

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

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

ADDRESS (number and street) PO BOX 2267 SMITHFIELD NC 27577 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00501643 3. IS THIS REPORT NEW (N) OR AMENDED (A) X CITY STATE ZIP CODE STATE DISTRICT NC 07

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)
Termination Report (TER)

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

- Primary (12P) General (12G) Runoff (12R)
Convention (12C) Special (12S)

Election on MM/DD/YYYY in the State of

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

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

Election on MM/DD/YYYY in the State of

5. Covering Period MM/DD/YYYY through MM/DD/YYYY 04/17/2014 through 06/30/2014

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

Type or Print Name of Treasurer HEATHER FORD

Signature of Treasurer HEATHER FORD [Electronically Filed] Date MM/DD/YYYY 02/02/2015

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

Table with 8 columns and 1 row for Office Use Only.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
DAVID ROUZER FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	212966.48	932154.85
(b) Total Contribution Refunds (from Line 20(d))	13157.20	29292.20
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	199809.28	902862.65
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	404284.97	884069.47
(b) Total Offsets to Operating Expenditures (from Line 14).....	20645.00	23143.75
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	383639.97	860925.72
8. Cash on Hand at Close of Reporting Period (from Line 27).....	90021.02	
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).....	29795.09	

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

DAVID ROUZER FOR CONGRESS

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).....	97407.44	562122.71
(ii) Unitemized.....	3710.37	34776.37
(iii) TOTAL of contributions from individuals ▶	101117.81	596899.08
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	106743.45	305468.45
(d) The Candidate.....	5105.22	29787.32
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	212966.48	932154.85
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	4379.71
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	40000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	40000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	20645.00	23143.75
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	14050.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	233611.48	1013728.31

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	404284.97	884069.47
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	40000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	40000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	13157.20	26092.20
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	3200.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	13157.20	29292.20
21. OTHER DISBURSEMENTS	1550.00	14280.31
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	418992.17	967641.98

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	275401.71
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	233611.48
25. SUBTOTAL (add Line 23 and Line 24).....	509013.19
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	418992.17
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	90021.02

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 147
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
W. DAN ANDREWS

Mailing Address 3146 CHALYBEATE SPRINGS ROAD

City State Zip Code
FUQUAY-VARINA NC 27526

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

Name of Employer Occupation
SELF EMPLOYED FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 28 / 2014

Transaction ID : SA11AI.4667

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
EDWARD S. BARCLAY JR.

Mailing Address 4 PIPERS NECK ROAD

City State Zip Code
WILMINGTON NC 28411

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

Name of Employer Occupation
THE BARCLAY COMPANY REAL ESTATE BROKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 22 / 2014

Transaction ID : SA11AI.4559

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
PATSY BATTEN BARNHILL

Mailing Address 19446 NC HIGHWAY 210 E

City State Zip Code
IVANHOE NC 28447

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

Name of Employer Occupation
SELF EMPLOYED PHARMACIST/BLUEBERRY FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 27 / 2014

Transaction ID : SA11AI.4663

Amount of Each Receipt this Period
2000.00

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 6 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KEITH M. BEATTY

Mailing Address 1120 ULLSWATER LANE

City State Zip Code
WILMINGTON NC 28405

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

Name of Employer Occupation
INTRACOASTAL REALTY REALTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2014

Transaction ID : SA11AI.4704

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
KEITH M. BEATTY

Mailing Address 1120 ULLSWATER LANE

City State Zip Code
WILMINGTON NC 28405

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

Name of Employer Occupation
INTRACOASTAL REALTY REALTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
MM / DD / YYYY
06 / 27 / 2014

Transaction ID : SA11AI.4962

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
BRIDGET H. BENDER

Mailing Address 2940 PINE VALLEY DRIVE

City State Zip Code
MIRAMAR BEACH FL 32550

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
MM / DD / YYYY
06 / 23 / 2014

Transaction ID : SA11AI.4970

Amount of Each Receipt this Period
2600.00

[MEMO ITEM]
REATTRIBUTED FROM BENDER, NEIL

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 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NEIL C BENDER

Mailing Address 401 EAST LAS OLAS BOULEVARD
SUITE 130-161

City State Zip Code
FORT LAUDERDALE FL 33301

FEC ID number of contributing federal political committee.

Name of Employer Occupation
VELOCITY SOLUTIONS, INC. DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.4936

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
NEIL C BENDER

Mailing Address 401 EAST LAS OLAS BOULEVARD
SUITE 130-161

City State Zip Code
FORT LAUDERDALE FL 33301

FEC ID number of contributing federal political committee.

Name of Employer Occupation
VELOCITY SOLUTIONS, INC. DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.4969

Amount of Each Receipt this Period

[MEMO ITEM]
REATTRIBUTED TO BENDER, BRIDGET

C. Full Name (Last, First, Middle Initial)
BENNETT BROTHERS PARTNERSHIP

Mailing Address 745 BENTHALL COOK ROAD

City State Zip Code
RICH SQUARE NC 27869

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.4327

Amount of Each Receipt this Period

[MEMO ITEM]
REATTRIBUTION LETTER SENT

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

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 8 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GENE A BENNETT

Mailing Address **PO BOX 133**

City **RICH SQUARE** State **NC** Zip Code **27869**

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

Name of Employer **BENNETT BROTHERS PARTNERSHIP** Occupation **FARMER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 17 / 2014

Transaction ID : SA11AI.4523

Amount of Each Receipt this Period
300.00

[MEMO ITEM]
 PARTNERSHIP ATTRIBUTION BENNETT BROTHERS PARTNERSHIP

B. Full Name (Last, First, Middle Initial)
ELLEN JEFFREYS BLAND

Mailing Address **602 BROOKWOOD LANE**

City **GOLDSBORO** State **NC** Zip Code **27534**

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

Name of Employer **RA JEFFREYS** Occupation **MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 23 / 2014

Transaction ID : SA11AI.4855

Amount of Each Receipt this Period
1000.00

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

Mailing Address **7100 SIX FORKS ROAD**

City **RALEIGH** State **NC** Zip Code **27615**

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

Name of Employer **ECA** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.4968

Amount of Each Receipt this Period
250.00

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 9 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GRAHAM BOYD

Mailing Address 923 JONES WYND

City State Zip Code
WAKE FOREST NC 27587

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

Name of Employer Occupation
SELF EMPLOYED CONSULTING

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11AI.4715

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JAMES W. C. BROUGHTON

Mailing Address 2560 WARWICK ROAD

City State Zip Code
WINSTON SALEM NC 27104

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

Name of Employer Occupation
WOMBLE CARLYLE SANDRIDGE & RICE SENIOR GOVERNMENT RELATIONS ADVISOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.5000

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
ALVIN B. BROWN

Mailing Address 217 DANIEL DRIVE

City State Zip Code
BOONE NC 28607

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

Name of Employer Occupation
NC STATE UNIVERSITY PROFESSOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 29 / 2014

Transaction ID : SA11AI.4689

Amount of Each Receipt this Period
250.00

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 10 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HAROLD J BRUBAKER

Mailing Address 138 SCARBORO ST

City ASHEBORO State NC Zip Code 27203

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

Name of Employer BRUBAKER & ASSOCIATES, INC. - CONSULT Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2014

Transaction ID : SA11AI.4684

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
JAMES D BULLARD II

Mailing Address 4709 OLEANDER DRIVE

City WILMINGTON State NC Zip Code 28403

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

Name of Employer SEOF-DON BULLARD INSURANCE Occupation AGENCY OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 23 / 2014

Transaction ID : SA11AI.4929

Amount of Each Receipt this Period
 2600.00

C. Full Name (Last, First, Middle Initial)
JESSIE THOMAS BUNN

Mailing Address 3800 CAMP MANGUM WYND

City RALEIGH State NC Zip Code 27612

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

Name of Employer US TOBACCO COOPERATIVE Occupation TOBACCONIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2014

Transaction ID : SA11AI.4691

Amount of Each Receipt this Period
 500.00

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

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

4100.00

**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 147
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JAMES A. BURGIN		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2014	
Mailing Address 6099 NC HIGHWAY 55 WEST		Transaction ID : SA11AI.4757	
City ANGIER	State NC	Zip Code 27501	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer C&D INSURANCE	Occupation PRESIDENT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00		

Full Name (Last, First, Middle Initial) B. DON BUTLER		Date of Receipt M M / D D / Y Y Y Y 04 / 28 / 2014	
Mailing Address 2822 NC HIGHWAY 24 WEST		Transaction ID : SA11AI.4713	
City WARSAW	State NC	Zip Code 28398	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer SMITHFIELD FOODS	Occupation GOVERNMENT RELATIONS		
Receipt For: 2014 <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. RONALD M CAMERON		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2014	
Mailing Address PO BOX 21440		Transaction ID : SA11AI.4871	
City LITTLE ROCK	State AR	Zip Code 72221	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer MOUNTAIRE CORP	Occupation CEO		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

SUBTOTAL of Receipts This Page (optional).....	3350.00
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 12 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. LOUIS C. CAMILLERI		Date of Receipt M M / D D / Y Y Y Y Y 05 / 20 / 2014	
Mailing Address 120 PARK AVENUE FLOOR 6		Transaction ID : SA11AI.4835	
City NEW YORK	State NY	Zip Code 10017	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer PHILLIP MORRIS INTERNATIONAL, INC.	Occupation CHAIRMAN AND CEO		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) B. WESLEY CAMPBELL		Date of Receipt M M / D D / Y Y Y Y Y 04 / 25 / 2014	
Mailing Address 2215 E BORAD STREET		Transaction ID : SA11AI.4569	
City ELIZABETHTOWN	State NC	Zip Code 28337	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer MINUTEMAN FOOD MARTS	Occupation COO		
Receipt For: 2014 <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) C. LANIER M. CANSLER		Date of Receipt M M / D D / Y Y Y Y Y 05 / 02 / 2014	
Mailing Address 8011 LLOYD ALLYN'S WAY		Transaction ID : SA11AI.4719	
City RALEIGH	State NC	Zip Code 27615	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer CANSLER COLLABORATIVE RESOURCES, IN	Occupation PRESIDENT		
Receipt For: 2014 <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).....	1750.00
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 13 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WILLIAM J. CARONE

Mailing Address 155 AZALEA LANE

City WALLACE State NC Zip Code 28466

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

Name of Employer: BILL CARONE CHEVROLET Occupation: AUTO SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1500.00

Date of Receipt: 04 / 29 / 2014

Transaction ID : SA11AI.4679

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
JEFFERY P. CARVER

Mailing Address 85 CHRISTENBURY LANE

City CLAYTON State NC Zip Code 27527

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

Name of Employer: JOHNSTON COUNTY / FIRST CITIZENS BANK Occupation: CO COMMISSIONER / VICE PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 04 / 24 / 2014

Transaction ID : SA11AI.4573

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
CHRISTINE T. CHAPPELL

Mailing Address 6401 QUAIL RUN ROAD

City WILMINGTON State NC Zip Code 28409

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

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 800.00

Date of Receipt: 06 / 17 / 2014

Transaction ID : SA11AI.4884

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 14 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ERNEST BROCKMAN COGGINS

Mailing Address 908 NORTH LEBANON STREET

City ARLINGTON State VA Zip Code 22205

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3405.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 23 / 2014

Transaction ID : SA11AI.4556

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
ERNEST BROCKMAN COGGINS

Mailing Address 908 NORTH LEBANON STREET

City ARLINGTON State VA Zip Code 22205

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3405.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 23 / 2014

Transaction ID : SA11AI.4557

Amount of Each Receipt this Period
-805.00

**[MEMO ITEM]
REDESIGNATED TO G-2014**

C. Full Name (Last, First, Middle Initial)
ERNEST BROCKMAN COGGINS

Mailing Address 908 NORTH LEBANON STREET

City ARLINGTON State VA Zip Code 22205

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3405.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 23 / 2014

Transaction ID : SA11AI.4558

Amount of Each Receipt this Period
805.00

**[MEMO ITEM]
REDESIGNATED FROM P-2014**

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 15 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
STERLING COOK

Mailing Address 608 CAICOS COURT

City State Zip Code
WILMINGTON NC 28405

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

Name of Employer Occupation
SOUTHERN PRODUCE CFO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 23 / 2014

Transaction ID : SA11AI.4618

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MICHAEL J. COOMER

Mailing Address PO BOX 46325

City State Zip Code
RALEIGH NC 27620

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

Name of Employer Occupation
INFINITY FIRE PROTECTION, LLC TREASURER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 23 / 2014

Transaction ID : SA11AI.4617

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
JOHN J. COOPER

Mailing Address 329 BAYTREE LANE

City State Zip Code
RALEIGH NC 27615

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

Name of Employer Occupation
COMPASS NC CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.5033

Amount of Each Receipt this Period
1000.00

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 16 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MICHAEL COSTABILE

Mailing Address **PO BOX 171**

City **BOLIVIA** State **NC** Zip Code **28422**

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

Name of Employer **PRECISION TIME** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 27 / 2014

Transaction ID : SA11AI.4664

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
ANNA H. COX

Mailing Address **165 SCOUT ROAD**

City **FOUR OAKS** State **NC** Zip Code **27524**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 06 / 2014

Transaction ID : SA11AI.4770

Amount of Each Receipt this Period
250.00

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

Mailing Address **3211 JENNINGS FARMER DRIVE, NW**

City **WILSON** State **NC** Zip Code **27896**

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

Name of Employer **UNITED TOBACCO** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 01 / 2014

Transaction ID : SA11AI.4697

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 17 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JACK L. COZORT

Mailing Address 2611 GLEN EDEN DRIVE

City State Zip Code
RALEIGH NC 27612

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

Name of Employer Occupation
NORTH STATE STRATEGIES PRINCIPAL

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 29 / 2014

Transaction ID : SA11AI.4687

Amount of Each Receipt this Period
100.00

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

Mailing Address 1577 SHOTWELL ROAD

City State Zip Code
CLAYTON NC 27520

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

Name of Employer Occupation
CAROTHERS PROPERTIES, LLC REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2014

Transaction ID : SA11AI.4878

Amount of Each Receipt this Period
500.00

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

Mailing Address 7906 ARIEL WAY

City State Zip Code
MCLEAN VA 22102

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

Name of Employer Occupation
DC LEGISLATIVE AFFAIRS PRINCIPAL

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 23 / 2014

Transaction ID : SA11AI.4847

Amount of Each Receipt this Period
1000.00

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 18 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

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

Mailing Address 139 TRENT SHORES DRIVE

City State Zip Code
TRENT WOODS NC 28562

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

Name of Employer Occupation
PACE GOVERNMENT RELATIONS GOVERNMENT RELATIONS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11AI.5002

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
S. LAWRENCE DAVENPORT

Mailing Address 5961 HIGHWAY 264 EAST

City State Zip Code
GREENVILLE NC 27834

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

Name of Employer Occupation
JP DAVENPORT & SONS, INC. PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 29 / 2014

Transaction ID : SA11AI.4682

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
JOSHUA W DILLS

Mailing Address 607 CHABLIS WAY

City State Zip Code
WILMINGTON NC 28411

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

Name of Employer Occupation
EDWARDS, INC NUCLEAR DIVISION MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 24 / 2014

Transaction ID : SA11AI.4585

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 19 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROBERT DIXON

Mailing Address **6 HAZELWOOD COURT**

City **SMITHFIELD** State **NC** Zip Code **27577**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : SA11AI.4552

Amount of Each Receipt this Period
250.00

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

Mailing Address **17 CEDARCLIFF ROAD**

City **ASHEVILLE** State **NC** Zip Code **28803**

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

Name of Employer **BILTMORE WINES** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 17 / 2014

Transaction ID : SA11AI.4520

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JEFFREY R. DUNN

Mailing Address **7870 GODWIN LAKE ROAD**

City **DUNN** State **NC** Zip Code **28334**

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

Name of Employer **CAROLINA FIRE PROTECTION, INC.** Occupation **SALES REPRESENTATIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 29 / 2014

Transaction ID : SA11AI.4678

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 20 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EVERETT L. DURHAM JR.

