3000.00"/>
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 3X)

LOANS

NAME OF COMMITTEE (In Full) **Keep Conservatives United** Transaction ID : **SC/10.4189**

LOAN SOURCE Full Name (Last, First, Middle Initial) Bob Harris	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3806 Lassiter Mill Rd	
City Raleigh State NC ZIP Code 27609	

Original Amount of Loan 14000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 14000.00
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TERMS

Date Incurred: M M / D D / Y Y Y Y Y Y / /

Date Due: M M / D D / Y Y Y Y Y Y

Interest Rate: % (apr)

Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. 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)..... ▶	<input type="text" value="14000.00"/>
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 3X)

LOANS

NAME OF COMMITTEE (In Full) **Keep Conservatives United** Transaction ID : **SC/10.4296**

LOAN SOURCE Full Name (Last, First, Middle Initial) Bob Harris	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3806 Lassiter Mill Rd	
City Raleigh State NC ZIP Code 27609	

Original Amount of Loan 15000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 15000.00
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TERMS

Date Incurred: M M / D D / Y Y Y Y Y Y / /

Date Due: M M / D D / Y Y Y Y Y Y

Interest Rate: % (apr)

Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. 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)..... ▶	<input type="text" value="15000.00"/>
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 3X)

LOANS

NAME OF COMMITTEE (In Full) **Keep Conservatives United** Transaction ID : SC/10.4352

LOAN SOURCE Full Name (Last, First, Middle Initial) Bob Harris	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3806 Lassiter Mill Rd	
City Raleigh State NC ZIP Code 27609	

Original Amount of Loan 32000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 32000.00
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TERMS

Date Incurred: MM / DD / YYYY (06 / 20 / 2014) Date Due: MM / DD / YYYY (ON DEMAND) Interest Rate: 0.00 % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶	[] 32000.00
TOTALS This Period (last page in this line only)..... ▶	[]

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 3X)

LOANS

NAME OF COMMITTEE (In Full) **Keep Conservatives United** Transaction ID : **SC/10.4377**

LOAN SOURCE Full Name (Last, First, Middle Initial) Bob Harris	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3806 Lassiter Mill Rd	
City Raleigh State NC ZIP Code 27609	

Original Amount of Loan 15000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 15000.00
-------------------------------------	------------------------------------	---------------------------------------------------------

TERMS

Date Incurred: MM / DD / YYYY (07 / 02 / 2014) Date Due: MM / DD / YYYY (ON DEMAND) Interest Rate: 0.00 % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....▶	15000.00
TOTALS This Period (last page in this line only).....▶	[]

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 3X)

LOANS

NAME OF COMMITTEE (In Full) **Keep Conservatives United** Transaction ID : **SC/10.4428**

LOAN SOURCE Full Name (Last, First, Middle Initial) Bob Harris	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3806 Lassiter Mill Rd	
City Raleigh State NC ZIP Code 27609	

Original Amount of Loan 12000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 12000.00
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TERMS

Date Incurred: M M / D D / Y Y Y Y Y Y / /

Date Due: M M / D D / Y Y Y Y Y Y

Interest Rate: % (apr)

Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. 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).....▶	<input type="text" value="12000.00"/>
TOTALS This Period (last page in this line only).....▶	<input type="text" value="94500.00"/>

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

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Keep Conservatives United
FEC IDENTIFICATION NUMBER
C C00499525
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Advantage Inc.
Mailing Address 2300 Clarendon Blvd STE 303
City Arlington State VA Zip Code 22201
Purpose of Expenditure Telemarketing
Name of Federal Candidate PHILIP EDWARD JR BERGER
Calendar Year-To-Date Per Election for Office Sought 129825.17
Date of Public Distribution/Dissemination 07/14/2014
Amount 322.05
Transaction ID : SE.4425
Date of Disbursement or Obligation 07/14/2014
Office Sought: House District: 06 State: NC
Disbursement For: Other (specify) Runoff

