

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
KEADLE FOR CONGRESS 2012

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))....	83557.94	186748.02
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	83557.94	186748.02
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	46981.83	111433.62
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	46981.83	111433.62
8. Cash on Hand at Close of Reporting Period (from Line 27).....	325169.40	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	250000.00	

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

KEADLE FOR CONGRESS 2012

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	67120.94	157090.99
(ii) Unitemized.....	11437.00	22157.03
(iii) TOTAL of contributions from individuals ▶	78557.94	179248.02
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	7500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	83557.94	186748.02
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	180000.00	250000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	180000.00	250000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	263557.94	436748.02

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	46981.83	111433.62
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	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	75.00	145.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	47056.83	111578.62

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	108668.29
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	263557.94
25. SUBTOTAL (add Line 23 and Line 24).....	372226.23
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	47056.83
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	325169.40

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

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

FOR LINE NUMBER: PAGE 5 OF 56
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
KEADLE FOR CONGRESS 2012

A. Full Name (Last, First, Middle Initial)
Duane Alton

Mailing Address 712 North Lancashire Lane

City State Zip Code
Liberty Lake WA 99019

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2012

Transaction ID : SA11AI.5083

Amount of Each Receipt this Period
 250.00

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

Mailing Address 430 Fenton Place

City State Zip Code
Charlotte NC 28207

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

Name of Employer Occupation
K & L Gates Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 18 / 2012

Transaction ID : SA11AI.4729

Amount of Each Receipt this Period
 250.00

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

Mailing Address 244 Ponderosa Circle

City State Zip Code
 Mooresville NC 28117

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2012

Transaction ID : SA11AI.5033

Amount of Each Receipt this Period
 50.00

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

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

550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 56
	<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)
KEADLE FOR CONGRESS 2012

A. Full Name (Last, First, Middle Initial)
Martin Boles

Mailing Address 333 South Hope St Suite 3000

City Los Angeles State CA Zip Code 90071

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

Name of Employer Kirkland & Ellis Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 27 / 2012

Transaction ID : SA11AI.5241

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Dr. Terry Bowman

Mailing Address Box 973

City Denton State NC Zip Code 27239

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

Name of Employer Self Employed Occupation Dentist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 20 / 2012

Transaction ID : SA11AI.4950

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Renton K Brodie III

Mailing Address 2130 N Lincoln Park W Apt 13N

City Chicago State IL Zip Code 60614

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2012

Transaction ID : SA11AI.5118

Amount of Each Receipt this Period
 1000.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 56
	<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)
KEADLE FOR CONGRESS 2012

A. Full Name (Last, First, Middle Initial)
Fred Brooks

Mailing Address 413 Granville Rd

City Chapel Hill State NC Zip Code 27514

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

Name of Employer UNC Chapel Hill Occupation Professor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2012

Transaction ID : SA11AI.5126

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
James P Bruner

Mailing Address 202 Carobeth Drive

City Jacksonville State IL Zip Code 62650

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

Name of Employer United Contractors Midwest Inc Occupation President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 16 / 2012

Transaction ID : SA11AI.4924

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 430 Jake Alexander Blvd West

City Salisbury State NC Zip Code 28147

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

Name of Employer Alan F Burke CPA PA Occupation Accountant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2012

Transaction ID : SA11AI.4692

Amount of Each Receipt this Period
 100.00

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

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

1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 56
	<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)
KEADLE FOR CONGRESS 2012

A. Full Name (Last, First, Middle Initial)
Dr. Anthony Caputo

Mailing Address 5255 N Salida Del Sol Dr

City Tucson State AZ Zip Code 85718

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

Name of Employer Southwest Dental Anesthesia Sv Occupation Dental Anesthesiologist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 07 / 2012

Transaction ID : SA11AI.4821

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Edwin Clark Jr.

Mailing Address 629 Academy Ave

City Sewickley State PA Zip Code 15143

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 05 / 2012

Transaction ID : SA11AI.4899

Amount of Each Receipt this Period
 250.00

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

Mailing Address 3801 PGA Blvd Ste 903

City Palm Beach Gardens State FL Zip Code 33410

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

Name of Employer Foresight Management LLC Occupation Executive Coal

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 20 / 2012

Transaction ID : SA11AI.4681

Amount of Each Receipt this Period
 1500.00

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

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

2250.00

**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 56
	<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)
KEADLE FOR CONGRESS 2012

A. Full Name (Last, First, Middle Initial)
Chris Cline

Mailing Address 3801 PGA Blvd Ste 903

City State Zip Code
Palm Beach Gardens FL 33410

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

Name of Employer Occupation
Foresight Management LLC Executive Coal

Receipt For: 2012
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date
3500.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 20 / 2012

Transaction ID : SA11AI.4682

Amount of Each Receipt this Period
1000.00

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

Mailing Address 9936 Villa Granito Lane

City State Zip Code
Granite Bay CA 95746

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

Name of Employer Occupation
Wells Fargo Advisors Financial Advisor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 26 / 2012

Transaction ID : SA11AI.4975

Amount of Each Receipt this Period
250.00

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

Mailing Address 20 Harborage Ilse

City State Zip Code
Fort Lauderdale FL 33316

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

Name of Employer Occupation
Old Dominion Freight Line 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
03 / 08 / 2012

Transaction ID : SA11AI.4911

Amount of Each Receipt this Period
1000.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 56
	<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)
KEADLE FOR CONGRESS 2012

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

Mailing Address Box 1369

City Meredith State NH Zip Code 03253

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

Name of Employer Air Horizons, LLC Occupation Sales Engineer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2012

Transaction ID : SA11AI.5038

Amount of Each Receipt this Period
 500.00

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

Mailing Address 1650 York Rd

City Kings Mountain State NC Zip Code 28086

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

Name of Employer Self Employed Occupation Dentist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2012

