

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

REPLACEMENTS LTD PAC

ADDRESS (number and street) PO BOX 26029  
 Check if different than previously reported. (ACC)  
GREENSBORO NC 27420

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00427849

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 Quarterly 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 (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day Post -Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 04 01 2008 through 06 30 2008

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 Mr. Gary M Palmer

Signature of Treasurer Electronically Filed by Mr. Gary M Palmer Date 07 14 2008

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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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
REPLACEMENTS LTD PAC

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		15657.55
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	20657.55									
(c) Total Receipts (from Line 19) .....	0.00	5000.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	20657.55	20657.55								
7. Total Disbursements (from Line 31) .....	2396.00	2396.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	18261.55	18261.55								
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									

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**

Write or Type Committee Name  
REPLACEMENTS LTD PAC

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	0.00	5000.00
(i) Itemized (use Schedule A) .....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	5000.00
(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) .....	0.00	5000.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
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 Transfer (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)) .....	0.00	5000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	0.00	5000.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared 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.....	60.80	60.80
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	60.80	60.80
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	2300.00	2300.00
24. Independent Expenditure (use Schedule E) .....	35.20	35.20
25. Coordinated Expenditures Made by Party Committees (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	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	2396.00	2396.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2396.00	2396.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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) .....	0.00	5000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	5000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	60.80	60.80
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	60.80	60.80

**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)

PAGE 6 / 12

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)  
REPLACEMENTS LTD PAC

A.

Full Name (Last, First, Middle Initial)  
KAY R HAGAN

Mailing Address 305 MEADOWBROOK TERRACE

City Greensboro State NC Zip Code 27408

Purpose of Disbursement  
support

Candidate Name  
KAY R HAGAN

Office Sought:  House  
 Senate  
 President  
State: NC District: 00

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.4222  
Date of Disbursement

05 / 15 / 2008

Amount of Each Disbursement this Period

2300.00

SUBTOTAL of Disbursements This Page (optional) ▶

2300.00

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

2300.00

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) REPLACEMENTS LTD PAC	FEC IDENTIFICATION NUMBER <b>C</b> C00427849
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
REPLACEMENTS LTD PAC

Mailing Address  
PO BOX 26029

City State Zip Code  
GREENSBORO NC 27420

Purpose of Expenditure  
Photocopying of Voter Recommendations

Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
HILLARY RODHAM CLINTON

Calendar Year-To-Date Per Election for Office Sought

Date  
M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 8

Amount

Transaction ID: SE.4209

Office Sought:  House State: \_\_\_\_\_  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2008

Full Name (Last, First, Middle, Initial) of Payee  
REPLACEMENTS LTD PAC

Mailing Address  
PO BOX 26029

City State Zip Code  
GREENSBORO NC 27420

Purpose of Expenditure  
Photocopying of Voter Recommendations

Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
Barak OBAMA

Calendar Year-To-Date Per Election for Office Sought

Date  
M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 8

Amount

Transaction ID: SE.4210

Office Sought:  House State: \_\_\_\_\_  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2008

(a) SUBTOTAL of Itemized Independent Expenditures .....	<input style="width:150px" type="text" value="6.40"/>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	<input style="width:150px" type="text"/>
(c) TOTAL Independent Expenditures .....	<input style="width:150px" type="text"/>

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.

Mr. Gary M Palmer  
Signature

Date M M / D D / Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) REPLACEMENTS LTD PAC	FEC IDENTIFICATION NUMBER <b>C</b> C00427849
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
REPLACEMENTS LTD PAC

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Mailing Address  
PO BOX 26029

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City GREENSBORO	State NC	Zip Code 27420
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Purpose of Expenditure Photocopying of Voter Recommendations	Category/ Type
-----------------------------------------------------------------	-------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
Mike HUCKABEE

---

Calendar Year-To-Date Per Election for Office Sought	9.60
---------------------------------------------------------	------

Date  
M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 8

Amount  
3.20

Transaction ID: SE.4211

Office Sought:  House State: \_\_\_\_\_  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2008

Full Name (Last, First, Middle, Initial) of Payee  
REPLACEMENTS LTD PAC

---

Mailing Address  
PO BOX 26029

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City GREENSBORO	State NC	Zip Code 27420
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Purpose of Expenditure Photocopying of Voter Recommendations	Category/ Type
-----------------------------------------------------------------	-------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
ALAN KEYES

---

Calendar Year-To-Date Per Election for Office Sought	12.80
---------------------------------------------------------	-------

Date  
M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 8

Amount  
3.20

Transaction ID: SE.4212

Office Sought:  House State: \_\_\_\_\_  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2008

(a) SUBTOTAL of Itemized Independent Expenditures .....	6.40
(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.