Mailing Address **PO BOX 1436**

City **BURGAW** State **NC** Zip Code **28425**

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

Name of Employer **DUH MARKETING** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 01 / 2014

Transaction ID : SA11AI.4700

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
EVERETT L. DURHAM JR.

Mailing Address **PO BOX 1436**

City **BURGAW** State **NC** Zip Code **28425**

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

Name of Employer **DUH MARKETING** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.4964

Amount of Each Receipt this Period
500.00

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

Mailing Address **5840 COFFEY STREET**

City **RALEIGH** State **NC** Zip Code **27604**

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

Name of Employer **NC GENERAL ASSEMBLY** Occupation **LEGISLATIVE ASSISTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 02 / 2014

Transaction ID : SA11AI.4778

Amount of Each Receipt this Period
250.00

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 21 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JUDY EDWARDS

Mailing Address 5840 COFFEY STREET

City State Zip Code
RALEIGH NC 27604

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

Name of Employer Occupation
NC GENERAL ASSEMBLY LEGISLATIVE ASSISTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 05 / 2014

Transaction ID : SA11AI.4773

Amount of Each Receipt this Period
250.00

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

Mailing Address PO BOX 3564

City State Zip Code
TOPSAIL BEACH NC 28445

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 22 / 2014

Transaction ID : SA11AI.4603

Amount of Each Receipt this Period
500.00

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

Mailing Address 830 BROOKSIDE DRIVE

City State Zip Code
WILSON NC 27893

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 27 / 2014

Transaction ID : SA11AI.4937

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 22 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DONALD EVANS

Mailing Address **PO BOX 43**

City **ASH** State **NC** Zip Code **28420**

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

Name of Employer **COASTAL INSURANCE** Occupation **AGENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 03 / 2014

Transaction ID : SA11AI.4856

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
F. P. FENSEL

Mailing Address **PO BOX 2063**

City **WILMINGTON** State **NC** Zip Code **28402**

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

Name of Employer **FENSEL SUPPLY CO.** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 17 / 2014

Transaction ID : SA11AI.4882

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
JERRY H. FERGUSON

Mailing Address **166 MCLEMORE ROAD**

City **CLAYTON** State **NC** Zip Code **27520**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 26 / 2014

Transaction ID : SA11AI.4904

Amount of Each Receipt this Period
100.00

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

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

1100.00

**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 147
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KAY FISHER		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2014	
Mailing Address 11735 WATSON SEED FARM ROAD		Transaction ID : SA11AI.4858	
City WHITAKERS	State NC	Zip Code 27891	
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: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) B. PAUL E. FLAHERTY		Date of Receipt M M / D D / Y Y Y Y 04 / 21 / 2014	
Mailing Address 108 PISGAH DRIVE		Transaction ID : SA11AI.4553	
City GARNER	State NC	Zip Code 27529	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer HOME TOWNE COMMERCIAL REALTY	Occupation REALTOR		
Receipt For: 2014 <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. DAVID FORD		Date of Receipt M M / D D / Y Y Y Y 05 / 16 / 2014	
Mailing Address 117 CONCORD COURT		Transaction ID : SA11AI.4836	
City CLAYTON	State NC	Zip Code 27520	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00	
Name of Employer THE FORD FIRM PLLC	Occupation ATTORNEY		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00		

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	1150.00

**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 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ELIZABETH H. FOSTER

Mailing Address 1215 RAILROAD BED ROAD

City ROPER State NC Zip Code 27970

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

Name of Employer HARRIS FARMS Occupation FARMER & AGRIBUSINESS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 01 / 2014

Transaction ID : SA11AI.4707

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
JAMES STEWART FREEMAN

Mailing Address 93 EDGEWATER LANE

City WILMINGTON State NC Zip Code 28403

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

Name of Employer FREEMAN LANDSCAPE, INC. Occupation LANDSCAPER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2014

Transaction ID : SA11AI.4804

Amount of Each Receipt this Period
900.00

C. Full Name (Last, First, Middle Initial)
CHARLES F. FULLER

Mailing Address 1916 TORREY PINES PLACE

City RALEIGH State NC Zip Code 27615

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

Name of Employer THE RESULTS CO Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 28 / 2014

Transaction ID : SA11AI.4711

Amount of Each Receipt this Period
250.00

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

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

2150.00

**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 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DAVID M. GARDNER

Mailing Address 997 MATTHEWS MILL POND RD

City State Zip Code
ANGIER NC 27501

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

Name of Employer Occupation
SELF EMPLOYED FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 28 / 2014

Transaction ID : SA11AI.4670

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MARK E GOLDHABER

Mailing Address 8013 WAVENDON COURT

City State Zip Code
RALEIGH NC 27615

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

Name of Employer Occupation
GOLDHABER POLICY SERVICES CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 01 / 2014

Transaction ID : SA11AI.4702

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
FRANK D. GORHAM III

Mailing Address 142 BEACH ROAD SOUTH

City State Zip Code
WILMINGTON NC 28411

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

Name of Employer Occupation
SANDSTONE PROPERTIES, LLC OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.5028

Amount of Each Receipt this Period
1000.00

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 26 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
R. FRANK GRAY

Mailing Address 3805 CASEY LEIGH LANE

City State Zip Code
RALEIGH NC 27612

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

Name of Employer Occupation
JORDAN PRICE LAW ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.4999

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
STEVE L. GRIFFIN

Mailing Address 1694 AVENUE ROAD

City State Zip Code
WASHINGTON NC 27889

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

Name of Employer Occupation
UNIVERSAL LEAF TOBACCO CO FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 03 / 2014

Transaction ID : SA11AI.4760

Amount of Each Receipt this Period
250.00

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

Mailing Address PO BOX 4180

City State Zip Code
SURF CITY NC 28445

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

Name of Employer Occupation
SAND DOLLAR REALTY REALTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 24 / 2014

Transaction ID : SA11AI.4895

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 27 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GUY ROAD LLC

Mailing Address **581 GUY ROAD**
SUITE 100

City **CLAYTON** State **NC** Zip Code **27520**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : SA11AI.4574

Amount of Each Receipt this Period
250.00

REFUNDED \$250.00 ON 4/27/2014 SEE SCHEDULE B LINE 20(A)

B. Full Name (Last, First, Middle Initial)
JACOB ANDREW HARTSFIELD IV

Mailing Address **412 PENDLETON STREET**

City **ALEXANDRIA** State **VA** Zip Code **22314**

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

Name of Employer Occupation
SANOFI-AVENTIS US, INC **SENIOR DIRECTOR OF PUBLIC POLICY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 22 / 2014

Transaction ID : SA11AI.4614

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
DOROTHY COBLE HELMS

Mailing Address **501 EAST WHITAKER MILL ROAD**
APT 203C

City **RALEIGH** State **NC** Zip Code **27608**

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

Name of Employer Occupation
RETIRED **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 26 / 2014

Transaction ID : SA11AI.4675

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 28 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROBERT K. HILL

Mailing Address 4445 RESEARCH FARM ROAD

City: HOOKERTON State: NC Zip Code: 28538

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

Name of Employer: TULL HILL FARMS Occupation: FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 04 / 18 / 2014

Transaction ID : SA11AI.4550

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
WILLIAM GREGORY HIPPI

Mailing Address 299 BALLARD ROAD

City: FUQUAY VARINA State: NC Zip Code: 27526

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

Name of Employer: SELF EMPLOYED Occupation: FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 04 / 29 / 2014

Transaction ID : SA11AI.4685

Amount of Each Receipt this Period: 500.00

REFUNDED \$500.00 ON 5/27/2014 SEE SCHEDULE B LINE 20(A)

C. Full Name (Last, First, Middle Initial)
NELLE P HOTCHKISS

Mailing Address 1108 ENDERBURY DRIVE

City: RALEIGH State: NC Zip Code: 27614

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

Name of Employer: NC ELECTRIC COOPERATIVES Occupation: SENIOR VICE PRESIDENT, CORPORATE RE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 750.00

Date of Receipt: 04 / 24 / 2014

Transaction ID : SA11AI.4582

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 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PAIGE T HOUSTON

Mailing Address 508 W PEARSALL STREET

City State Zip Code
DUNN NC 28334

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

Name of Employer Occupation
THOMAS DRUG STORE PHARMACIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 01 / 2014

Transaction ID : SA11AI.4758

Amount of Each Receipt this Period
250.00

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

Mailing Address 508 W. PEARL STREET

City State Zip Code
DUNN NC 28334

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

Name of Employer Occupation
BAND OF OZ MUSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 01 / 2014

Transaction ID : SA11AI.4756

Amount of Each Receipt this Period
250.00

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

Mailing Address 553 ROSIN HILL ROAD

City State Zip Code
NEWTON GROVE NC 28366

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

Name of Employer Occupation
ROsin HILL FARMS FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1600.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 29 / 2014

Transaction ID : SA11AI.4680

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 30 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DUANE L. ISCHER

Mailing Address 4429 HARBOURGATE DRIVE

City State Zip Code
RALEIGH NC 27612

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
425.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 28 / 2014

Transaction ID : SA11AI.4668

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
DUANE L. ISCHER

Mailing Address 4429 HARBOURGATE DRIVE

City State Zip Code
RALEIGH NC 27612

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 25 / 2014

Transaction ID : SA11AI.4897

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
RONALD V. JACKSON

Mailing Address 107 NE BOULEVARD

City State Zip Code
CLINTON NC 28328

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

Name of Employer Occupation
CLINTON TRUCK & TRACTOR COMPANY OWNER/PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 22 / 2014

Transaction ID : SA11AI.4596

Amount of Each Receipt this Period
500.00

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

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

675.00

**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 31 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RONALD V. JACKSON

Mailing Address 107 NE BOULEVARD

City CLINTON State NC Zip Code 28328

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

Name of Employer CLINTON TRUCK & TRACTOR COMPANY Occupation OWNER/PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 25 / 2014

Transaction ID : SA11AI.4896

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
EDNA H. JOHNSON

Mailing Address 105 SASSARIXA TRAIL

City FOUR OAKS State NC Zip Code 27524

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 17 / 2014

Transaction ID : SA11AI.4518

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
WILLIAM CHRIS JOHNSON

Mailing Address 516 SOUTH 4TH STREET

City SMITHFIELD State NC Zip Code 27577

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

Name of Employer DOWNTON SMITHFIELD DEVELOPMENT CO Occupation EXECUTIVE DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 25 / 2014

Transaction ID : SA11AI.4606

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 32 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JAMES T JOHNSON

Mailing Address **PO BOX 319**

City **HARRELLS** State **NC** Zip Code **28444**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 01 / 2014

Transaction ID : SA11AI.4705

Amount of Each Receipt this Period
100.00

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

Mailing Address **1119 CANAL DRIVE**

City **CAROLINA BEACH** State **NC** Zip Code **28428**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 01 / 2014

Transaction ID : SA11AI.4718

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
LYNN JOHNSON-SMITH

Mailing Address **150 AUTUMN DRIVE**

City **FOUR OAKS** State **NC** Zip Code **27524**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 24 / 2014

Transaction ID : SA11AI.4587

Amount of Each Receipt this Period
500.00

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

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

1100.00

**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 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KRISTAL M. JONES

Mailing Address 1889 COKER STORE ROAD

City MOUNT OLIVE State NC Zip Code 28365

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

Name of Employer SELF EMPLOYED Occupation FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 29 / 2014

Transaction ID : SA11AI.4683

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
ROBERT SHERRILL KING

Mailing Address 5115 NEWCENTRE DRIVE

City WILMINGTON State NC Zip Code 28403

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

Name of Employer BOB KING BUICK-GMC, INC. Occupation NEW CAR DEALER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 19 / 2014

Transaction ID : SA11AI.4887

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
PAULA S. KORNEGAY

Mailing Address 610 WORLEY ROAD

City PRINCETON State NC Zip Code 27569

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

Name of Employer SELF EMPLOYED Occupation FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 24 / 2014