Transaction ID : SA11AI.4777

Amount of Each Receipt this Period
 250.00

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

Mailing Address 32400 Fairmount Blvd

City Pepper Pine State OH Zip Code 44124

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2012

Transaction ID : SA11AI.4881

Amount of Each Receipt this Period
 500.00

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

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

1250.00

**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 56
	<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)
KEADLE FOR CONGRESS 2012

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

Mailing Address 522 W Lake Sammamish Pkwy SE

City Bellevue State WA Zip Code 98008

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

Name of Employer Self Employed Occupation Dentist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 10 / 2012

Transaction ID : SA11AI.4840

Amount of Each Receipt this Period
 500.00

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

Mailing Address 401 Temple St

City New Haven State CT Zip Code 06511

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

Name of Employer Halsey Assoc Inc (Retired) Occupation Investment Advisor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2012

Transaction ID : SA11AI.5077

Amount of Each Receipt this Period
 500.00

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

Mailing Address 570 Manor Rd

City Maitland State FL Zip Code 32751

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

Name of Employer BE Information Requested Occupation BE Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2012

Transaction ID : SA11AI.5048

Amount of Each Receipt this Period
 2500.00

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 12 OF 56
	<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)
KEADLE FOR CONGRESS 2012

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

Mailing Address 570 Manor Rd

City Maitland State FL Zip Code 32751

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

Name of Employer Occupation
BE Information Requested Economist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2012

Transaction ID : SA11AI.5046

Amount of Each Receipt this Period
2500.00

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

Mailing Address 13 Stone Hill Drive North

City Manhasset State NY Zip Code 11030

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

Name of Employer Occupation
Retired Retired

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
 02 / 26 / 2012

Transaction ID : SA11AI.4879

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Dr. Steven Dater

Mailing Address 7122 Hawick Ct

City Belmont State MI Zip Code 49306

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

Name of Employer Occupation
Dater & Cadorette DDS, PLLC 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
 02 / 15 / 2012

Transaction ID : SA11AI.4852

Amount of Each Receipt this Period
500.00

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 13 OF 56
	<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)
KEADLE FOR CONGRESS 2012

A. Full Name (Last, First, Middle Initial)
Kent Davis

Mailing Address 505 Skyhawk Pl

City State Zip Code
Franklin TN 37064

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

Name of Employer Occupation
Retired Retired

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
01 / 19 / 2012

Transaction ID : SA11AI.4736

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Dr. Greg Erramouspe

Mailing Address 2027 Hillcrest Dr

City State Zip Code
Rock Springs WY 82901

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

Name of Employer Occupation
Self Employed 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
02 / 13 / 2012

Transaction ID : SA11AI.4848

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Dr. Edward Feinberg

Mailing Address 14 Harwood Ct Ste 322

City State Zip Code
Scarsdale NY 10583

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

Name of Employer Occupation
Self Employed Dentist

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
03 / 20 / 2012

Transaction ID : SA11AI.4960

Amount of Each Receipt this Period
250.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 56
	<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)
KEADLE FOR CONGRESS 2012

A. Full Name (Last, First, Middle Initial)
Dr. Robert T Ferris

Mailing Address 1831 Sweetwater Bend

City State Zip Code
Deltona FL 32738

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

Name of Employer Occupation
Self Employed Periodontist

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
 02 / 22 / 2012

Transaction ID : SA11AI.4871

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Dr. Randy Fussell

Mailing Address 3800 Cantata Drive

City State Zip Code
Greenville NC 27858

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

Name of Employer Occupation
Lee, Fussell, et al, PA Dentist

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
 03 / 16 / 2012

Transaction ID : SA11AI.4932

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Robert H. Gaither

Mailing Address 602 East Street

City State Zip Code
Albemarle NC 28001

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

Name of Employer Occupation
Self Employed Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 21 / 2012

Transaction ID : SA11AI.4688

Amount of Each Receipt this Period
250.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 56
	<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)
KEADLE FOR CONGRESS 2012

A. Full Name (Last, First, Middle Initial)
Dr. Scott Goodman

Mailing Address 743 Barrington Place

City State Zip Code
Matthews NC 28106

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

Name of Employer Occupation
Self Employed Dentist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 24 / 2012

Transaction ID : SA11AI.4747

Amount of Each Receipt this Period
250.00

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

Mailing Address 19145 West Muirfield

City State Zip Code
Baton Rouge LA 70810

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2200.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 26 / 2012

Transaction ID : SA11AI.4759

Amount of Each Receipt this Period
2200.00

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

Mailing Address 19145 West Muirfield

City State Zip Code
Baton Rouge LA 70810

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

Name of Employer Occupation
Cajun Industries, LLC Chairman of the Board

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2200.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 26 / 2012

Transaction ID : SA11AI.4757

Amount of Each Receipt this Period
2200.00

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

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

4650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 56
	<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)
KEADLE FOR CONGRESS 2012

Full Name (Last, First, Middle Initial) A. Dr. Tara Haid		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2012	
Mailing Address 995 Clubview Blvd South		Transaction ID : SA11AI.4970	
City Columbus	State OH	Zip Code 43235	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Self	Occupation Dentist		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) B. George E Ham		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2012	
Mailing Address 4304 South Mills St		Transaction ID : SA11AI.4948	
City Independence	State MO	Zip Code 64055	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) C. Dr. Brien Harvey		Date of Receipt M M / D D / Y Y Y Y 02 / 03 / 2012	
Mailing Address 6051 Paseo Valdear		Transaction ID : SA11AI.4811	
City Tuscon	State AZ	Zip Code 85750	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Self Employed	Occupation Dentist		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	2000.00

**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 56
	<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)
KEADLE FOR CONGRESS 2012