Mr. Gary M Palmer  
Signature

Date M M / D D / Y Y Y Y  
0 7 / 1 4 / 2 0 0 8



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) REPLACEMENTS LTD PAC	FEC IDENTIFICATION NUMBER <b>C</b> C00427849
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
REPLACEMENTS LTD PAC

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Mailing Address  
PO BOX 26029

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City GREENSBORO	State NC	Zip Code 27420
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Purpose of Expenditure Photocopying of Voter Recommendations	Category/Type 011
-----------------------------------------------------------------	----------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
KAY R HAGAN

---

Calendar Year-To-Date Per Election for Office Sought	3.20
------------------------------------------------------	------

Date  
M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 8

Amount  
3.20

Transaction ID: SE.4213

Office Sought:  House State: NC  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2008

Full Name (Last, First, Middle, Initial) of Payee  
REPLACEMENTS LTD PAC

---

Mailing Address  
PO BOX 26029

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City GREENSBORO	State NC	Zip Code 27420
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Purpose of Expenditure Photocopying of Voter Recommendations	Category/Type
-----------------------------------------------------------------	---------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
JIM NEAL

---

Calendar Year-To-Date Per Election for Office Sought	6.40
------------------------------------------------------	------

Date  
M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 8

Amount  
3.20

Transaction ID: SE.4214

Office Sought:  House State: NC  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2008

(a) SUBTOTAL of Itemized Independent Expenditures .....	6.40
(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.

Mr. Gary M Palmer  
Signature

Date M M / D D / Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) REPLACEMENTS LTD PAC	FEC IDENTIFICATION NUMBER <b>C</b> C00427849
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
REPLACEMENTS LTD PAC

Mailing Address  
PO BOX 26029

City State Zip Code  
GREENSBORO NC 27420

Purpose of Expenditure  
Photocopying of Voter Recommendations

Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
ELIZABETH DOLE

Calendar Year-To-Date Per Election for Office Sought **9.60**

Date  
M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 8

Amount  
**3.20**

Transaction ID: SE.4215

Office Sought:  House State: NC  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2008

Full Name (Last, First, Middle, Initial) of Payee  
REPLACEMENTS LTD PAC

Mailing Address  
PO BOX 26029

City State Zip Code  
GREENSBORO NC 27420

Purpose of Expenditure  
Photocopying of Voter Recommendations

Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
JOHNNY JEFFREY CARTER

Calendar Year-To-Date Per Election for Office Sought **3.20**

Date  
M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 8

Amount  
**3.20**

Transaction ID: SE.4216

Office Sought:  House State: NC  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2008

(a) SUBTOTAL of Itemized Independent Expenditures .....	<b>6.40</b>
(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.

Mr. Gary M Palmer  
Signature

Date M M / D D / Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) REPLACEMENTS LTD PAC	FEC IDENTIFICATION NUMBER <b>C</b> C00427849
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
REPLACEMENTS LTD PAC

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Mailing Address  
PO BOX 26029

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City GREENSBORO	State NC	Zip Code 27420
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Purpose of Expenditure Photocopying of Voter Recommendations	Category/ Type
-----------------------------------------------------------------	-------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
JAYSON ANTHONY OVITTORE

---

Calendar Year-To-Date Per Election for Office Sought	6.40
---------------------------------------------------------	------

Date  
M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 8

Amount  
3.20

Transaction ID: SE.4217

Office Sought:  House State: NC  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2008

Full Name (Last, First, Middle, Initial) of Payee  
REPLACEMENTS LTD PAC

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Mailing Address  
PO BOX 26029

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City GREENSBORO	State NC	Zip Code 27420
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Purpose of Expenditure Photocopying of Voter Recommendations	Category/ Type
-----------------------------------------------------------------	-------------------

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Name of Federal Candidate supported or Opposed by expenditure:  
TERESA SUE BRATTON

---

Calendar Year-To-Date Per Election for Office Sought	3.20
---------------------------------------------------------	------

Date  
M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 8

Amount  
3.20

Transaction ID: SE.4218

Office Sought:  House State: NC  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2008

(a) SUBTOTAL of Itemized Independent Expenditures .....	6.40
(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.

Mr. Gary M Palmer  
Signature

Date M M / D D / Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) REPLACEMENTS LTD PAC		FEC IDENTIFICATION NUMBER <b>C</b> C00427849
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		
Full Name (Last, First, Middle, Initial) of Payee REPLACEMENTS LTD PAC		Date M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 8
Mailing Address PO BOX 26029		Amount 3.20
City State Zip Code GREENSBORO NC 27420		<b>Transaction ID:</b> SE.4219
Purpose of Expenditure Photocopying of Voter Recommendations		Office Sought: <input checked="" type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 13 <input type="checkbox"/> Presidential
Name of Federal Candidate supported or Opposed by expenditure: BRAD MILLER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3.20		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	3.20
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	35.20
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.	
Mr. Gary M Palmer Signature	Date M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 8