Transaction ID : SA11AI.4591

Amount of Each Receipt this Period
1000.00

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

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

4600.00

**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 147
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) PAULA S. KORNEGAY		Date of Receipt M M / D D / Y Y Y Y 04 / 25 / 2014	
Mailing Address 610 WORLEY ROAD		Transaction ID : SA11AI.4604	
City PRINCETON	State NC	Zip Code 27569	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -400.00	
Name of Employer SELF EMPLOYED	Occupation FARMER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		
		[MEMO ITEM] REDESIGNATED TO G-2014	

Full Name (Last, First, Middle Initial) PAULA S. KORNEGAY		Date of Receipt M M / D D / Y Y Y Y 04 / 25 / 2014	
Mailing Address 610 WORLEY ROAD		Transaction ID : SA11AI.4605	
City PRINCETON	State NC	Zip Code 27569	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00	
Name of Employer SELF EMPLOYED	Occupation FARMER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		
		[MEMO ITEM] REDESIGNATED FROM P-2014	

Full Name (Last, First, Middle Initial) DANIEL KORNEGAY III		Date of Receipt M M / D D / Y Y Y Y 04 / 23 / 2014	
Mailing Address 427 WORLEY ROAD		Transaction ID : SA11AI.4593	
City PRINCETON	State NC	Zip Code 27569	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer SELF EMPLOYED	Occupation FARMER		
Receipt For: 2014 <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).....	500.00
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 35 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SANFORD L. KORSCHUN

Mailing Address 607 LAKE SHORE DRIVE

City State Zip Code
GOLDSBORO NC 27534

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1450.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.4965

Amount of Each Receipt this Period
250.00

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

Mailing Address 222 GLENWOOD AVENUE
APT. 709

City State Zip Code
RALEIGH NC 27603

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

Name of Employer Occupation
CAPITAL CITY STRATEGIES PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.4998

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
SAMUEL G. LANG IV

Mailing Address 4905 HERIMTAGE DRIVE

City State Zip Code
RALEIGH NC 27612

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

Name of Employer Occupation
FAIRWAY GREEN PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.5032

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 36 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JAMES H. LANGDON JR

Mailing Address 10176 NC 50 HIGHWAY NORTH

City State Zip Code
ANGIER NC 27501

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1200.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 20 / 2014

Transaction ID : SA11AI.4830

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
JOSEPH H. LANIER

Mailing Address 1415 DIXIE TRAIL

City State Zip Code
RALEIGH NC 27607

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

Name of Employer Occupation
NELSON MULLINS RILEY & SCARBOROUGH ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : SA11AI.4772

Amount of Each Receipt this Period
500.00

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

Mailing Address PO BOX 30725

City State Zip Code
GREENVILLE NC 27833

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

Name of Employer Occupation
SELF EMPLOYED COTTON BROKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 23 / 2014

Transaction ID : SA11AI.4562

Amount of Each Receipt this Period
1000.00

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 37 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) JAMES W. LEE		Date of Receipt M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 800 FAIRWAY DRIVE		Transaction ID : SA11AI.4621
City CLAYTON	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

Full Name (Last, First, Middle Initial) JAMES W. LEE		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 800 FAIRWAY DRIVE		Transaction ID : SA11AI.4768
City CLAYTON	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 375.00	

Full Name (Last, First, Middle Initial) JONATHAN L LEE		Date of Receipt M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 154 GIBSON LANE		Transaction ID : SA11AI.4677
City DUNN	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer LEE'S PEST CONTROL	Occupation TERMITE SPECIALIST	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

SUBTOTAL of Receipts This Page (optional).....	1225.00
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 38 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LINDA W. LEE

Mailing Address 239 GIBSON LANE

City State Zip Code
DUNN NC 28334

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

Name of Employer Occupation
LEE'S PEST CONTROL OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 05 / 2014

Transaction ID : SA11AI.4777

Amount of Each Receipt this Period
250.00

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

Mailing Address 3593 WEST OLD SPRING HOPE ROAD

City State Zip Code
NASHVILLE NC 27856

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

Name of Employer Occupation
LEGGETT FARMS FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 22 / 2014

Transaction ID : SA11AI.4597

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MITCHELL J LEQUIRE

Mailing Address 145 WORLEY ROAD

City State Zip Code
PRINCETON NC 27569

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

Name of Employer Occupation
SELF EMPLOYED PHARMACIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 24 / 2014

Transaction ID : SA11AI.4802

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 39 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CALVIN E. LEWIS JR		Date of Receipt M M / D D / Y Y Y Y 04 / 26 / 2014	
Mailing Address 1121 ESSEX DRIVE		Transaction ID : SA11AI.4674	
City WILMINGTON	State NC	Zip Code 28403	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee.		C	
Name of Employer LEWIS FARMS	Occupation FARMER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2000.00		

Full Name (Last, First, Middle Initial) B. STEVEN LOZINSKY		Date of Receipt M M / D D / Y Y Y Y 04 / 24 / 2014	
Mailing Address 317 WADE STEPHENSON ROAD		Transaction ID : SA11AI.4580	
City HOLLY SPRINGS	State NC	Zip Code 27540	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee.		C	
Name of Employer SPARKLE & SHINE CLEANING SERVICES	Occupation OWNER		
Receipt For: 2014 <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. JEFFREY M MACKINNON		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2014	
Mailing Address 1634 I STREET, NW		Transaction ID : SA11AI.4781	
City WASHINGTON	State DC	Zip Code 20036	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee.		C	
Name of Employer RYAN MACKINNON, VASAPOLI AND BERZOK	Occupation GOVERNMENT RELATIONS		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 2000.00
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 40 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
STEVEN H. MATTHEWS

Mailing Address 108 HIBISCUS DR

City State Zip Code
CLAYTON NC 27527

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

Name of Employer Occupation
MATTHEWS MOTORS AUTO SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 25 / 2014

Transaction ID : SA11AI.4620

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
DAVID L. MATTHEWS

Mailing Address 260 BILLY MATTHEWS LANE

City State Zip Code
TURKEY NC 28393

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

Name of Employer Occupation
CIRCLE M. FARMS FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 23 / 2014

Transaction ID : SA11AI.4561

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
JAMES LOUIS MAXWELL III

Mailing Address PO BOX 10009

City State Zip Code
GOLDSBORO NC 27532

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

Name of Employer Occupation
GOLDSBORO MILLING COMPANY EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 24 / 2014

Transaction ID : SA11AI.4576

Amount of Each Receipt this Period
500.00

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

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

3350.00

**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 41 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
H GORDON MAXWELL III

Mailing Address **PO DRAWER 10009**

City **GOLDSBORO** State **NC** Zip Code **27532**

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

Name of Employer **GOLDSBORO MILLING COMPANY** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : SA11AI.4572

Amount of Each Receipt this Period
500.00

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

Mailing Address **615 W. MAIN STREET**

City **MOUNT OLIVE** State **NC** Zip Code **28365**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 22 / 2014

Transaction ID : SA11AI.4598

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
KYLE H. MCINTYRE

Mailing Address **1938 S LIVE OAK PARKWAY**

City **WILMINGTON** State **NC** Zip Code **28403**

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

Name of Employer **KHM HOLDINGS, LLC** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 17 / 2014

Transaction ID : SA11AI.4883

Amount of Each Receipt this Period
1000.00

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

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 42 OF 147	
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LEE MCLAMB

Mailing Address 19 BRITISH COURT

City State Zip Code
SMITHFIELD NC 27577

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 27 / 2014

Transaction ID : SA11AI.4666

Amount of Each Receipt this Period
1000.00

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

Mailing Address 224 GOLDFIELD DRIVE

City State Zip Code
GARNER NC 27529

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

Name of Employer Occupation
KEN MELTON & ASSOCIATES SENIOR CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 01 / 2014

Transaction ID : SA11AI.4708

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
FRED G. MILLS SR.

Mailing Address PO BOX 6171

City State Zip Code
RALEIGH NC 27628

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

Name of Employer Occupation
MILLS CONSTRUCION COMPANY SECRETARY/TREASURER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 01 / 2014

Transaction ID : SA11AI.4701

Amount of Each Receipt this Period
250.00

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 43 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DOUGLAS MISKEW

Mailing Address 105 CRYSTLEWOOD COURT

City MORRISVILLE State NC Zip Code 27560

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

Name of Employer PUBLIC SECTOR GROUP Occupation CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 28 / 2014

Transaction ID : SA11AI.4712

Amount of Each Receipt this Period
250.00

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

Mailing Address PO BOX 338

City HARRELLS State NC Zip Code 28444

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

Name of Employer CLEAR RUN FARMS CONSULTING Occupation FARMING CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 22 / 2014

Transaction ID : SA11AI.4805

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
H. NEIL MOORE

Mailing Address 172 EDDIE L. JONES ROAD

City IVANHOE State NC Zip Code 28447

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

Name of Employer IVANHOE BLUEBERRY FARMS Occupation SECRETARY / TREASURER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 26 / 2014

Transaction ID : SA11AI.4672

Amount of Each Receipt this Period
1600.00

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

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 44 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WILLIE R. MOORE

Mailing Address 3394 IVANHOE ROAD

City State Zip Code
IVANHOE NC 28447

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

Name of Employer Occupation
IVANHOE BLUEBERRY FARMS FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 26 / 2014

Transaction ID : SA11AI.4673

Amount of Each Receipt this Period
2100.00

B. Full Name (Last, First, Middle Initial)
CHARLES B. NEELY JR.

Mailing Address 3065 GRANVILLE DRIVE

City State Zip Code
RALEIGH NC 27609

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

Name of Employer Occupation
WILLIAMS MULLEN ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.5031

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
EDWARD T. NESSELROADE

Mailing Address 1521 LANDFALL DRIVE

City State Zip Code
WILMINGTON NC 28405

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.5027

Amount of Each Receipt this Period
500.00

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

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

2850.00

**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 45 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GRAHAM R. NEVILLE

Mailing Address **PO DRAWER 410**

City **SMITHFIELD** State **NC** Zip Code **27577**

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

Name of Employer **GRAHAM NEVILLE & ASSOCIATES** Occupation **CERTIFIED INSURANCE COUNSELOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : SA11AI.4571

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
DARRYL D. NIRENBERG

Mailing Address **307 WOODLAND TERRACE**

City **ALEXANDRIA** State **VA** Zip Code **22302**

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

Name of Employer **STEPTOE & JOHNSON LLP** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1750.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : SA11AI.4709

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
DARRYL D. NIRENBERG

Mailing Address **307 WOODLAND TERRACE**

City **ALEXANDRIA** State **VA** Zip Code **22302**

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

Name of Employer **STEPTOE & JOHNSON LLP** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 25 / 2014

Transaction ID : SA11AI.4930

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 46 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KELLY NORMAN

Mailing Address 121 E. MAIN STREET

City Clayton State NC Zip Code 27520

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

Name of Employer THE WAGNER HOUSE Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 24 / 2014

Transaction ID : SA11A1.4720

Amount of Each Receipt this Period
250.00

IN-KIND: FOOD/BEVERAGE

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

Mailing Address PO BOX 552

City GARLAND State NC Zip Code 28441

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : SA11A1.4828

Amount of Each Receipt this Period
250.00

REFUNDED \$250.00 ON 5/27/2014 SEE SCHEDULE B LINE 20(A)

C. Full Name (Last, First, Middle Initial)
IVAN CRAIG OLIVE

Mailing Address 5278 US 70 WEST BUSINESS

City CLAYTON State NC Zip Code 27520

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

Name of Employer JOHNSTON COUNTY Occupation REGISTER OF DEEDS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 24 / 2014

Transaction ID : SA11A1.4581

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 47 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MICHAEL OPPEGAARD

Mailing Address **PO BOX 868**

City **HAMPSTEAD** State **NC** Zip Code **28443**

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

Name of Employer **JOE MAHR, COA** Occupation **ACCOUNTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 22 / 2014

Transaction ID : SA11AI.4600

Amount of Each Receipt this Period
250.00

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

Mailing Address **PO BOX 189**

City **FRANKLINTON** State **NC** Zip Code **27525**

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

Name of Employer **DR GARY D OYSTER, DDS** Occupation **DENTIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.4966

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
TERRY L. PARRISH

Mailing Address **136 MEADOW RUN**

City **CLAYTON** State **NC** Zip Code **27520**

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

Name of Employer **CAROLINA FIRE PROTECTION, INC** Occupation **VICE PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 28 / 2014

Transaction ID : SA11AI.4676

Amount of Each Receipt this Period
300.00

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 48 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
R. DOYLE PARRISH

Mailing Address 2609 KINGSLEY ROAD

City State Zip Code
RALEIGH NC 27612

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

Name of Employer Occupation
SUMMIT HOSPITALITY CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.4967

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
BARRY W. PARTLO

Mailing Address 435 HIGHWAY 42 EAST

City State Zip Code
CLAYTON NC 27527

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

Name of Employer Occupation
DIRECT DISTRIBUTORS INC. OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 26 / 2014

Transaction ID : SA11AI.4905

Amount of Each Receipt this Period
250.00

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

Mailing Address 601 DELLWOOD PLACE

City State Zip Code
GOLDSBORO NC 27534

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

Name of Employer Occupation
GOLDSBORO MILLING CO MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : SA11AI.4577

Amount of Each Receipt this Period
500.00

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 49 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GLENN PIERCE

Mailing Address 5300 TEN TEN ROAD

City State Zip Code
APEX NC 27539

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

Name of Employer Occupation
PIERCE GROUP BENEFITS INSURANCE BROKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 17 / 2014

Transaction ID : SA11AI.4539

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
RHETT KENNEDY POLLOCK

Mailing Address 1900 SCOTTS HILL LOOP RD.