A. Full Name (Last, First, Middle Initial)
Thomas B Henson

Mailing Address 2131 Aysley Town Blvd Ste 300

City	State	Zip Code
Charlotte	NC	28273

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

Name of Employer	Occupation
Henson-Tomlin Interest, LLC	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
 01 / 26 / 2012

Transaction ID : SA11AI.4755

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Dr. James Hoag

Mailing Address 814 South David

City	State	Zip Code
Casper	WY	82601

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

Name of Employer	Occupation
Self Employed	Dentist

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
 03 / 01 / 2012

Transaction ID : SA11AI.4895

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Dr. Bruce Holwell

Mailing Address Box 187

City	State	Zip Code
Big Horn	WY	82833

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

Name of Employer	Occupation
Self Employed	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
 02 / 27 / 2012

Transaction ID : SA11AI.4883

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 18 OF 56
	<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)
KEADLE FOR CONGRESS 2012

A. Full Name (Last, First, Middle Initial)
Dr. Bruce Hutchinson

Mailing Address 15010 Starry Night Lane

City State Zip Code
Centreville VA 20120

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

Name of Employer Occupation
Hutchison & Gorman, PLLC Dentist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 27 / 2012

Transaction ID : SA11AI.4885

Amount of Each Receipt this Period
250.00

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

Mailing Address 29 Barstow Rd

City State Zip Code
Great Neck NY 11021

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

Name of Employer Occupation
Self Employed Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 02 / 2012

Transaction ID : SA11AI.4795

Amount of Each Receipt this Period
2500.00

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

Mailing Address 29 Barstow

City State Zip Code
Great Neck NY 11021

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

Name of Employer Occupation
Self Employed Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 02 / 2012

Transaction ID : SA11AI.4797

Amount of Each Receipt this Period
1100.00

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

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

3850.00

**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 56
	<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)
KEADLE FOR CONGRESS 2012

A. Full Name (Last, First, Middle Initial)
Tim Kinzel

Mailing Address 4547 Hackberry Ct

City Middleton State WI Zip Code 53562

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

Name of Employer Self Employed Occupation Dentist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 19 / 2012

Transaction ID : SA11AI.4734

Amount of Each Receipt this Period
 250.00

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

Mailing Address 1725 89th Place NE

City Clyde Hill State WA Zip Code 98004

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2012

Transaction ID : SA11AI.4693

Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
Dr. Daniel J Klemmedson

Mailing Address 4501 North Paseo Imuris

City Tuscon State AZ Zip Code 85750

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

Name of Employer Self Employed Occupation Oral Surgeon

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 16 / 2012

Transaction ID : SA11AI.4938

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 20 OF 56
	<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)
KEADLE FOR CONGRESS 2012

A. Full Name (Last, First, Middle Initial)
Haynes P Lea

Mailing Address 2816 Belvedere Ave

City Charlotte	State NC	Zip Code 28205
-------------------	-------------	-------------------

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

Name of Employer Robinson, Bradshaw, &Hinson PA	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
 03 / 19 / 2012

Transaction ID : SA11AI.4942

Amount of Each Receipt this Period
250.00

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

Mailing Address 33 Crystal Rd

City Mountain Lakes	State NJ	Zip Code 07046
------------------------	-------------	-------------------

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

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

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2012

Transaction ID : SA11AI.5122

Amount of Each Receipt this Period
2500.00

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

Mailing Address 4759 Cold Run Valley Rd

City Berkeley Springs	State WV	Zip Code 25411
--------------------------	-------------	-------------------

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

Name of Employer Self Employed	Occupation Dentist
-----------------------------------	-----------------------

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
 02 / 02 / 2012

Transaction ID : SA11AI.4793

Amount of Each Receipt this Period
250.00

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 21 OF 56
	<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)
KEADLE FOR CONGRESS 2012

A. Full Name (Last, First, Middle Initial)
Dr. S. Jerry Long

Mailing Address 4515 Diamond Springs

City State Zip Code
Missouri City TX 77459

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

Name of Employer Occupation
Self Employed Dentist

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
02 / 02 / 2012

Transaction ID : SA11AI.4791

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Dr. Pat Machalinskim

Mailing Address 1188 Massachusetts Ave

City State Zip Code
Arlington MA 02476

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

Name of Employer Occupation
Self Employed Dentist

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
02 / 03 / 2012

Transaction ID : SA11AI.4803

Amount of Each Receipt this Period
250.00

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

Mailing Address 1417 1st St

City State Zip Code
Coronado CA 92118

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

Name of Employer Occupation
Retired Retired

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
03 / 31 / 2012

Transaction ID : SA11AI.5075

Amount of Each Receipt this Period
300.00

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 56
	<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)
KEADLE FOR CONGRESS 2012

A. Full Name (Last, First, Middle Initial)
Susan Massey

Mailing Address 902 Mascot Drive

City Albemarle State NC Zip Code 28001

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1050.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 31 / 2012

Transaction ID : SA11AI.4687

Amount of Each Receipt this Period
200.00

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

Mailing Address 902 Mascot Drive

City Albemarle State NC Zip Code 28001

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1550.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 30 / 2012

Transaction ID : SA11AI.4697

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Dr. David Matthews

Mailing Address 3611 Broadway

City Ft Wayne State IN Zip Code 46807

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

Name of Employer Self Employed Occupation Dentist

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
01 / 23 / 2012

Transaction ID : SA11AI.4745

Amount of Each Receipt this Period
250.00

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

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

950.00

**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 56
	<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)
KEADLE FOR CONGRESS 2012