Full Name of Payee Creative Direct, LLC
Mailing Address 25 E. Main St
City Richmond State VA Zip Code 23219
Purpose of Expenditure Direct Mail Advertising
Name of Federal Candidate BRADLEY MARK WALKER
Calendar Year-To-Date Per Election for Office Sought 94732.12
Date of Public Distribution/Dissemination 07/07/2014
Amount 3240.00
Transaction ID : SE.4378
Date of Disbursement or Obligation 07/07/2014
Office Sought: House District: 06 State: NC
Disbursement For: Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures 3562.05
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Signature Bob Harris [Electronically Filed] Date 10/01/2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Keep Conservatives United	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00499525 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Creative Direct, LLC	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 07 / 07 / 2014 </div>						
Mailing Address 25 E. Main St	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 9720.00 </div>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">City</td> <td style="width:30%;">State</td> <td style="width:40%;">Zip Code</td> </tr> <tr> <td>Richmond</td> <td>VA</td> <td>23219</td> </tr> </table>	City	State	Zip Code	Richmond	VA	23219	Transaction ID : SE.4379 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 07 / 07 / 2014 </div>
City	State	Zip Code					
Richmond	VA	23219					
Purpose of Expenditure Direct Mail Advertising	Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>						
Name of Federal Candidate PHILIP EDWARD JR BERGER	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>06</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NC</u>						
Calendar Year-To-Date Per Election for Office Sought	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 104452.12 </div>						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Runoff</u>							

Full Name of Payee Creative Direct, LLC	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 07 / 09 / 2014 </div>						
Mailing Address 25 E. Main St	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 2801.00 </div>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">City</td> <td style="width:30%;">State</td> <td style="width:40%;">Zip Code</td> </tr> <tr> <td>Richmond</td> <td>VA</td> <td>23219</td> </tr> </table>	City	State	Zip Code	Richmond	VA	23219	Transaction ID : SE.4394 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 07 / 09 / 2014 </div>
City	State	Zip Code					
Richmond	VA	23219					
Purpose of Expenditure Direct Mail Advertising	Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>						
Name of Federal Candidate PHILIP EDWARD JR BERGER	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>06</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NC</u>						
Calendar Year-To-Date Per Election for Office Sought	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 129503.12 </div>						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Runoff</u>							

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 12521.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 0.00 </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 12521.00 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bob Harris
 Signature

[Electronically Filed] Date
M M / D D / Y Y Y Y Y Y
10 / 01 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Keep Conservatives United	FEC IDENTIFICATION NUMBER ▼ C C00499525
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Digifonics, Inc.	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 07 / 08 / 2014
Mailing Address 1632 Pricewood	Amount 2050.00
City Apex State NC Zip Code 27502	Transaction ID : SE.4386 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 07 / 07 / 2014
Purpose of Expenditure Online Advertisement Production	Category/Type []
Name of Federal Candidate BRADLEY MARK WALKER	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 111502.12	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff

Full Name of Payee Impact Strategies, Inc.	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 07 / 07 / 2014
Mailing Address PO Box 18165	Amount 2696.03
City Raleigh State NC Zip Code 27619	Transaction ID : SE.4367 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 07 / 02 / 2014
Purpose of Expenditure Radio Advertising	Category/Type []
Name of Federal Candidate PHILIP EDWARD JR BERGER	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 79484.09	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	4746.03
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	[]
(c) TOTAL Independent Expenditures..... ▶	[]

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bob Harris
Signature

[Electronically Filed]

Date M M M / D D D / Y Y Y Y Y Y
10 / 01 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Keep Conservatives United	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00499525 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Impact Strategies, Inc.	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 07 / 07 / 2014 </div>						
Mailing Address PO Box 18165	Amount <div style="border: 1px solid black; padding: 2px;"> M M M M / D D D D / Y Y Y Y Y Y 2696.03 </div>						
<table style="width:100%; border: none;"> <tr> <td style="width:35%;">City</td> <td style="width:30%;">State</td> <td style="width:35%;">Zip Code</td> </tr> <tr> <td>Raleigh</td> <td>NC</td> <td>27619</td> </tr> </table>	City	State	Zip Code	Raleigh	NC	27619	Transaction ID : SE.4368 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M M M / D D D D / Y Y Y Y Y Y 07 / 02 / 2014 </div>
City	State	Zip Code					
Raleigh	NC	27619					
Purpose of Expenditure Radio Advertising	Category/Type <div style="border: 1px solid black; padding: 2px;"> M M M M / D D D D / Y Y Y Y Y Y </div>						
Name of Federal Candidate BRADLEY MARK WALKER	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>06</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NC</u>						
Calendar Year-To-Date Per Election for Office Sought	<div style="border: 1px solid black; padding: 2px;"> M M M M / D D D D / Y Y Y Y Y Y 82180.12 </div>						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ <u>Runoff</u>							