City State Zip Code
WILMINGTON NC 28411

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

Name of Employer Occupation
SELF EMPLOYED RHETT K POLLOCK, ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 17 / 2014

Transaction ID : SA11AI.4515

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
DAVID M. POWERS

Mailing Address 130 COPPERFIELD PLACE COURT

City State Zip Code
WINSTON SALEM NC 27106

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

Name of Employer Occupation
RAI SERVICES COMPANY VICE PRESIDENT, STATE GOVERNMENT RE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : SA11AI.4780

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 50 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

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

Mailing Address 4581 UNION SCHOOL ROAD

City State Zip Code
CLINTON NC 28328

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

Name of Employer Occupation
PRESTAGE FARMS AGRI-BUSINESS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : SA11AI.4570

Amount of Each Receipt this Period
1600.00

B. Full Name (Last, First, Middle Initial)
WILLIAM G. PURVIS

Mailing Address 2818 HYDRANGEA PLACE

City State Zip Code
WILMINGTON NC 28403

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

Name of Employer Occupation
CAPE FEAR COMMERCIAL MANAGING DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 26 / 2014

Transaction ID : SA11AI.4903

Amount of Each Receipt this Period
500.00

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

Mailing Address PO BOX 336

City State Zip Code
KENANSVILLE NC 28349

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

Name of Employer Occupation
KMQ INC. PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 22 / 2014

Transaction ID : SA11AI.4594

Amount of Each Receipt this Period
500.00

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

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

2600.00

**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 51 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
J. MICHAEL QUINN

Mailing Address 101 SIGMA DR

City State Zip Code
GARNER NC 27529

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

Name of Employer Occupation
COTTON GROWERS COOPERATIVE PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 29 / 2014

Transaction ID : SA11AI.4686

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
WILLIAM D RATLEY

Mailing Address 1927 OAK HARBOUR DRIVE

City State Zip Code
OCEAN ISLE BEACH NC 28469

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

Name of Employer Occupation
RATLEY CONSTRUCTION DISTRIBUTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 22 / 2014

Transaction ID : SA11AI.4599

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
GARY M. RHODES

Mailing Address 1318 MARINA BAY DRIVE

City State Zip Code
NORTH MYRTLE BEACH SC 29582

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

Name of Employer Occupation
NUFAB NATIONAL REBAR AREA MANATER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 23 / 2014

Transaction ID : SA11AI.4616

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 52 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RANDY W. RICHARTZ

Mailing Address 2541 BRIDGEWATER COVE

City State Zip Code
WILMINGTON NC 28411

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

Name of Employer Occupation
RANDY W. RICHARTZ, CPA, PLLC CERTIFIED PUBLIC ACCOUNTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 24 / 2014

Transaction ID : SA11AI.4586

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
ROBERT E. RICHTER

Mailing Address 16215 NE 25TH AVENUE

City State Zip Code
RIDGEFIELD WA 98642

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 27 / 2014

Transaction ID : SA11AI.4961

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
JENNIFER J. RIPPY

Mailing Address 100 WINDLASS DRIVE

City State Zip Code
WILMINGTON NC 28409

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

Name of Employer Occupation
WRIGHTSVILLE FARM MANAGEMENT PRINCIPAL

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 26 / 2014

Transaction ID : SA11AI.4901

Amount of Each Receipt this Period
1000.00

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 53 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DAVID L. ROSE

Mailing Address 2687 OLD BAILEY HIGHWAY

City State Zip Code
NASHVILLE NC 27856

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

Name of Employer Occupation
JB ROSE & SONS, INC FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 28 / 2014

Transaction ID : SA11AI.4671

Amount of Each Receipt this Period
250.00

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

Mailing Address 4894 LIDDELL ROAD

City State Zip Code
SEVEN SPRINGS NC 28578

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

Name of Employer Occupation
M&R HOLDINGS, INC. PRESIDENT / TOBACCONIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 03 / 2014

Transaction ID : SA11AI.4761

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
ROBERT F RUFFNER JR.

Mailing Address PO BOX 4189

City State Zip Code
WILMINGTON NC 28406

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

Name of Employer Occupation
CLANCY & THEYS CONSTRUCTION CO. VICE PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 17 / 2014

Transaction ID : SA11AI.4885

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 54 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROSALYN L. SAMPSON

Mailing Address 5218 NC 130 EAST

City ROWLAND State NC Zip Code 28383

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 01 / 2014

Transaction ID : SA11AI.4706

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 2045 WALDEN WAY

City CLAYTON State NC Zip Code 27527

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

Name of Employer SIGNAGE Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 24 / 2014

Transaction ID : SA11AI.4579

Amount of Each Receipt this Period
 250.00

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

Mailing Address 3878 BLUFTON MILL ROAD

City FREE UNION State VA Zip Code 22940

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

Name of Employer DUDINSKY & ASSOCIATES Occupation GOVERNMENT & BUSINESS RELATIONS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 30 / 2014

Transaction ID : SA11AI.4716

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 55 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ALICE SCOTT		Date of Receipt M M / D D / Y Y Y Y 04 / 29 / 2014	
Mailing Address 7757 OSCAR LOOP		Transaction ID : SA11AI.4681	
City LUCAMA	State NC	Zip Code 27851	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer SCOTT FARMS	Occupation FARMER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1750.00		

Full Name (Last, First, Middle Initial) B. BILLY SEWELL		Date of Receipt M M / D D / Y Y Y Y 04 / 24 / 2014	
Mailing Address 521 NEW BRIDGE STREET		Transaction ID : SA11AI.4568	
City JACKSONVILLE	State NC	Zip Code 28540	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer GOLDEN CORRAL	Occupation CEO		
Receipt For: 2014 <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) C. BILLIE W. SHELTON		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 6817 WEST ROBERTA ROAD		Transaction ID : SA11AI.5025	
City OCEAN ISLE BEACH	State NC	Zip Code 28469	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 800.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 2100.00
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 56 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JAY PATRICK SHORT

Mailing Address 4617 SOUTH HOLDEN ROAD

City Greensboro State NC Zip Code 27406

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

Name of Employer SELF EMPLOYED Occupation FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 29 / 2014

Transaction ID : SA11AI.4690

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JAY PATRICK SHORT

Mailing Address 4617 SOUTH HOLDEN ROAD

City Greensboro State NC Zip Code 27406

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

Name of Employer SELF EMPLOYED Occupation FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 26 / 2014

Transaction ID : SA11AI.4906

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
WILLIAM M. SIMMONS

Mailing Address 3545 NORTH UTAH STREET

City ARLINGTON State VA Zip Code 22207

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

Name of Employer DUTKO GRAYLING Occupation GOVERNMENT AFFAIRS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.5003

Amount of Each Receipt this Period
500.00

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 57 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BARBARA V. SMITH

Mailing Address 1210 CONGRESSIONAL LANE

City State Zip Code
WILMINGTON NC 28411

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11AI.5037

Amount of Each Receipt this Period
100.00

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

Mailing Address 1840 S. LIVE OAK PARKWAY

City State Zip Code
WILMINGTON NC 28403

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

Name of Employer Occupation
SELF EMPLOYED ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 17 / 2014

Transaction ID : SA11AI.4886

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
B REX STEPHENS

Mailing Address 209 SATARA DRIVE

City State Zip Code
WILMINGTON NC 28412

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

Name of Employer Occupation
LANDMARK ORGANIZATION REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 22 / 2014

Transaction ID : SA11AI.4595

Amount of Each Receipt this Period
500.00

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

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

3200.00

**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 58 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DWIGHT R. STOGSDILL

Mailing Address 819 FOX RIDGE LANE

City State Zip Code
WILMINGTON NC 28405

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1420.64

Date of Receipt
M M / D D / Y Y Y Y
05 / 03 / 2014

Transaction ID : SA11AI.4779

Amount of Each Receipt this Period
250.00

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

Mailing Address 525 ASHPOLE CHURCH ROAD

City State Zip Code
ROWLAND NC 28383

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

Name of Employer Occupation
SELF EMPLOYED FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : SA11AI.4767

Amount of Each Receipt this Period
250.00

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

Mailing Address PO BOX 700

City State Zip Code
PINE LEVEL NC 27568

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

Name of Employer Occupation
NC DOT / JOHNSTON COUNTY REVIEW APPRAISER / SCHOOL BOARD MEI

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : SA11AI.4610

Amount of Each Receipt this Period
100.00

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 59 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ROBERT M. TAYLOR		Date of Receipt M M / D D / Y Y Y Y 04 / 21 / 2014	
Mailing Address 106 BORYK AVENUE		Transaction ID : SA11AI.4551	
City TOPSAIL BEACH	State NC	Zip Code 28445	
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: 2014 <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. RANDAL C. TEAGUE		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2014	
Mailing Address 5902 MOUNT EAGLE DRIVE APARTMENT 808		Transaction ID : SA11AI.4879	
City ALEXANDRIA	State VA	Zip Code 22303	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer VORYS SATER SEYMOUR AND PEARCE	Occupation ATTORNEY		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 700.00		

Full Name (Last, First, Middle Initial) C. DAVID THOMPSON		Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2014	
Mailing Address 337 BRADLEY DRIVE		Transaction ID : SA11AI.4549	
City WILMINGTON	State NC	Zip Code 28409	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer FIRST SOUTH BANK	Occupation CITY EXECUTIVE		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	1000.00
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 60 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MICHAEL K. TORREY

Mailing Address 1514 NORTH FILLMORE STREET

City ARLINGTON State VA Zip Code 22201

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

Name of Employer MICHAEL TORREY & ASSOCIATES, LLC Occupation FEDERAL GOVERNMENT AFFAIRS / PRINCI

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2014

Transaction ID : SA11AI.4717

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
RAIFORD TRASK III

Mailing Address 3001 MIDDLE SOUND LOOP ROAD

City WILMINGTON State NC Zip Code 28411

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

Name of Employer TRASK LAND COMPANY Occupation REAL ESTATE DEVELOPMENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3779.76

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2014

Transaction ID : SA11AI.4902

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
RAIFORD TRASK III

Mailing Address 3001 MIDDLE SOUND LOOP ROAD

City WILMINGTON State NC Zip Code 28411

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

Name of Employer TRASK LAND COMPANY Occupation REAL ESTATE DEVELOPMENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3779.76

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2014

Transaction ID : SA11AI.4939

Amount of Each Receipt this Period
179.76

IN-KIND: FOOD/BEVERAGE

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

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

1679.76

**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 61 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CARL V. VENTERS

Mailing Address 148 EDGEWATER LANE

City State Zip Code
WILMINGTON NC 28403

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 17 / 2014

Transaction ID : SA11AI.4607

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
DIANE V. VICK

Mailing Address 11124 CHRISTIAN ROAD

City State Zip Code
WILSON NC 27896

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

Name of Employer Occupation
VICK FAMILY FARMS FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 03 / 2014

Transaction ID : SA11AI.4759

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
HAROLD WELLS IV

Mailing Address 2606 MIMOSA PLACE

City State Zip Code
WILMINGTON NC 28403

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

Name of Employer Occupation
WELLS INSURANCE CO-PRESIDENT AND CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 26 / 2014

Transaction ID : SA11AI.4900

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 62 OF 147	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DONNA M. WHITE

Mailing Address 1330 W MAIN STREET

City Clayton State NC Zip Code 27520

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

Name of Employer DHHS Occupation R.N.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 24 / 2014

Transaction ID : SA11AI.4575

Amount of Each Receipt this Period
50.00

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

Mailing Address PO BOX 277

City BENSON State NC Zip Code 27504

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

Name of Employer DR. LARRY A. WILLIAMS, DDS Occupation DENTIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 06 / 2014

Transaction ID : SA11AI.4771

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
T. JERRY WILLIAMS

Mailing Address 6900 CLEAR SAILING LANE

City RALEIGH State NC Zip Code 27615

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

Name of Employer T. JERRY WILLIAMS Occupation CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **950.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 25 / 2014

Transaction ID : SA11AI.4898

Amount of Each Receipt this Period
250.00

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 63 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KENNETH J. WILSON

Mailing Address 215 MAPLE CREEK DRIVE

City WALLACE State NC Zip Code 28466

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 27 / 2014

Transaction ID : SA11AI.4960

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
GENEVIEVE MEDLIN WOODALL

Mailing Address 413 SOUTH 2ND STREET

City SMITHFIELD State NC Zip Code 27577

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **305.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 27 / 2014

Transaction ID : SA11AI.4959

Amount of Each Receipt this Period
55.00

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

Mailing Address 208 UWHARRIE COURT

City GARNER State NC Zip Code 27529

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

Name of Employer HTR GROUP Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **922.68**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 24 / 2014

Transaction ID : SA11AI.4722

Amount of Each Receipt this Period
422.68
 IN-KIND: FOOD/BEVERAGE

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

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

577.68

**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 64 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LAURA B. WOOTEN

Mailing Address 6000 CANADERO DRIVE

City State Zip Code
RALEIGH NC 27612

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 28 / 2014

Transaction ID : SA11AI.4669

Amount of Each Receipt this Period
250.00

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

Mailing Address 261 TALTON ROAD

City State Zip Code
PRINCETON NC 27569

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

Name of Employer Occupation
SELF EMPLOYED FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 01 / 2014

Transaction ID : SA11AI.4698

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
RICKY ONEIL YOUNG

Mailing Address 2550 NC HIGHWAY 242 SOUTH

City State Zip Code
BENSON NC 27504

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

Name of Employer Occupation
YOUNG'S AUTO CENTER AUTO SALVAGE OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 05 / 2014

Transaction ID : SA11AI.4776

Amount of Each Receipt this Period
600.00

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

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

1350.00

97407.44

**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 65 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

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

Mailing Address **PO BOX 442**

City **SHARPSBURG** State **GA** Zip Code **30277**

FEC ID number of contributing federal political committee. **C C00411579**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 05 / 2014

Transaction ID : SA11C.4762

Amount of Each Receipt this Period
 1000.00

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

Mailing Address **1932 WYNNTON ROAD**

City **COLUMBUS** State **GA** Zip Code **31999**

FEC ID number of contributing federal political committee. **C C00034157**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11C.5018

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS (NEUROSURGERY) PAC

Mailing Address **5550 MEADOWBROOK COURT**

City **ROLLING MEADOWS** State **IL** Zip Code **60008**

FEC ID number of contributing federal political committee. **C C00413955**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 01 / 2014

Transaction ID : SA11C.4693

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN DENTAL ASSOCIATION PAC

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: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11C.5034