A. Full Name (Last, First, Middle Initial)
Douglas Matthews

Mailing Address 3971 Laramie Rd SW

City State Zip Code
Concord NC 28027

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

Name of Employer Occupation
Bank of America Information Security

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 22 / 2012

Transaction ID : SA11AI.4689

Amount of Each Receipt this Period
100.00

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

Mailing Address 3971 Laramie Rd SW

City State Zip Code
Concord NC 28027

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

Name of Employer Occupation
Bank of America Information Security

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2012

Transaction ID : SA11AI.4698

Amount of Each Receipt this Period
100.00

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

Mailing Address 1551 Fulf Shore Blvd South

City State Zip Code
Naples FL 34102

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

Name of Employer Occupation
Self Employed Investment Management

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 30 / 2012

Transaction ID : SA11AI.4771

Amount of Each Receipt this Period
500.00

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 56
	<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)
KEADLE FOR CONGRESS 2012

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

Mailing Address 5522 Sheraton Oaks Drive

City Houston State TX Zip Code 77091

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

Name of Employer Premium Solutions Occupation Professional Engineer

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
03 / 22 / 2012

Transaction ID : SA11AI.4696

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Dr. Ronald N Nason

Mailing Address 1601-D E Garrison Blvd

City Gastonia State NC Zip Code 28054

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

Name of Employer Lanz & Nason, DDS, MS, PA Occupation Dentist

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
02 / 03 / 2012

Transaction ID : SA11AI.4817

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
David Parker Sr.

Mailing Address Box 488

City Denton State NC Zip Code 27239

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

Name of Employer Retired Occupation Delta Airlines Captain

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
02 / 20 / 2012

Transaction ID : SA11AI.4864

Amount of Each Receipt this Period
250.00

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

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

600.00

**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 25 OF 56
	<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)
KEADLE FOR CONGRESS 2012

Full Name (Last, First, Middle Initial) A. Dr. Nicholas Penna		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 05 / 2012
Mailing Address 9201 Azalea Rd		Transaction ID : SA11AI.4903
City Sherrills Ford	State NC	Zip Code 28673
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Self Employed	Occupation Orthodontist	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) B. John Penson		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 13 / 2012
Mailing Address 1201 Elm Street Suite 4240		Transaction ID : SA11AI.4719
City Dallas	State TX	Zip Code 75270
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Self Employed	Occupation Investor	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) C. Dr. Timothy Pieper		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 03 / 2012
Mailing Address 112 hooly Dr		Transaction ID : SA11AI.4801
City Torrington	State WY	Zip Code 82240
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Family Dentistry, PC	Occupation Dentist	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 56
	<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)
KEADLE FOR CONGRESS 2012

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

Mailing Address 807 Wood Cove Rd

City State Zip Code
Wilmington NC 28409

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

Name of Employer Occupation
Self Employed 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
 02 / 08 / 2012

Transaction ID : SA11AI.4828

Amount of Each Receipt this Period
500.00

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

Mailing Address 6670 Gulf of Mexico Dr

City State Zip Code
Long Boat Key FL 34228

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

Name of Employer Occupation
self Homemaker

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
 03 / 31 / 2012

Transaction ID : SA11AI.5139

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Dr. Chris Reese

Mailing Address 2726 Charleston Ct

City State Zip Code
Claremont NC 28610

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

Name of Employer Occupation
Self Employed Dentist

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
 02 / 20 / 2012

Transaction ID : SA11AI.4862

Amount of Each Receipt this Period
250.00

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 56
	<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)
KEADLE FOR CONGRESS 2012

A. Full Name (Last, First, Middle Initial)
Howard Rich

Mailing Address 108 Arch St, 1002

City Philadelphia State PA Zip Code 19106

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

Name of Employer ALG Occupation Real Estate

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2012

Transaction ID : SA11AI.5238

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
Dr. Wayne Ryan

Mailing Address 7002 S. 109th St

City Omaha State NE Zip Code 68128

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

Name of Employer Self Employed Occupation Dentist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2012

Transaction ID : SA11AI.4779

Amount of Each Receipt this Period
 300.00

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

Mailing Address 59 White Falls Lane

City New Canaan State CT Zip Code 06840

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2012

Transaction ID : SA11AI.4977

Amount of Each Receipt this Period
 300.00

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

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

3100.00

**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 28 OF 56
	<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)
KEADLE FOR CONGRESS 2012

A. Dean Sellers
 Full Name (Last, First, Middle Initial)
 Mailing Address 511 Buckhead Ct
 City State Zip Code
 Charlotte NC 28211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Employed CPA
 Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 20 / 2012
Transaction ID : SA11AI.4946
 Amount of Each Receipt this Period
 250.00

B. William Seymour
 Full Name (Last, First, Middle Initial)
 Mailing Address 1100 E Morehead Street
 City State Zip Code
 Charlotte NC 28204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Primax Properties, LLC Chairman and CEO
 Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 10 / 2012
Transaction ID : SA11AI.4834
 Amount of Each Receipt this Period
 500.00

C. Allen Simon
 Full Name (Last, First, Middle Initial)
 Mailing Address 1383 North Criss St
 City State Zip Code
 Chandler AZ 85226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired Retired
 Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2012
Transaction ID : SA11AI.4944
 Amount of Each Receipt this Period
 250.00

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 56
	<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)
KEADLE FOR CONGRESS 2012

Full Name (Last, First, Middle Initial) A. Allen Simon		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2012	
Mailing Address 1383 North Criss St		Transaction ID : SA11AI.5018	
City Chandler	State AZ	Zip Code 85226	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) B. Dr. Thomas Soliday		Date of Receipt M M / D D / Y Y Y Y 01 / 26 / 2012	
Mailing Address 2002 Taneytown Rd		Transaction ID : SA11AI.4753	
City Gettysburg	State PA	Zip Code 17325	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Self Employed	Occupation Oral Surgeon		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) C. Dr. Frederic Sterritt		Date of Receipt M M / D D / Y Y Y Y 01 / 30 / 2012	
Mailing Address 464 South Horizon Way		Transaction ID : SA11AI.4767	
City Neshanic Station	State NJ	Zip Code 08853	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00	
Name of Employer Self Employed	Occupation Dentist		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL 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 30 OF 56
	<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)
KEADLE FOR CONGRESS 2012