Full Name of Payee Impact Strategies, Inc.	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M M M / D D D D / Y Y Y Y Y Y 07 / 07 / 2014 </div>						
Mailing Address PO Box 18165	Amount <div style="border: 1px solid black; padding: 2px;"> M M M M / D D D D / Y Y Y Y Y Y 9312.00 </div>						
<table style="width:100%; border: none;"> <tr> <td style="width:35%;">City</td> <td style="width:30%;">State</td> <td style="width:35%;">Zip Code</td> </tr> <tr> <td>Raleigh</td> <td>NC</td> <td>27619</td> </tr> </table>	City	State	Zip Code	Raleigh	NC	27619	Transaction ID : SE.4369 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M M M / D D D D / Y Y Y Y Y Y 07 / 02 / 2014 </div>
City	State	Zip Code					
Raleigh	NC	27619					
Purpose of Expenditure TV Advertising	Category/Type <div style="border: 1px solid black; padding: 2px;"> M M M M / D D D D / Y Y Y Y Y Y </div>						
Name of Federal Candidate PHILIP EDWARD JR BERGER	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>06</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NC</u>						
Calendar Year-To-Date Per Election for Office Sought	<div style="border: 1px solid black; padding: 2px;"> M M M M / D D D D / Y Y Y Y Y Y 91492.12 </div>						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ <u>Runoff</u>							

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> M M M M / D D D D / Y Y Y Y Y Y 12008.03 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;"> M M M M / D D D D / Y Y Y Y Y Y </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> M M M M / D D D D / Y Y Y Y Y Y </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bob Harris

[Electronically Filed]

Date

M M M M / D D D D / Y Y Y Y Y Y
 10 / 01 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Keep Conservatives United
FEC IDENTIFICATION NUMBER
C C00499525
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Impact Strategies, Inc.
Mailing Address PO Box 18165
City Raleigh State NC Zip Code 27619
Purpose of Expenditure TV Advertising
Name of Federal Candidate PHILIP EDWARD JR BERGER
Office Sought: House District: 06 State: NC
Calendar Year-To-Date Per Election for Office Sought 122802.12
Disbursement For: Other (specify) Runoff

Full Name of Payee
Impact Strategies, Inc.
Mailing Address PO Box 18165
City Raleigh State NC Zip Code 27619
Purpose of Expenditure TV Advertising
Name of Federal Candidate BRADLEY MARK WALKER
Office Sought: House District: 06 State: NC
Calendar Year-To-Date Per Election for Office Sought 126702.12
Disbursement For: Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures 15200.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Signature Bob Harris [Electronically Filed] Date 10/01/2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Keep Conservatives United
FEC IDENTIFICATION NUMBER
C C00499525
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Snyder Interactive
Mailing Address: 115 Pasquotank Dr
City: Raleigh State: NC Zip Code: 27609
Purpose of Expenditure: Online Advertising
Date of Public Distribution/Dissemination: 07/08/2014
Amount: 5000.00
Transaction ID: SE.4380
Date of Disbursement or Obligation: 07/07/2014
Name of Federal Candidate: BRADLEY MARK WALKER
Support/Oppose: Oppose
Office Sought: House District: 06 State: NC
Calendar Year-To-Date Per Election for Office Sought: 109452.12
Disbursement For: Other (specify) Runoff

Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure
Category/Type
Name of Federal Candidate
Support/Oppose
Office Sought: House District: State:
Calendar Year-To-Date Per Election for Office Sought
Disbursement For: Other (specify)

Table with 2 columns: Description and Amount.
(a) SUBTOTAL of Itemized Independent Expenditures: 5000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures: 53037.11

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature: Bob Harris [Electronically Filed] Date: 10/01/2014