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
ASSOCIATED BUILDERS AND CONTRACTORS (ABC) PAC

Mailing Address 4250 N. FAIRFAX DRIVE
9TH FLOOR

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00010421

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11C.5012

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
ASSOCIATED GENERAL CONTRACTORS OF AMERICA (AGC) PAC

Mailing Address 53 D STREET, SE

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00082917

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 05 / 2014

Transaction ID : SA11C.4763

Amount of Each Receipt this Period
1500.00

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

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

8500.00

**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 67 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 1120 20TH STREET, NW
SUITE 800

City WASHINGTON State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11C.5036

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
AUTOMOTIVE RECYCLERS ASSOCIATION PAC

Mailing Address 9113 CHURCH STREET

City MANASSAS State VA Zip Code 20110

FEC ID number of contributing federal political committee. **C** C00401125

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11C.5014

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
CAROLINA AUTO RECYCLERS PAC

Mailing Address 427 GREEN LEAF ROAD

City ANGIER State NC Zip Code 27501

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2014

Transaction ID : SA11C.4812

Amount of Each Receipt this Period
250.00

NON-FEDERAL POLITICAL COMMITTEE;
FEDERALLY PERMISSIBLE SOURCES

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 68 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

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

Mailing Address **PO BOX 2485**

City **SPRINGFIELD** State **VA** Zip Code **22152**

FEC ID number of contributing federal political committee. **C C00469429**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 05 / 2014

Transaction ID : SA11C.4810

Amount of Each Receipt this Period
3000.00

B. Full Name (Last, First, Middle Initial)
CORNING INCORPORATED EMPLOYEES (CORE) PAC

Mailing Address **325 7TH STREET, NW
SUITE 600**

City **WASHINGTON** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00033589**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11C.5008

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION

Mailing Address **601 PENNSYLVANIA AVENUE, NW
SOUTH BUILDING, SUITE 600**

City **WASHINGTON** State **DC** Zip Code **20004**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11C.5035

Amount of Each Receipt this Period
500.00

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

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

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 69 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) DLA PIPER PAC		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 500 8TH STREET, NW 7TH FLOOR		Transaction ID : SA11C.5015	
City WASHINGTON State DC Zip Code 20004	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00151340	Name of Employer Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		

Full Name (Last, First, Middle Initial) DOMINION RESOURCES PAC		Date of Receipt M M / D D / Y Y Y Y 04 / 27 / 2014	
Mailing Address PO BOX 26666		Transaction ID : SA11C.4665	
City RICHMOND State VA Zip Code 23261	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00108209	Name of Employer Occupation		
Receipt For: 2014 <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) DOMINION RESOURCES PAC		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address PO BOX 26666		Transaction ID : SA11C.5021	
City RICHMOND State VA Zip Code 23261	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C C00108209	Name of Employer Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3500.00		

SUBTOTAL of Receipts This Page (optional).....	4500.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 70 OF 147
<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DUKE ENERGY CORPORATION PAC

Mailing Address 550 SOUTH TRYON STREET, DEC37D

City State Zip Code
CHARLOTTE NC 28202

FEC ID number of contributing federal political committee. **C** C00083535

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11C.5013

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
ELECT- THE PAC OF THE ALABAMA FARMERS FEDERATION

Mailing Address PO BOX 11000

City State Zip Code
MONTGOMERY AL 36191

FEC ID number of contributing federal political committee. **C** C00094573

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11C.5017

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
EVERY REPUBLICAN IS CRUCIAL (ERIC) PAC

Mailing Address 25 E. MAIN STREET
SUITE 200

City State Zip Code
RICHMOND VA 23219

FEC ID number of contributing federal political committee. **C** C00384701

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
05 / 30 / 2014

Transaction ID : SA11C.4870

Amount of Each Receipt this Period
5000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FARM CREDIT COUNCIL PAC

Mailing Address 50 F STREET NW
SUITE 900

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00193631

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 11 / 2014

Transaction ID : SA11C.4881

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
FLORIDA SUGAR CANE LEAGUE PAC

Mailing Address 1301 PENNSYLVANIA AVENUE NW
SUITE 401

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00012328

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 05 / 2014

Transaction ID : SA11C.4811

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
FORD MOTOR COMPANY CIVIC ACTION FUND

Mailing Address PO BOX 75000

City DETRIOT State MI Zip Code 48275

FEC ID number of contributing federal political committee. **C** C00046474

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 22 / 2014

Transaction ID : SA11C.4555

Amount of Each Receipt this Period
1000.00

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 72 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FRIENDS OF JOHN BOEHNER

Mailing Address 7908 CINCINNATI DAYTON ROAD
SUITE I-2

City WEST CHESTER State OH Zip Code 45069

FEC ID number of contributing federal political committee. **C C00237198**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 05 / 2014

Transaction ID : SA11C.4766

Amount of Each Receipt this Period
 2000.00

B. Full Name (Last, First, Middle Initial)
HUDSON FOR CONGRESS

Mailing Address PO BOX 5053

City CONCORD State NC Zip Code 28027

FEC ID number of contributing federal political committee. **C C00504522**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2014

Transaction ID : SA11C.4869

Amount of Each Receipt this Period
 2000.00

C. Full Name (Last, First, Middle Initial)
KOCH INDUSTRIES, INC (KOCH) PAC

Mailing Address 600 14TH STREET, NW
SUITE 800

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00236489**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11C.5016

Amount of Each Receipt this Period
 1000.00

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

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

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 73 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LORILLARD TOBACCO COMPANY PUBIC AFFAIRS COMMITTEE

Mailing Address 714 GREEN VALLEY ROAD

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. **C** C00112888

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 23 / 2014

Transaction ID : SA11C.4933

Amount of Each Receipt this Period
 5000.00

B. Full Name (Last, First, Middle Initial)
LOWE'S COMPANIES, INC. POLITICAL ACTION COMMITTEE

Mailing Address 1000 LOWE'S BOULEVARD

City Mooresville State NC Zip Code 28117

FEC ID number of contributing federal political committee. **C** C00251751

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11C.5009

Amount of Each Receipt this Period
 5000.00

C. Full Name (Last, First, Middle Initial)
MARATHON PETROLEUM CORPORATION EMPLOYEES (MP) PAC FEDERAL

Mailing Address 539 SOUTH MAIN STREET
ROOM 2635

City Findlay State OH Zip Code 45840

FEC ID number of contributing federal political committee. **C** C00496307

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 03 / 2014

Transaction ID : SA11C.4754

Amount of Each Receipt this Period
 2500.00

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

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

12500.00

**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 74 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MONSANTO CITIZENSHIP FUND

Mailing Address 800 NORTH LINDBERGH BOULEVARD

City State Zip Code
ST LOUIS MO 63167

FEC ID number of contributing federal political committee. **C** C00042069

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 01 / 2014

Transaction ID : SA11C.4695

Amount of Each Receipt this Period
3000.00

B. Full Name (Last, First, Middle Initial)
MORE CONSERVATIVES PAC (MCPAC)

Mailing Address 228 S. WASHINGTON STREET
SUITE 115

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00540187

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3593.45

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 23 / 2014

Transaction ID : SA11C.4859

Amount of Each Receipt this Period
993.45

IN-KIND-TRAVEL

C. Full Name (Last, First, Middle Initial)
MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1919 M STREET NW
5TH FLOOR

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00004812

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11C.5020

Amount of Each Receipt this Period
2500.00

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

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

6493.45

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

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

FOR LINE NUMBER: PAGE 75 OF 147
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF CHAIN DRUG STORES POLITICAL ACTION COMMITTEE

Mailing Address 1776 WILSON BOULEVARD
SUITE 200

City ARLINGTON State VA Zip Code 22209

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11C.5005

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1101 KING STREET
SUITE 600

City ALEXANDRIA State VA Zip Code 22314

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11C.5023

Amount of Each Receipt this Period
 5000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL COTTON COUNCIL COMMITTEE FOR THE ADVANCEMENT OF COTTON

Mailing Address PO BOX 2995

City CORDOVA State TN Zip Code 28088

FEC ID number of contributing federal political committee. **C** C00023028

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11C.5024

Amount of Each Receipt this Period
 2500.00

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

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

10000.00

**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 76 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS

Mailing Address 469 HOSPITAL DRIVE
SUITE C

City State Zip Code
GASTONIA NC 28054

FEC ID number of contributing federal political committee. **C** C00405555

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11C.5022

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL MULTI HOUSING COUNCIL POLITICAL ACTION COMMITTEE

Mailing Address 1850 M STREET, NW
SUITE 450

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00130773

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11C.5010

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL RESTAURANT ASSOCIATION PAC

Mailing Address 2055 L STREET NW

City State Zip Code
WASHINGTON DC 20036

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 01 / 2014

Transaction ID : SA11C.4694

Amount of Each Receipt this Period
5000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NATIONAL TURKEY FEDERATION PAC (TURPAC)		Date of Receipt M M / D D / Y Y Y Y 05 / 03 / 2014
Mailing Address 1225 NEW YORK AVENUE SUITE 400		Transaction ID : SA11C.4755
City WASHINGTON State DC Zip Code 20005	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C C00076182	Name of Employer Occupation	Amount of Each Receipt this Period 2000.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) B. NATSO INC. PAC		Date of Receipt M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 1330 BRADDOCK PLACE SUITE 501		Transaction ID : SA11C.4516
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C C00097865	Name of Employer Occupation	Amount of Each Receipt this Period 500.00
Receipt For: 2014 <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. NC FARM BUREAU (FARM) PAC		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address PO BOX 27766		Transaction ID : SA11C.4880
City RALEIGH State NC Zip Code 27611	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00216754	Name of Employer Occupation	Amount of Each Receipt this Period 5000.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10000.00	

SUBTOTAL of Receipts This Page (optional).....	7500.00
TOTAL This Period (last page this line number only).....	7500.00

**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 78 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NEW YORK LIFE INSURANCE COMPANY PAC

Mailing Address 51 MADISON AVENUE
ROOM 1109

City NEW YORK State NY Zip Code 10010

FEC ID number of contributing federal political committee. **C C00158881**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 05 / 2014

Transaction ID : SA11C.4808

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
NEXT CENTURY FUND

Mailing Address 116 S ROYAL STREET

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00343947**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 20 / 2014

Transaction ID : SA11C.4834

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
OLD DOMINION FREIGHT LINE, INC PAC

Mailing Address 500 OLD DOMINION WAY

City THOMASVILLE State NC Zip Code 27360

FEC ID number of contributing federal political committee. **C C00496836**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2014

Transaction ID : SA11C.4899

Amount of Each Receipt this Period
1000.00

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

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

8500.00

**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 79 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RETAIL INDUSTRY LEADERS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1700 N. MOORE STREET
SUITE 2250

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00112763

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11C.5007

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
RJ REYNOLDS PAC

Mailing Address PO BOX 718

City WINSTON SALEM State NC Zip Code 27102

FEC ID number of contributing federal political committee. **C** C00042002

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11C.5004

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
SANOFI US EMPLOYEE'S POLITICAL ACTION COMMITTEE

Mailing Address 55 CORPORATE DRIVE

City BRIDGEWATER State NJ Zip Code 08807

FEC ID number of contributing federal political committee. **C** C00144345

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11C.5006

Amount of Each Receipt this Period
2500.00

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

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

8500.00

**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 80 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SEABOARD CORPORATION PAC

Mailing Address 9000 WEST 67TH STREET

City State Zip Code
SHAWNEE MISSION KS 66202

FEC ID number of contributing federal political committee. **C C00246736**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 17 / 2013

Transaction ID : SA11C.3595

Amount of Each Receipt this Period
1000.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
SEABOARD CORPORATION PAC

Mailing Address 9000 WEST 67TH STREET

City State Zip Code
SHAWNEE MISSION KS 66202

FEC ID number of contributing federal political committee. **C C00246736**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 25 / 2014

Transaction ID : SA11C.4564

Amount of Each Receipt this Period
-1000.00

[MEMO ITEM]
REDESIGNATED TO P-2014

C. Full Name (Last, First, Middle Initial)
SEABOARD CORPORATION PAC

Mailing Address 9000 WEST 67TH STREET

City State Zip Code
SHAWNEE MISSION KS 66202

FEC ID number of contributing federal political committee. **C C00246736**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 25 / 2014

Transaction ID : SA11C.4565

Amount of Each Receipt this Period
1000.00

[MEMO ITEM]
REDESIGNATED FROM G-2014

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

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

0.00

**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 81 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SEABOARD CORPORATION PAC

Mailing Address 9000 WEST 67TH STREET

City State Zip Code
SHAWNEE MISSION KS 66202

FEC ID number of contributing federal political committee. **C** C00246736

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 10 / 2014

Transaction ID : SA11C.3974

Amount of Each Receipt this Period
1000.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
SEABOARD CORPORATION PAC

Mailing Address 9000 WEST 67TH STREET

City State Zip Code
SHAWNEE MISSION KS 66202

FEC ID number of contributing federal political committee. **C** C00246736

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 25 / 2014

Transaction ID : SA11C.4566

Amount of Each Receipt this Period
-1000.00

[MEMO ITEM]
REDESIGNATED TO P-2014

C. Full Name (Last, First, Middle Initial)
SEABOARD CORPORATION PAC

Mailing Address 9000 WEST 67TH STREET

City State Zip Code
SHAWNEE MISSION KS 66202

FEC ID number of contributing federal political committee. **C** C00246736

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 25 / 2014

Transaction ID : SA11C.4567

Amount of Each Receipt this Period
1000.00

[MEMO ITEM]
REDESIGNATED FROM G-2014

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

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

0.00

**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 82 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THE CATERPILLAR, INC. EMPLOYEE PAC

Mailing Address 100 NE ADAMS STREET

City State Zip Code
PEORIA IL 61629

FEC ID number of contributing federal political committee. **C** C00148031

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : SA11C.4765

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
THE FREEDOM PROJECT

Mailing Address 320 FIRST STREET, SE

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C** C00305805

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : SA11C.4764

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
THE HOME DEPOT POLITICAL ACTION COMMITTEE

Mailing Address 1155 F STREET, NW
SUITE 400

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00284885

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11C.5011

Amount of Each Receipt this Period
1000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 147
	<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)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WHOLESALE-DISTRIBUTOR POLITICAL ACTION COMMITTEE

Mailing Address 1325 G STREET, NW
SUITE 1000

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00109306

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11C.5019

Amount of Each Receipt this Period
 1000.00

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).....