Full Name (Last, First, Middle Initial) A. Dick Storm		Date of Receipt M M / D D / Y Y Y Y 01 / 23 / 2012	
Mailing Address 900 Colonial Drive		Transaction ID : SA11AI.4683	
City Albemarle	State NC	Zip Code 28001	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.94	
Name of Employer Storm Technologies	Occupation Engineering Consultant		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2491.00		

Full Name (Last, First, Middle Initial) B. Dick Storm		Date of Receipt M M / D D / Y Y Y Y 01 / 31 / 2012	
Mailing Address 900 Colonial Drive		Transaction ID : SA11AI.4686	
City Albemarle	State NC	Zip Code 28001	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Storm Technologies	Occupation Engineering Consultant		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 2591.00		

Full Name (Last, First, Middle Initial) C. Virginia Storm		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2012	
Mailing Address 900 Colonial Drive		Transaction ID : SA11AI.4998	
City Albemarle	State NC	Zip Code 28001	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Storm Technologies	Occupation Co-owner		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....	1120.94
TOTAL 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 31 OF 56
	<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)
KEADLE FOR CONGRESS 2012

A. Full Name (Last, First, Middle Initial)
Dr. Douglas Stover

Mailing Address 3640 Raintree Dr

City State Zip Code
Gastonia NC 28056

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

Name of Employer Occupation
Stover and Stover, DDS Dentist

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
 01 / 16 / 2012

Transaction ID : SA11AI.4723

Amount of Each Receipt this Period
350.00

B. Full Name (Last, First, Middle Initial)
Kathy G Sullivan

Mailing Address 911 Harvard Place

City State Zip Code
Charlotte NC 28207

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

Name of Employer Occupation
Self Employed 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
 02 / 10 / 2012

Transaction ID : SA11AI.4838

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Dr. Jack Teague

Mailing Address 606 Holt Lane

City State Zip Code
Asheville NC 28803

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

Name of Employer Occupation
Self Employed 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
 02 / 03 / 2012

Transaction ID : SA11AI.4799

Amount of Each Receipt this Period
500.00

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 32 OF 56
	<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)
KEADLE FOR CONGRESS 2012

A. Full Name (Last, First, Middle Initial)
Dr. Austin Temple

Mailing Address 1881 Runnymede Rd

City State Zip Code
Winston-Salem NC 27104

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

Name of Employer Occupation
Austin Temple DDS Dentist

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
01 / 05 / 2012

Transaction ID : SA11AI.4703

Amount of Each Receipt this Period
250.00

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

Mailing Address 9762 Bent Grass Bend

City State Zip Code
Naples FL 34108

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

Name of Employer Occupation
Retired Retired

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
03 / 31 / 2012

Transaction ID : SA11AI.5040

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Daniel U. Thomas Jr.

Mailing Address 30341 E. Lake Dr.

City State Zip Code
Wagram NC 28396

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 06 / 2012

Transaction ID : SA11AI.4679

Amount of Each Receipt this Period
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 56
	<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)
KEADLE FOR CONGRESS 2012

A. Full Name (Last, First, Middle Initial)
Dr. Jeff Thomas

Mailing Address 2423 Tram Rd

City Newbern State NC Zip Code 28562

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

Name of Employer Self Occupation Periodontist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 29 / 2012

Transaction ID : SA11AI.5012

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Dr. James Torchia

Mailing Address 8736 S Florence Ave

City Tulsa State OK Zip Code 74137

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

Name of Employer Self Employed Occupation Dentist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 13 / 2012

Transaction ID : SA11AI.4846

Amount of Each Receipt this Period
 500.00

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

Mailing Address 715 Lands End Drive

City Longboat Key State FL Zip Code 34228

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

Name of Employer Self Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2012

Transaction ID : SA11AI.5056

Amount of Each Receipt this Period
 200.00

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

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

1200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 56
	<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)
KEADLE FOR CONGRESS 2012

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

Mailing Address 1396 North Waukegan Rd

City State Zip Code
lake Forest IL 60045

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

Name of Employer Occupation
Uline CEO / Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2012

Transaction ID : SA11AI.5128

Amount of Each Receipt this Period
 2500.00

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

Mailing Address 909 Fannin, Ste 1640

City State Zip Code
Houston TX 77010

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

Name of Employer Occupation
Wells Fargo Advisors, LLC Financial Advisor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 30 / 2012

Transaction ID : SA11AI.4769

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Dr. Michael Vaclav

Mailing Address 7201 West 34th

City State Zip Code
Amarillo TX 79109

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

Name of Employer Occupation
Self Employed Dentist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2012

Transaction ID : SA11AI.4914

Amount of Each Receipt this Period
 500.00

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 35 OF 56
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
KEADLE FOR CONGRESS 2012

A. Full Name (Last, First, Middle Initial)
Dr. Andrew Vorrasi

Mailing Address 2005 Lyell Ave

City Rochester State NY Zip Code 14606

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

Name of Employer Self Employed Occupation Dentist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 10 / 2012

Transaction ID : SA11AI.4836

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Dr. James Walton III

Mailing Address 7019 McBride PT

City Tallahassee State FL Zip Code 32312

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

Name of Employer Self Employed Occupation Dentist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 13 / 2012

Transaction ID : SA11AI.4842

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Dr. James Walton III

Mailing Address 7019 McBride PT

City Tallahassee State FL Zip Code 32312

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

Name of Employer Self Employed Occupation Dentist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2012

Transaction ID : SA11AI.4913

Amount of Each Receipt this Period
 500.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 56
	<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)
KEADLE FOR CONGRESS 2012

A. Full Name (Last, First, Middle Initial)
Low Ward

Mailing Address Box 1187

City State Zip Code
Enid OK 73702

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

Name of Employer Occupation
Self employed Oil and Gas producer

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
01 / 09 / 2012

Transaction ID : SA11AI.4715

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Philip R Warth Jr.

Mailing Address 13 Sams Point Lane

City State Zip Code
Hilton Head Island SC 29926

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

Name of Employer Occupation
BE Information Requested BE Information Requested

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
03 / 31 / 2012

Transaction ID : SA11AI.5092

Amount of Each Receipt this Period
1000.00

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

Mailing Address 135 Perrin Place

City State Zip Code
Charlotte NC 28207

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

Name of Employer Occupation
Retired 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
01 / 20 / 2012

Transaction ID : SA11AI.4738

Amount of Each Receipt this Period
250.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 56
	<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)
KEADLE FOR CONGRESS 2012

A. Full Name (Last, First, Middle Initial)
Dr. Michael Webb

Mailing Address 5400 Colony Rd

City State Zip Code
Charlotte NC 28226

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

Name of Employer Occupation
Webb Ortodontics Dentist

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
 03 / 22 / 2012

Transaction ID : SA11AI.4968

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Paul H Weidman

Mailing Address 4010 Meadow Drive

City State Zip Code
Grapevine TX 76051

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

Name of Employer Occupation
Retired Retired

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
 03 / 31 / 2012

Transaction ID : SA11AI.5145

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Dr. Richard Weinman

Mailing Address 175 Inland Ridge Way NE

City State Zip Code
Atlanta GA 30342

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

Name of Employer Occupation
Buckhead Dental Assoc PC Dentist

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
 03 / 21 / 2012

Transaction ID : SA11AI.4966

Amount of Each Receipt this Period
250.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 56
	<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)
KEADLE FOR CONGRESS 2012

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

Mailing Address 9025 Keith Ave #301

City West Hollywood State CA Zip Code 90069

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

Name of Employer Protelindo Occupation Advisor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2012

Transaction ID : SA11A1.5165

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Peter J Weldon

Mailing Address 700 Via. Lombardi

City Winterpark State FL Zip Code 32789

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2012

Transaction ID : SA11A1.5071

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Dr. L. Brett Wells

Mailing Address 120 St Albans Drive

City Raleigh State NC Zip Code 27609

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

Name of Employer Self Employed Occupation Dentist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2012

Transaction ID : SA11A1.4789

Amount of Each Receipt this Period
 1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 56
	<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)
KEADLE FOR CONGRESS 2012

Full Name (Last, First, Middle Initial) A. Dr. Stephen Wheeler		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 06 / 2012	
Mailing Address 8038 High Time Ridge		Transaction ID : SA11AI.4909	
City San Diego	State CA	Zip Code 92127	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Self Employed	Occupation Oral Surgeon		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) B. Edgar H Williams		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2012	
Mailing Address 2900 Cove K Drive #3G		Transaction ID : SA11AI.5124	
City Clearwater	State FL	Zip Code 33760	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00	
Name of Employer Legacy Capital Group Inc	Occupation Commodity Pool Operator		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00		

Full Name (Last, First, Middle Initial) C. Dr. Mary M Ziomek		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2012	
Mailing Address 11500 Old Georgetown Rd		Transaction ID : SA11AI.5036	
City Rockville	State MD	Zip Code 28052	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Self	Occupation Dentist		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	3250.00
TOTAL 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 40 OF 56
	<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)
KEADLE FOR CONGRESS 2012

Full Name (Last, First, Middle Initial) A. Dr. Mark Zurawei		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 02 / 2012	
Mailing Address 7108 Haymarket Lane		Transaction ID : SA11Al.4787	
City Raleigh	State NC	Zip Code 27615	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 1000.00	
Name of Employer Self Employed	Occupation Dentist		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) B.		Date of Receipt M M / D D / Y Y Y Y Y Y	
Mailing Address		Amount of Each Receipt this Period	
City	State	Zip Code	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y Y Y	
Mailing Address		Amount of Each Receipt this Period	
City	State	Zip Code	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	67120.94

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 56
	<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)
KEADLE FOR CONGRESS 2012

A. Full Name (Last, First, Middle Initial)
AMERICAN DENTAL ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1111 14TH STREET, NW
SUITE 1100

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00000729

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
 02 / 07 / 2012

Transaction ID : SA11C.5237

Amount of Each Receipt this Period
 5000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

5000.00

5000.00

**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 42 OF 56
	<input type="checkbox"/> 11a 12 <input checked="" 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)
KEADLE FOR CONGRESS 2012

A. Full Name (Last, First, Middle Initial)
SCOTT KEADLE

Mailing Address 113 SEA HIDE COURT

City MOORESVILLE State NC Zip Code 28117

FEC ID number of contributing federal political committee. **C H0NC10151**

Name of Employer Self-employed Occupation Dentist / Candidate

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 16 / 2012

Transaction ID : SA13A.5209

Amount of Each Receipt this Period
180000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D 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 M / D 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).....