1000.00

106743.45

**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 84 OF 147	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
			<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DAVID ROUZER

Mailing Address 108 PEACH ORCHARD DRIVE

City Benson State NC Zip Code 27504

FEC ID number of contributing federal political committee. **C H2NC07096**

Name of Employer THE ROUZER COMPANY Occupation BUSINESS CONSULTANT / PRINCIPAL

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
64797.10

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 16 / 2014

Transaction ID : SA11D.4980

Amount of Each Receipt this Period
115.00

IN-KIND: REGISTRATION FEE

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

Mailing Address 108 PEACH ORCHARD DRIVE

City Benson State NC Zip Code 27504

FEC ID number of contributing federal political committee. **C H2NC07096**

Name of Employer THE ROUZER COMPANY Occupation BUSINESS CONSULTANT / PRINCIPAL

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
64808.81

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 29 / 2014

Transaction ID : SA11D.4982

Amount of Each Receipt this Period
11.71

IN-KIND: TAXI FARE

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

Mailing Address 108 PEACH ORCHARD DRIVE

City Benson State NC Zip Code 27504

FEC ID number of contributing federal political committee. **C H2NC07096**

Name of Employer THE ROUZER COMPANY Occupation BUSINESS CONSULTANT / PRINCIPAL

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
64884.92

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 02 / 2014

Transaction ID : SA11D.4984

Amount of Each Receipt this Period
76.11

IN-KIND: HOTEL

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

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

202.82

**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 85 OF 147
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) DAVID ROUZER		Date of Receipt MM / DD / YYYY 06 / 09 / 2014
Mailing Address 108 PEACH ORCHARD DRIVE		Transaction ID : SA11D.4986
City BENSON	State NC	
FEC ID number of contributing federal political committee. C H2NC07096		Amount of Each Receipt this Period 183.44
Name of Employer THE ROUZER COMPANY	Occupation BUSINESS CONSULTANT / PRINCIPAL	IN-KIND: HOTEL
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 65068.36	

Full Name (Last, First, Middle Initial) DAVID ROUZER		Date of Receipt MM / DD / YYYY 06 / 18 / 2014
Mailing Address 108 PEACH ORCHARD DRIVE		Transaction ID : SA11D.4988
City BENSON	State NC	
FEC ID number of contributing federal political committee. C H2NC07096		Amount of Each Receipt this Period 33.88
Name of Employer THE ROUZER COMPANY	Occupation BUSINESS CONSULTANT / PRINCIPAL	IN-KIND: MEALS
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 65102.24	

Full Name (Last, First, Middle Initial) DAVID ROUZER		Date of Receipt MM / DD / YYYY 06 / 25 / 2014
Mailing Address 108 PEACH ORCHARD DRIVE		Transaction ID : SA11D.4990
City BENSON	State NC	
FEC ID number of contributing federal political committee. C H2NC07096		Amount of Each Receipt this Period 16.85
Name of Employer THE ROUZER COMPANY	Occupation BUSINESS CONSULTANT / PRINCIPAL	IN-KIND: TAXI FARE
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 65119.09	

SUBTOTAL of Receipts This Page (optional).....	234.17
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 86 OF 147
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) DAVID ROUZER		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 27 / 2014
Mailing Address 108 PEACH ORCHARD DRIVE		Transaction ID : SA11D.4992
City BENSON	State NC	Zip Code 27504
FEC ID number of contributing federal political committee. C H2NC07096	Amount of Each Receipt this Period 73.63	
Name of Employer THE ROUZER COMPANY	Occupation BUSINESS CONSULTANT / PRINCIPAL	IN-KIND: CAR RENTAL
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 65217.72	

Full Name (Last, First, Middle Initial) DAVID ROUZER		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 27 / 2014
Mailing Address 108 PEACH ORCHARD DRIVE		Transaction ID : SA11D.4994
City BENSON	State NC	Zip Code 27504
FEC ID number of contributing federal political committee. C H2NC07096	Amount of Each Receipt this Period 25.00	
Name of Employer THE ROUZER COMPANY	Occupation BUSINESS CONSULTANT / PRINCIPAL	IN-KIND: TRANSPORTATION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 65217.72	

Full Name (Last, First, Middle Initial) DAVID ROUZER		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 29 / 2014
Mailing Address 108 PEACH ORCHARD DRIVE		Transaction ID : SA11D.4996
City BENSON	State NC	Zip Code 27504
FEC ID number of contributing federal political committee. C H2NC07096	Amount of Each Receipt this Period 506.24	
Name of Employer THE ROUZER COMPANY	Occupation BUSINESS CONSULTANT / PRINCIPAL	IN-KIND: HOTEL
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 65723.96	

SUBTOTAL of Receipts This Page (optional).....	604.87
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 87 OF 147
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) DAVID ROUZER		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2014	
Mailing Address 108 PEACH ORCHARD DRIVE		Transaction ID : SA11D.4977	
City BENSON	State NC	Zip Code 27504	Amount of Each Receipt this Period 4063.36 IN-KIND: MILEAGE
FEC ID number of contributing federal political committee. C H2NC07096			
Name of Employer THE ROUZER COMPANY	Occupation BUSINESS CONSULTANT / PRINCIPAL		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 69787.32		

Full Name (Last, First, Middle Initial) B.		Date of Receipt M M / D D / Y Y Y Y Y Y	
Mailing Address			
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
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			
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
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).....	4063.36
TOTAL This Period (last page this line number only).....	5105.22

**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 88 OF 147
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CANDIDATE COMMAND, LLC

Mailing Address 1420 NW VIVION
SUITE 113

City KANSAS CITY State MO Zip Code 64118

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
20645.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 05 / 2014

Transaction ID : SA14.4783

Amount of Each Receipt this Period
20645.00

REFUND OF 4/22/2014 EXPENDITURES SEE SCHEDULE B LINE 17

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).....