180000.00

180000.00

**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 43 OF 56			
	<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)
KEADLE FOR CONGRESS 2012

Full Name (Last, First, Middle Initial) A. David Carter		Date of Disbursement MM / DD / YYYY 01 / 11 / 2012
Mailing Address 601 Smithville Rd		Amount of Each Disbursement this Period 719.78
City Mountville	State SC	
Zip Code 29370	Purpose of Disbursement Consulting, management, and expenses	Transaction ID : SB17.5212
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. David Carter		Date of Disbursement MM / DD / YYYY 02 / 07 / 2012
Mailing Address 601 Smithville Rd		Amount of Each Disbursement this Period 2625.23
City Mountville	State SC	
Zip Code 29370	Purpose of Disbursement Consulting, management, and expenses	Transaction ID : SB17.5213
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. David Carter		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 601 Smithville Rd		Amount of Each Disbursement this Period 500.00
City Mountville	State SC	
Zip Code 29370	Purpose of Disbursement Consulting, management, and expenses	Transaction ID : SB17.5214
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3845.01
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 56	
	<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)
KEADLE FOR CONGRESS 2012

Full Name (Last, First, Middle Initial) A. David Carter		Date of Disbursement MM / DD / YYYY 03 / 09 / 2012
Mailing Address 601 Smithville Rd		Amount of Each Disbursement this Period 2510.00 Transaction ID : SB17.5215
City Mountville	State SC	
Zip Code 29370	Purpose of Disbursement Consulting, management, and expenses	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Constant Contact		Date of Disbursement MM / DD / YYYY 03 / 22 / 2012
Mailing Address 1601 Trapelo Rd		Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.5193
City Waltham	State MA	
Zip Code 02451	Purpose of Disbursement Marketing services	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Donehue Direct		Date of Disbursement MM / DD / YYYY 01 / 15 / 2012
Mailing Address PO Box 7431		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.5184
City Columbia	State SC	
Zip Code 29202	Purpose of Disbursement Online media consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4040.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 56	
	<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)
KEADLE FOR CONGRESS 2012

Full Name (Last, First, Middle Initial) A. Donehue Direct		Date of Disbursement MM / DD / YYYY 02 / 07 / 2012
Mailing Address PO Box 7431		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.5185
City Columbia	State SC	
Zip Code 29202	Purpose of Disbursement Online media consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Donehue Direct		Date of Disbursement MM / DD / YYYY 02 / 16 / 2012
Mailing Address PO Box 7431		Amount of Each Disbursement this Period 600.00 Transaction ID : SB17.5186
City Columbia	State SC	
Zip Code 29202	Purpose of Disbursement Online media consulting	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Donehue Direct		Date of Disbursement MM / DD / YYYY 03 / 03 / 2012
Mailing Address PO Box 7431		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.5187
City Columbia	State SC	
Zip Code 29202	Purpose of Disbursement Online media consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3600.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 56			
	<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)
KEADLE FOR CONGRESS 2012

Full Name (Last, First, Middle Initial) A. Food Lion#10		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2012
Mailing Address 525 Jake Alexander Blvd West		Amount of Each Disbursement this Period 162.00
City Salisbury	State NC	
Zip Code 28147	Purpose of Disbursement Stamps	Transaction ID : SB17.5227
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Hampton Inn		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2012
Mailing Address 1140 Celebrity Circle		Amount of Each Disbursement this Period 282.50
City Myrtle Beach	State SC	
Zip Code 29577	Purpose of Disbursement travel - media	Transaction ID : SB17.5198
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. My Campaign Store		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2012
Mailing Address Box 596		Amount of Each Disbursement this Period 2545.00
City Jeffersonville	State IN	
Zip Code 47131	Purpose of Disbursement Campaign materials	Transaction ID : SB17.5196
Candidate Name	006 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2989.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 56			
	<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)
KEADLE FOR CONGRESS 2012

Full Name (Last, First, Middle Initial) A. NC State Board of Elections			Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2012
Mailing Address Harrington Street			Amount of Each Disbursement this Period 1740.00 Transaction ID : SB17.5230
City Raleigh	State NC	Zip Code 27603	
Purpose of Disbursement Filing fee		Category/Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. North Carolina Dental Society			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2012
Mailing Address 1600 Evans Road			Amount of Each Disbursement this Period 1074.00 Transaction ID : SB17.5253
City Cary	State NC	Zip Code 27513	
Purpose of Disbursement organization fee		Category/Type 003	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. Partisan Analytics			Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2012
Mailing Address 3090 Graceland Rd			Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.5225
City Loris	State SC	Zip Code 29569	
Purpose of Disbursement Marketing services		Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	7814.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 56	
	<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)
KEADLE FOR CONGRESS 2012

Full Name (Last, First, Middle Initial) A. Piryx Inc		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2012
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 1630.03 Transaction ID : SB17.5206
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Online contibution charges qtr1	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Rowan Dental Assoc		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2012
Mailing Address 480 Jake Alexander Blvd West		Amount of Each Disbursement this Period 959.19 Transaction ID : SB17.5221
City Slaisbury	State NC Zip Code 28147	
Purpose of Disbursement Campaign materials purchase	Category/Type 006	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Lauren Slepian		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2012
Mailing Address 8204 Hurrigan Lane		Amount of Each Disbursement this Period 3760.39 Transaction ID : SB17.5188
City Fayetteville	State NC Zip Code 28314	
Purpose of Disbursement Consulting, management, and expenses	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6349.61
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 49 OF 56	
	<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)
KEADLE FOR CONGRESS 2012

Full Name (Last, First, Middle Initial) A. Lauren Slepian		Date of Disbursement MM / DD / YYYY 02 / 21 / 2012
Mailing Address 8204 Hurrigan Lane		Amount of Each Disbursement this Period 3786.61 Transaction ID : SB17.5189
City Fayetteville	State NC	
Zip Code 28314	Purpose of Disbursement Consulting, management, and expenses	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Lauren Slepian		Date of Disbursement MM / DD / YYYY 02 / 29 / 2012
Mailing Address 8204 Hurrigan Lane		Amount of Each Disbursement this Period 419.56 Transaction ID : SB17.5190
City Fayetteville	State NC	
Zip Code 28314	Purpose of Disbursement Consulting, management, and expenses	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Square Inc.		Date of Disbursement MM / DD / YYYY 03 / 31 / 2012
Mailing Address 110 5th Street		Amount of Each Disbursement this Period 655.68 Transaction ID : SB17.5207
City San Francisco	State CA	
Zip Code 94103	Purpose of Disbursement Online contribution charges qtr1	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4861.85
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 56			
	<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)
KEADLE FOR CONGRESS 2012

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012
Mailing Address 615 River Hwy		Amount of Each Disbursement this Period 95.11
City Mooresville	State NC	
Zip Code 28117	Purpose of Disbursement Campaign supplies	Transaction ID : SB17.5195
Candidate Name	006 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Starboard Communications		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2012
Mailing Address 1043 Barr Road		Amount of Each Disbursement this Period 833.03
City Lexington	State NC	
Zip Code 29072	Purpose of Disbursement Print Consulting	Transaction ID : SB17.5172
Candidate Name	004 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Starboard Communications		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2012
Mailing Address 1043 Barr Road		Amount of Each Disbursement this Period 497.65
City Lexington	State NC	
Zip Code 29072	Purpose of Disbursement Print Consulting	Transaction ID : SB17.5173
Candidate Name	004 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1425.79
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 56			
	<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)
KEADLE FOR CONGRESS 2012

Full Name (Last, First, Middle Initial) A. The Liason Capital Hill			Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2012		
Mailing Address 415 New Jersey Ave NW			Amount of Each Disbursement this Period 241.51		
City Washington	State DC	Zip Code 20001	Transaction ID : SB17.5228		
Purpose of Disbursement Campaign travel		002 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. Tractor Supply			Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2012		
Mailing Address 405 Jake Alexander Blvd			Amount of Each Disbursement this Period 326.87		
City Salisbury	State NC	Zip Code 28147	Transaction ID : SB17.5200		
Purpose of Disbursement Campaign materials		006 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) C. Tuesday Associates			Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2012		
Mailing Address 42 Capen Street			Amount of Each Disbursement this Period 1425.00		
City Stoughton	State MA	Zip Code 02072	Transaction ID : SB17.5174		
Purpose of Disbursement Fundraising Services		003 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	1993.38
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 56			
	<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)
KEADLE FOR CONGRESS 2012

Full Name (Last, First, Middle Initial) A. Tuesday Associates			Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2012
Mailing Address 42 Capen Street			Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.5175
City Stoughton	State MA	Zip Code 02072	
Purpose of Disbursement Fundraising Services		Candidate Name	Category/ Type 003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) B. Tuesday Associates			Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2012
Mailing Address 42 Capen Street			Amount of Each Disbursement this Period 567.01 Transaction ID : SB17.5176
City Stoughton	State MA	Zip Code 02072	
Purpose of Disbursement Fundraising Services		Candidate Name	Category/ Type 003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) C. Tuesday Associates			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2012
Mailing Address 42 Capen Street			Amount of Each Disbursement this Period 512.50 Transaction ID : SB17.5177
City Stoughton	State MA	Zip Code 02072	
Purpose of Disbursement Fundraising Services		Candidate Name	Category/ Type 003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2079.51
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 56			
	<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)
KEADLE FOR CONGRESS 2012

Full Name (Last, First, Middle Initial) A. Tuesday Associates			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2012		
Mailing Address 42 Capen Street			Amount of Each Disbursement this Period 1000.00		
City Stoughton	State MA	Zip Code 02072	Transaction ID : SB17.5178		
Purpose of Disbursement Fundraising Services		Category/ Type 003			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012			
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. Tuesday Associates			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2012		
Mailing Address 42 Capen Street			Amount of Each Disbursement this Period 3214.87		
City Stoughton	State MA	Zip Code 02072	Transaction ID : SB17.5179		
Purpose of Disbursement Fundraising Services		Category/ Type 003			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012			
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) C. Tuesday Associates			Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2012		
Mailing Address 42 Capen Street			Amount of Each Disbursement this Period 1000.00		
City Stoughton	State MA	Zip Code 02072	Transaction ID : SB17.5180		
Purpose of Disbursement Fundraising Services		Category/ Type 003			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012			
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	5214.87
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 56			
	<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)
KEADLE FOR CONGRESS 2012

Full Name (Last, First, Middle Initial) A. Tuesday Associates			Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2012	
Mailing Address 42 Capen Street			Amount of Each Disbursement this Period 1163.82	
City Stoughton	State MA	Zip Code 02072	Transaction ID : SB17.5181	
Purpose of Disbursement Fundraising Services		003 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Tuesday Associates			Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2012	
Mailing Address 42 Capen Street			Amount of Each Disbursement this Period 121.48	
City Stoughton	State MA	Zip Code 02072	Transaction ID : SB17.5182	
Purpose of Disbursement Fundraising Services		003 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. Tuesday Associates			Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2012	
Mailing Address 42 Capen Street			Amount of Each Disbursement this Period 1100.00	
City Stoughton	State MA	Zip Code 02072	Transaction ID : SB17.5183	
Purpose of Disbursement Fundraising Services		003 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	2385.30
TOTAL This Period (last page this line number only).....	46598.82

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4323

KEADLE FOR CONGRESS 2012

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

SCOTT KEADLE

Primary

General

Other (specify) ▼

Mailing Address

113 SEA HIDE COURT

City

State

ZIP Code

MOORESVILLE

NC

28117

Original Amount of Loan

70000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

70000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

09

30

2011

12/31/2012

0.00

% (apr)

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)..... ▶

70000.00

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 3)
LOANS**

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5209

KEADLE FOR CONGRESS 2012

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

SCOTT KEADLE

Primary

General

Other (specify) ▼

Mailing Address

113 SEA HIDE COURT

City

State

ZIP Code

MOORESVILLE

NC

28117

Original Amount of Loan

180000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

180000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
02 / 16 / 2012

Date Due

M M / D D / Y Y Y Y
12/31/12

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)..... ▶

180000.00

TOTALS This Period (last page in this line only)..... ▶

250000.00

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