20645.00

20645.00

**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 89 OF 147			
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AMERICAN STATIONERY			Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014		
Mailing Address 100 N. PARK AVENUE			Amount of Each Disbursement this Period 68.80		
City PERU	State IN	Zip Code 46970	Transaction ID : SB17.4789		
Purpose of Disbursement STATIONERY		001 Category/Type			
Candidate Name					
Office Sought:	House Senate President	Disbursement For:			
		Primary General Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. AMERICAN STATIONERY			Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014		
Mailing Address 100 N. PARK AVENUE			Amount of Each Disbursement this Period 68.80		
City PERU	State IN	Zip Code 46970	Transaction ID : SB17.4890		
Purpose of Disbursement STATIONERY		001 Category/Type			
Candidate Name					
Office Sought:	House Senate President	Disbursement For:			
		Primary General Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) C. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014		
Mailing Address PO BOX 85431			Amount of Each Disbursement this Period 10.05		
City BATON ROUGE	State LA	Zip Code 70810	Transaction ID : SB17.4533		
Purpose of Disbursement CREDIT CARD FEE		003 Category/Type			
Candidate Name					
Office Sought:	House Senate President	Disbursement For:			
		Primary General Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	147.65
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 90 OF 147			
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 1.27 Transaction ID : SB17.4534
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 10.05 Transaction ID : SB17.4647
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 4.20 Transaction ID : SB17.4648
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	15.52
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 91 OF 147			
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 8.10 Transaction ID : SB17.4650
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 4.20 Transaction ID : SB17.4651
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 19.80 Transaction ID : SB17.4652
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	32.10
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 92 OF 147			
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 39.30
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Transaction ID : SB17.4649
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 4.20
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Transaction ID : SB17.4653
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 19.80
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Transaction ID : SB17.4654
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	63.30
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 93 OF 147			
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 39.30
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Transaction ID : SB17.4655
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 4.20
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Transaction ID : SB17.4656
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 19.80
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Transaction ID : SB17.4657
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	63.30
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 94 OF 147			
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014	
Mailing Address PO BOX 85431			Amount of Each Disbursement this Period 4.20	
City BATON ROUGE	State LA	Zip Code 70810	Transaction ID : SB17.4658	
Purpose of Disbursement CREDIT CARD FEE		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014	
Mailing Address PO BOX 85431			Amount of Each Disbursement this Period 10.05	
City BATON ROUGE	State LA	Zip Code 70810	Transaction ID : SB17.4659	
Purpose of Disbursement CREDIT CARD FEE		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014	
Mailing Address PO BOX 85431			Amount of Each Disbursement this Period 8.10	
City BATON ROUGE	State LA	Zip Code 70810	Transaction ID : SB17.4660	
Purpose of Disbursement CREDIT CARD FEE		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	22.35
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 95 OF 147			
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 19.80
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Transaction ID : SB17.4662
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 10.05
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Transaction ID : SB17.4741
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 6.15
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Transaction ID : SB17.4742
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... 36.00
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 96 OF 147			
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 10.05 Transaction ID : SB17.4743
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 10.05 Transaction ID : SB17.4744
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 19.80 Transaction ID : SB17.4745
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	39.90
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 97 OF 147			
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 39.30
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Transaction ID : SB17.4746
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 2.25
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Transaction ID : SB17.4747
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 19.80
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Transaction ID : SB17.4748
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	61.35
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 98 OF 147			
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 10.05 Transaction ID : SB17.4749
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 19.80 Transaction ID : SB17.4750
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 39.30 Transaction ID : SB17.4751
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	69.15
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 99 OF 147			
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 19.80 Transaction ID : SB17.4752
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 19.80 Transaction ID : SB17.4753
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 10.05 Transaction ID : SB17.4799
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	49.65
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 100 OF 147	
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 10.05 Transaction ID : SB17.4800
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 2.25 Transaction ID : SB17.4796
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 19.80 Transaction ID : SB17.4797
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	32.10
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 101 OF 147			
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 19.80 Transaction ID : SB17.4798
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 1.27 Transaction ID : SB17.4872
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 101.70 Transaction ID : SB17.4894
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	122.77
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 102 OF 147			
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 0.49 Transaction ID : SB17.4919
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 101.70 Transaction ID : SB17.4918
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 4.20 Transaction ID : SB17.4916
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	106.39
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 103 OF 147			
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 10.05
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Transaction ID : SB17.4917
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 2.44
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Transaction ID : SB17.4944
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 4.20
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Transaction ID : SB17.4945
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	16.69
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 104 OF 147	
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 2.25 Transaction ID : SB17.4946
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 39.30 Transaction ID : SB17.4947
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 10.05 Transaction ID : SB17.4661
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	51.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 147			
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 4.20
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Transaction ID : SB17.4948
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 19.80
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Transaction ID : SB17.4949
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 10.05
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Transaction ID : SB17.4950
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	34.05
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 106 OF 147	
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 809.10 Transaction ID : SB17.4951
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address PO BOX 85431		Amount of Each Disbursement this Period 39.30 Transaction ID : SB17.4952
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CREDIT CARD FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. TESSA BELK		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 120-5 SHALLOTTE CROSSING PARKWAY 3		Amount of Each Disbursement this Period 750.00 Transaction ID : SB17.4825
City SHALLOTTE	State NC	
Zip Code 28470	Purpose of Disbursement GOTV	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	809.10
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 107 OF 147	
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CANDIDATE COMMAND, LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 1420 NW VIVION SUITE 113		Amount of Each Disbursement this Period 56662.00 Transaction ID : SB17.4632
City KANSAS CITY State MO Zip Code 64118	Purpose of Disbursement PRINTING 004 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CAPITOL HILL SUITES		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 200 C STREET, SE		Amount of Each Disbursement this Period 772.72 Transaction ID : SB17.4867
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement HOTEL 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CRICKET		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address 5887 COPLEY DRIVE		Amount of Each Disbursement this Period 380.50 Transaction ID : SB17.4645
City SAN DIEGO State CA Zip Code 92111	Purpose of Disbursement MOBILE PHONE SERVICES 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	57815.22
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 108 OF 147			
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CRICKET		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 5887 COPLEY DRIVE		Amount of Each Disbursement this Period 380.50 Transaction ID : SB17.4846
City SAN DIEGO	State CA	
Zip Code 92111	Purpose of Disbursement MOBILE PHONE SERVICES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CRICKET		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 5887 COPLEY DRIVE		Amount of Each Disbursement this Period 380.50 Transaction ID : SB17.4915
City SAN DIEGO	State CA	
Zip Code 92111	Purpose of Disbursement MOBILE PHONE SERVICES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ELECTEKUSA		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address PO BOX 23715		Amount of Each Disbursement this Period 800.00 Transaction ID : SB17.4793
City CHAGRIN FALLS	State OH	
Zip Code 44023	Purpose of Disbursement SOFTWARE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1561.00
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 109 OF 147			
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ELECTEKUSA		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address PO BOX 23715		Amount of Each Disbursement this Period 800.00 Transaction ID : SB17.4862
City CHAGRIN FALLS	State OH	
Zip Code 44023	Purpose of Disbursement SOFTWARE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. FIRST CITIZENS BANK		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address PO BOX 27131		Amount of Each Disbursement this Period 12.75 Transaction ID : SB17.4740
City RALEIGH	State NC	
Zip Code 27611	Purpose of Disbursement BANK FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. FIRST CITIZENS BANK		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address PO BOX 27131		Amount of Each Disbursement this Period 56.75 Transaction ID : SB17.4868
City RALEIGH	State NC	
Zip Code 27611	Purpose of Disbursement BANK FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	869.50
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 110 OF 147	
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FIRST CITIZENS BANK		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address PO BOX 27131		Amount of Each Disbursement this Period 35.00 Transaction ID : SB17.4975
City RALEIGH	State NC	
Zip Code 27611	Purpose of Disbursement BANK FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. TYLER J FOOTE		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 4668 STILL MEADOW DRIVE APARTMENT #112		Amount of Each Disbursement this Period 3670.50 Transaction ID : SB17.4642
City WILMINGTON	State NC	
Zip Code 28412	Purpose of Disbursement SALARY	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. TYLER J FOOTE		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 4668 STILL MEADOW DRIVE APARTMENT #112		Amount of Each Disbursement this Period 3670.50 Transaction ID : SB17.4854
City WILMINGTON	State NC	
Zip Code 28412	Purpose of Disbursement SALARY	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	7376.00
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 111 OF 147	
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TYLER J FOOTE		Date of Disbursement MM / DD / YYYY 06 / 11 / 2014
Mailing Address 4668 STILL MEADOW DRIVE APARTMENT #112		Amount of Each Disbursement this Period 2124.33 Transaction ID : SB17.4876
City WILMINGTON State NC Zip Code 28412	Purpose of Disbursement REIMBURSEMENT - PRINTING Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. DAVID FORD		Date of Disbursement MM / DD / YYYY 05 / 16 / 2014
Mailing Address 117 CONCORD COURT		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.4837
City CLAYTON State NC Zip Code 27520	Purpose of Disbursement IN-KIND - SIGNS Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. HARPER POLLING, LLC		Date of Disbursement MM / DD / YYYY 04 / 22 / 2014
Mailing Address 121 STATE STREET		Amount of Each Disbursement this Period 74.00 Transaction ID : SB17.4525
City HARRISBURG State PA Zip Code 17101	Purpose of Disbursement PHONE BANKS Category/Type 004	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2598.33
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 112 OF 147	
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. IMPACT STRATEGIES		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address PO BOX 18165		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.4633
City RALEIGH	State NC	
Zip Code 27619	Purpose of Disbursement CAMPAIGN CONSULTING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. IMPACT STRATEGIES		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address PO BOX 18165		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.4843
City RALEIGH	State NC	
Zip Code 27619	Purpose of Disbursement CAMPAIGN CONSULTING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. GABRIEL JOHNSON		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 54 VINYARD DRIVE		Amount of Each Disbursement this Period 510.00 Transaction ID : SB17.4821
City CLAYTON	State NC	
Zip Code 27520	Purpose of Disbursement GOTV	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	6510.00
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 113 OF 147	
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. LAUREN KEISER		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 136 MANCHESTER TRAIL		Amount of Each Disbursement this Period 550.00 Transaction ID : SB17.4823
City CLAYTON	State NC	
Zip Code 27527	Purpose of Disbursement GOTV	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CHAUNCEY E LAMBETH		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 824 ST. ANDREW DRIVE APARTMENT Q		Amount of Each Disbursement this Period 553.73 Transaction ID : SB17.4634
City WILMINGTON	State NC	
Zip Code 28412	Purpose of Disbursement REIMBURSEMENT-MILEAGE	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. CHAUNCEY E LAMBETH		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 824 ST. ANDREW DRIVE APARTMENT Q		Amount of Each Disbursement this Period 2705.25 Transaction ID : SB17.4643
City WILMINGTON	State NC	
Zip Code 28412	Purpose of Disbursement SALARY	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3808.98
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 114 OF 147	
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CHAUNCEY E LAMBETH		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 824 ST. ANDREW DRIVE APARTMENT Q		Amount of Each Disbursement this Period 992.73 Transaction ID : SB17.4816
City WILMINGTON State NC Zip Code 28412	Purpose of Disbursement REIMBURSEMENT-MILEAGE/FOOD/BEVERAGE/POSTAGE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CHAUNCEY E LAMBETH		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2014
Mailing Address 824 ST. ANDREW DRIVE APARTMENT Q		Amount of Each Disbursement this Period 668.85 Transaction ID : SB17.4850
City WILMINGTON State NC Zip Code 28412	Purpose of Disbursement REIMBURSEMENT-MILEAGE/FOOD/POSTAGE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CHAUNCEY E LAMBETH		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 824 ST. ANDREW DRIVE APARTMENT Q		Amount of Each Disbursement this Period 2705.25 Transaction ID : SB17.4851
City WILMINGTON State NC Zip Code 28412	Purpose of Disbursement SALARY 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4366.83
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 115 OF 147	
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. LN CONSULTING		Date of Disbursement MM / DD / YYYY 05 / 02 / 2014
Mailing Address 121 STATE STREET		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.4735
City HARRISBURG	State PA	
Zip Code 17101	Purpose of Disbursement CAMPAIGN CONSULTING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. LN CONSULTING		Date of Disbursement MM / DD / YYYY 06 / 09 / 2014
Mailing Address 121 STATE STREET		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.4864
City HARRISBURG	State PA	
Zip Code 17101	Purpose of Disbursement CAMPAIGN CONSULTING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. MAJORITY CONNECTIONS, LLC		Date of Disbursement MM / DD / YYYY 05 / 02 / 2014
Mailing Address 10 PINNACLE ROAD		Amount of Each Disbursement this Period 4112.72 Transaction ID : SB17.4734
City DURHAM	State NC	
Zip Code 27705	Purpose of Disbursement MEDIA CONSULTING/ADVERTISING-INTERNET	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	14112.72
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 116 OF 147	
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MAJORITY CONNECTIONS, LLC		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address 10 PINNACLE ROAD		Amount of Each Disbursement this Period 3169.72 Transaction ID : SB17.4865
City DURHAM	State NC	
Zip Code 27705	Purpose of Disbursement MEDIA CONSULTING/REIMBURSEMENT ADVERTISEMENT-INTERNET	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. METRO MAILING AND PRINTING		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 109 WINONA STREET		Amount of Each Disbursement this Period 955.21 Transaction ID : SB17.4635
City CHARLOTTE	State NC	
Zip Code 28203	Purpose of Disbursement PRINTING	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. METRO MAILING AND PRINTING		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 109 WINONA STREET		Amount of Each Disbursement this Period 179.71 Transaction ID : SB17.4732
City CHARLOTTE	State NC	
Zip Code 28203	Purpose of Disbursement PRINTING/POSTAGE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4304.64
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 117 OF 147			
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. METRO MAILING AND PRINTING			Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 109 WINONA STREET			Amount of Each Disbursement this Period 3100.71 Transaction ID : SB17.4892
City CHARLOTTE	State NC	Zip Code 28203	
Purpose of Disbursement PRINTING/POSTAGE	Candidate Name		Category/ Type 003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. MORE CONSERVATIVES PAC (MCPAC)			Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address 228 S. WASHINGTON STREET SUITE 115			Amount of Each Disbursement this Period 993.45 Transaction ID : SB17.4860
City ALEXANDRIA	State VA	Zip Code 22314	
Purpose of Disbursement IN-KIND-TRAVEL	Candidate Name MORE CONSERVATIVES PAC (MCPAC)		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. JACOB MOZENA			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 426 ROUNE DRIVE APARTMENT 204			Amount of Each Disbursement this Period 850.00 Transaction ID : SB17.4827
City WILMINGTON	State NC	Zip Code 28403	
Purpose of Disbursement GOTV	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	3100.71
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 118 OF 147	
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NATIONBUILDER		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 448 S. HILL STREET #200		Amount of Each Disbursement this Period 499.00 Transaction ID : SB17.4739
City LOS ANGELES State CA Zip Code 90013	Purpose of Disbursement SOFTWARE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. NATIONBUILDER		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 448 S. HILL STREET #200		Amount of Each Disbursement this Period 384.16 Transaction ID : SB17.4848
City LOS ANGELES State CA Zip Code 90013	Purpose of Disbursement SOFTWARE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. NEWS & OBSERVER		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 215 S MCDOWELL STREET		Amount of Each Disbursement this Period 2145.00 Transaction ID : SB17.4738
City RALEIGH State NC Zip Code 27602	Purpose of Disbursement ADVERTISING-NEWSPAPER 004 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3028.16
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 119 OF 147	
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KELLY NORMAN		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 121 E. MAIN STREET		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.4721
City CLAYTON	State NC	
Zip Code 27520	Purpose of Disbursement IN-KIND: FOOD/BEVERAGE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. NORTH CAROLINA DEPARTMENT OF REVENUE		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 501 N. WILMINGTON STREET		Amount of Each Disbursement this Period 530.00 Transaction ID : SB17.4736
City RALEIGH	State NC	
Zip Code 27604	Purpose of Disbursement TAXES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. NORTH CAROLINA DEPARTMENT OF REVENUE		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address 501 N. WILMINGTON STREET		Amount of Each Disbursement this Period 530.00 Transaction ID : SB17.4874
City RALEIGH	State NC	
Zip Code 27604	Purpose of Disbursement TAXES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1310.00
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 120 OF 147			
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JAMES NORTHROP		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 601 S. COLLEGE ROAD CB #24606		Amount of Each Disbursement this Period 850.00 Transaction ID : SB17.4826
City WILMINGTON State NC Zip Code 28403	Purpose of Disbursement GOTV 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. O3 STRATEGIES		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address PO BOX 25363		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.4726
City RALEIGH State NC Zip Code 27611	Purpose of Disbursement WEBSITE SERVICES 004 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. O3 STRATEGIES		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address PO BOX 25363		Amount of Each Disbursement this Period 50.00 Transaction ID : SB17.4730
City RALEIGH State NC Zip Code 27611	Purpose of Disbursement WEBSITE SERVICES 004 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1000.00
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 121 OF 147			
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. O3 STRATEGIES		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address PO BOX 25363		Amount of Each Disbursement this Period 50.00 Transaction ID : SB17.4861
City RALEIGH	State NC	
Zip Code 27611	Purpose of Disbursement WEBSITE SERVICES	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ONMESSAGE INC.		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 705 MELVIN AVENUE #105		Amount of Each Disbursement this Period 18519.80 Transaction ID : SB17.4631
City ANNAPOLIS	State MD	
Zip Code 21401	Purpose of Disbursement ADVERTISING-TV	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ONMESSAGE INC.		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 705 MELVIN AVENUE #105		Amount of Each Disbursement this Period 11445.00 Transaction ID : SB17.4636
City ANNAPOLIS	State MD	
Zip Code 21401	Purpose of Disbursement ADVERTISING-TV	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	30014.80
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 122 OF 147	
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ONMESSAGE INC.		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 705 MELVIN AVENUE #105		Amount of Each Disbursement this Period 750.00 Transaction ID : SB17.4637
City ANNAPOLIS State MD Zip Code 21401	Purpose of Disbursement ADVERTISING-TV 004 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ONMESSAGE INC.		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 705 MELVIN AVENUE #105		Amount of Each Disbursement this Period 80008.00 Transaction ID : SB17.4727
City ANNAPOLIS State MD Zip Code 21401	Purpose of Disbursement ADVERTISING-TV 004 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ONMESSAGE INC.		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 705 MELVIN AVENUE #105		Amount of Each Disbursement this Period 14959.00 Transaction ID : SB17.4729
City ANNAPOLIS State MD Zip Code 21401	Purpose of Disbursement ADVERTISING-TV 004 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	95717.00
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 123 OF 147	
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ONMESSAGE INC.			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014	
Mailing Address 705 MELVIN AVENUE #105			Amount of Each Disbursement this Period 60484.00	
City ANNAPOLIS	State MD	Zip Code 21401	Transaction ID : SB17.4817	
Purpose of Disbursement ADVERTISING-TV		004 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. PAPER MART			Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014	
Mailing Address 2164 N. BATAVIA STREET			Amount of Each Disbursement this Period 161.33	
City ORANGE	State CA	Zip Code 92865	Transaction ID : SB17.4893	
Purpose of Disbursement STATIONERY PARTIALLY REFUNDED \$64.20 ON 7/11/14 SEE SCHEDULE A LINE 14		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. AMANDA PRICE			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014	
Mailing Address 1900 S. NC 111 HIGHWAY			Amount of Each Disbursement this Period 690.00	
City CHINQUAPIN	State NC	Zip Code 28521	Transaction ID : SB17.4819	
Purpose of Disbursement GOTV		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	61335.33
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 124 OF 147			
	<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)
DAVID ROUZER FOR CONGRESS

A. PUBLIC OPINION STRATEGIES

Full Name (Last, First, Middle Initial)
Mailing Address 214 NORTH FAYETTE STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement SURVEY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 25 / 2014

Amount of Each Disbursement this Period: 7750.00

Transaction ID : SB17.4638

Category/Type: 005

B. DAVID ROUZER

Full Name (Last, First, Middle Initial)
Mailing Address 108 PEACH ORCHARD DRIVE

City BENSON State NC Zip Code 27504

Purpose of Disbursement IN-KIND: REGISTRATION FEE

Candidate Name DAVID ROUZER

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: NC District: 07

Date of Disbursement: 05 / 16 / 2014

Amount of Each Disbursement this Period: 115.00

Transaction ID : SB17.4981

Category/Type:

C. DAVID ROUZER

Full Name (Last, First, Middle Initial)
Mailing Address 108 PEACH ORCHARD DRIVE

City BENSON State NC Zip Code 27504

Purpose of Disbursement IN-KIND: TAXI FARE

Candidate Name DAVID ROUZER

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: NC District: 07

Date of Disbursement: 05 / 29 / 2014

Amount of Each Disbursement this Period: 11.71

Transaction ID : SB17.4983

Category/Type:

SUBTOTAL of Disbursements This Page (optional)..... 7876.71

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 125 OF 147	
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DAVID ROUZER		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 108 PEACH ORCHARD DRIVE		Amount of Each Disbursement this Period 76.11 Transaction ID : SB17.4985
City BENSON State NC Zip Code 27504	Purpose of Disbursement IN-KIND: HOTEL	
Candidate Name DAVID ROUZER		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 07		

Full Name (Last, First, Middle Initial) B. DAVID ROUZER		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address 108 PEACH ORCHARD DRIVE		Amount of Each Disbursement this Period 183.44 Transaction ID : SB17.4987
City BENSON State NC Zip Code 27504	Purpose of Disbursement IN-KIND: HOTEL	
Candidate Name DAVID ROUZER		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 07		

Full Name (Last, First, Middle Initial) C. DAVID ROUZER		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 108 PEACH ORCHARD DRIVE		Amount of Each Disbursement this Period 33.88 Transaction ID : SB17.4989
City BENSON State NC Zip Code 27504	Purpose of Disbursement IN-KIND: MEALS	
Candidate Name DAVID ROUZER		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 07		

SUBTOTAL of Disbursements This Page (optional).....	293.43
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 126 OF 147	
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DAVID ROUZER		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address 108 PEACH ORCHARD DRIVE		Amount of Each Disbursement this Period 16.85 Transaction ID : SB17.4991
City BENSON State NC Zip Code 27504	Purpose of Disbursement IN-KIND: TAXI FARE	
Candidate Name DAVID ROUZER		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 07		

Full Name (Last, First, Middle Initial) B. DAVID ROUZER		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 108 PEACH ORCHARD DRIVE		Amount of Each Disbursement this Period 73.63 Transaction ID : SB17.4993
City BENSON State NC Zip Code 27504	Purpose of Disbursement IN-KIND: CAR RENTAL	
Candidate Name DAVID ROUZER		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 07		

Full Name (Last, First, Middle Initial) C. DAVID ROUZER		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 108 PEACH ORCHARD DRIVE		Amount of Each Disbursement this Period 25.00 Transaction ID : SB17.4995
City BENSON State NC Zip Code 27504	Purpose of Disbursement IN-KIND: TRANSPORTATION	
Candidate Name DAVID ROUZER		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 07		

SUBTOTAL of Disbursements This Page (optional).....	115.48
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 127 OF 147	
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DAVID ROUZER		Date of Disbursement MM / DD / YYYY 06 / 29 / 2014
Mailing Address 108 PEACH ORCHARD DRIVE		Amount of Each Disbursement this Period 506.24 Transaction ID : SB17.4997
City BENSON State NC Zip Code 27504	Purpose of Disbursement IN-KIND: HOTEL	
Candidate Name DAVID ROUZER	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 07	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. DAVID ROUZER		Date of Disbursement MM / DD / YYYY 06 / 30 / 2014
Mailing Address 108 PEACH ORCHARD DRIVE		Amount of Each Disbursement this Period 4063.36 Transaction ID : SB17.4978
City BENSON State NC Zip Code 27504	Purpose of Disbursement IN-KIND: MILEAGE	
Candidate Name DAVID ROUZER	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 07	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. JEREMY SALLEE		Date of Disbursement MM / DD / YYYY 05 / 16 / 2014
Mailing Address 4169 HEARTHSIDE DRIVE APARTMENT 207		Amount of Each Disbursement this Period 963.00 Transaction ID : SB17.4822
City WILMINGTON State NC Zip Code 28412	Purpose of Disbursement GOTV	
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	5532.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 128 OF 147	
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JEREMY SALLEE		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2014
Mailing Address 4169 HEARTHSIDE DRIVE APARTMENT 207		Amount of Each Disbursement this Period 71.44 Transaction ID : SB17.4849
City WILMINGTON State NC Zip Code 28412	Purpose of Disbursement GOTV 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ELIZABETH R SEIDEL		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 4520 STILL MEADOW DRIVE UNIT 101		Amount of Each Disbursement this Period 143.00 Transaction ID : SB17.4639
City WILMINGTON State NC Zip Code 28412	Purpose of Disbursement REIMBURSEMENT-MEALS 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ELIZABETH R SEIDEL		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 4520 STILL MEADOW DRIVE UNIT 101		Amount of Each Disbursement this Period 1939.75 Transaction ID : SB17.4644
City WILMINGTON State NC Zip Code 28412	Purpose of Disbursement SALARY 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2154.19
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 129 OF 147	
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ELIZABETH R SEIDEL		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 4520 STILL MEADOW DRIVE UNIT 101		Amount of Each Disbursement this Period 775.04 Transaction ID : SB17.4792
City WILMINGTON State NC Zip Code 28412	Purpose of Disbursement REIMBURSEMENT-MILEAGE Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ELIZABETH R SEIDEL		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 4520 STILL MEADOW DRIVE UNIT 101		Amount of Each Disbursement this Period 41.39 Transaction ID : SB17.4815
City WILMINGTON State NC Zip Code 28412	Purpose of Disbursement REIMBURSEMENT-FOOD/BEVERAGE Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ELIZABETH R SEIDEL		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2014
Mailing Address 4520 STILL MEADOW DRIVE UNIT 101		Amount of Each Disbursement this Period 128.80 Transaction ID : SB17.4852
City WILMINGTON State NC Zip Code 28412	Purpose of Disbursement REIMBURSEMENT-MILEAGE Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	945.23
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 147			
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ELIZABETH R SEIDEL			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014	
Mailing Address 4520 STILL MEADOW DRIVE UNIT 101			Amount of Each Disbursement this Period 1939.75	
City WILMINGTON	State NC	Zip Code 28412	Transaction ID : SB17.4853	
Purpose of Disbursement SALARY		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. LUKE STANCIL			Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2014	
Mailing Address 147 WILSHIRE WAY			Amount of Each Disbursement this Period 480.00	
City CLAYTON	State NC	Zip Code 27527	Transaction ID : SB17.4724	
Purpose of Disbursement GOTV		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. LUKE STANCIL			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014	
Mailing Address 147 WILSHIRE WAY			Amount of Each Disbursement this Period 810.00	
City CLAYTON	State NC	Zip Code 27527	Transaction ID : SB17.4820	
Purpose of Disbursement GOTV		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	3229.75
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 147			
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STAPLES		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2014
Mailing Address 500 STAPLES DRIVE		Amount of Each Disbursement this Period 74.88
City FRAMINGHAM	State MA	
Zip Code 01702	Purpose of Disbursement STATIONERY	Transaction ID : SB17.4622
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. THE FORD FIRM, PLLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address PO BOX 701		Amount of Each Disbursement this Period 2125.00
City CLAYTON	State NC	
Zip Code 27528	Purpose of Disbursement COMPLIANCE CONSULTING	Transaction ID : SB17.4795
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. THE FORD FIRM, PLLC		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address PO BOX 701		Amount of Each Disbursement this Period 1000.00
City CLAYTON	State NC	
Zip Code 27528	Purpose of Disbursement COMPLIANCE CONSULTING	Transaction ID : SB17.4863
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3199.88
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 132 OF 147			
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE SAMPSON WEEKLY			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address PO BOX 1915			Amount of Each Disbursement this Period 537.50 Transaction ID : SB17.4794
City CLINTON	State NC	Zip Code 28329	
Purpose of Disbursement ADVERTISING-NEWSPAPER		Category/ Type 004	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) B. TIME WARNER CABLE			Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address PO BOX 70872			Amount of Each Disbursement this Period 246.68 Transaction ID : SB17.4877
City CHARLOTTE	State NC	Zip Code 28272	
Purpose of Disbursement INTERNET SERVICE / TELEPHONE SERVICE		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) C. LOGAN TURNER			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 4702 ALLIGATOR ROAD			Amount of Each Disbursement this Period 750.00 Transaction ID : SB17.4824
City ASH	State NC	Zip Code 28420	
Purpose of Disbursement GOTV		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	1534.18
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 133 OF 147		
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. UNITED STATES POSTAL SERVICE			Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 201 NORTH 3RD STREET			Amount of Each Disbursement this Period 49.00 Transaction ID : SB17.4646
City SMITHFIELD	State NC	Zip Code 27577	
Purpose of Disbursement POSTAGE		Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) B. UNITED STATES POSTAL SERVICE			Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 201 NORTH 3RD STREET			Amount of Each Disbursement this Period 98.00 Transaction ID : SB17.4840
City SMITHFIELD	State NC	Zip Code 27577	
Purpose of Disbursement POSTAGE		Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) C. US AIRWAYS			Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address 4000 EAST SKY HARBOR BOULEVARD			Amount of Each Disbursement this Period 344.00 Transaction ID : SB17.4914
City PHOENIX	State AZ	Zip Code 85034	
Purpose of Disbursement AIRFARE		Candidate Name	Category/ Type 002
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

SUBTOTAL of Disbursements This Page (optional)	491.00
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 134 OF 147	
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US DEPARTMENT OF THE TREASURY			Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014	
Mailing Address 1500 PENNSYLVANIA AVENUE, NW			Amount of Each Disbursement this Period 6118.00	
City WASHINGTON	State DC	Zip Code 20220	Transaction ID : SB17.4630	
Purpose of Disbursement TAXES		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. US DEPARTMENT OF THE TREASURY			Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014	
Mailing Address 1500 PENNSYLVANIA AVENUE, NW			Amount of Each Disbursement this Period 2996.00	
City WASHINGTON	State DC	Zip Code 20220	Transaction ID : SB17.4737	
Purpose of Disbursement TAXES		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. US DEPARTMENT OF THE TREASURY			Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014	
Mailing Address 1500 PENNSYLVANIA AVENUE, NW			Amount of Each Disbursement this Period 2996.00	
City WASHINGTON	State DC	Zip Code 20220	Transaction ID : SB17.4875	
Purpose of Disbursement TAXES		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	6118.00
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 135 OF 147	
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US HOUSE OF REPRESENTATIVES GIFT SHOP			Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014	
Mailing Address 1 US CAPITOL LONGWORTH BUILDING			Amount of Each Disbursement this Period 986.75	
City WASHINGTON	State DC	Zip Code 20515	Transaction ID : SB17.4888	
Purpose of Disbursement FUNDRAISING SUPPLIES		Category/ Type 003		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. US HOUSE OF REPRESENTATIVES GIFT SHOP			Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014	
Mailing Address 1 US CAPITOL LONGWORTH BUILDING			Amount of Each Disbursement this Period 199.40	
City WASHINGTON	State DC	Zip Code 20515	Transaction ID : SB17.4909	
Purpose of Disbursement FUNDRAISING SUPPLIES		Category/ Type 003		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) C. SARAH WATERS			Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014	
Mailing Address 1711 CENTER ROAD			Amount of Each Disbursement this Period 6888.00	
City RALEIGH	State NC	Zip Code 27608	Transaction ID : SB17.4641	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 003		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	8074.15
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 136 OF 147	
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SARAH WATERS		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 1711 CENTER ROAD		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.4731
City RALEIGH State NC Zip Code 27608	Purpose of Disbursement FUNDRAISING CONSULTING Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. SARAH WATERS		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address 1711 CENTER ROAD		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.4866
City RALEIGH State NC Zip Code 27608	Purpose of Disbursement FUNDRAISING CONSULTING Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. BARRY WOODARD		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 208 UWHARRIE COURT		Amount of Each Disbursement this Period 422.68 Transaction ID : SB17.4723
City GARNER State NC Zip Code 27529	Purpose of Disbursement IN-KIND: FOOD/BEVERAGE Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	5422.68
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 137 OF 147			
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WTSB 1090		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address PO BOX 90		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.4814
City SMITHFIELD	State NC	
Zip Code 27577	Purpose of Disbursement ADVERTISING-RADIO	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. MARKEECE YOUNG		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 1830 BARBER MILL ROAD		Amount of Each Disbursement this Period 730.00 Transaction ID : SB17.4818
City CLAYTON	State NC	
Zip Code 27520	Purpose of Disbursement GOTV	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. CANDIDATE COMMAND, LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 1420 NW VIVION SUITE 113		Amount of Each Disbursement this Period 20645.00 Transaction ID : SB17.4626
City KANSAS CITY	State MO	
Zip Code 64118	Purpose of Disbursement PRINTING REFUNDED 5/5/14	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	22375.00
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 138 OF 147	
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CANDIDATE COMMAND, LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 1420 NW VIVION SUITE 113		Amount of Each Disbursement this Period 885.00
City KANSAS CITY State MO Zip Code 64118	Purpose of Disbursement PRINTING 004 Category/Type	
Candidate Name		Transaction ID : SB17.4627
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CAPITAL CITY MAIL SERVICE		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 2660-124 DISCOVERY DRIVE		Amount of Each Disbursement this Period 1064.00
City RALEIGH State NC Zip Code 27616	Purpose of Disbursement PRINTING 006 Category/Type	
Candidate Name		Transaction ID : SB17.4623
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. LAUREN KEISER		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 136 MANCHESTER TRAIL		Amount of Each Disbursement this Period 480.00
City CLAYTON State NC Zip Code 27527	Purpose of Disbursement GOTV 001 Category/Type	
Candidate Name		Transaction ID : SB17.4629
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2429.00
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 139 OF 147			
	<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)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. METRO MAILING AND PRINTING		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 109 WINONA STREET		Amount of Each Disbursement this Period 3015.57 Transaction ID : SB17.4624
City CHARLOTTE State NC Zip Code 28203	Purpose of Disbursement PRINTING/POSTAGE 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ONMESSAGE INC.		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 705 MELVIN AVENUE #105		Amount of Each Disbursement this Period 29528.41 Transaction ID : SB17.4625
City ANNAPOLIS State MD Zip Code 21401	Purpose of Disbursement ADVERTISING-TV 004 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. MARKEECE YOUNG		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 1830 BARBER MILL ROAD		Amount of Each Disbursement this Period 630.00 Transaction ID : SB17.4628
City CLAYTON State NC Zip Code 27520	Purpose of Disbursement GOTV 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	33173.98
TOTAL This Period (last page this line number only).....	403567.45

**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 140 OF 147			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GUY ROAD LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2014
Mailing Address 581 GUY ROAD SUITE 100		Amount of Each Disbursement this Period 250.00 Transaction ID : SB20A.4910
City CLAYTON	State NC Zip Code 27520	
Purpose of Disbursement REFUND OF 4/25/2014 CONTRIBUTION SEE SCHEDULE A LINE 11 (A)		Category/ Type 010
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. WILLIAM GREGORY HIPP		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 299 BALLARD ROAD		Amount of Each Disbursement this Period 500.00 Transaction ID : SB20A.4911
City FUQUAY VARINA	State NC Zip Code 27526	
Purpose of Disbursement REFUND OF 4/29/2014 CONTRIBUTION SEE SCHEDULE A LINE 11(A)		Category/ Type 010
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. NORRIS FARMS		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address PO BOX 552		Amount of Each Disbursement this Period 250.00 Transaction ID : SB20A.4913
City GARLAND	State NC Zip Code 28441	
Purpose of Disbursement REFUND OF 5/14/2014 CONTRIBUTION SEE SCHEDULE A LINE 11(A)		Category/ Type 010
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1000.00
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 141 OF 147	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DAVID ROUZER		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 108 PEACH ORCHARD DRIVE		Amount of Each Disbursement this Period 740.00 Transaction ID : SB20A.4787
City BENSON State NC Zip Code 27504	Purpose of Disbursement REIMBURSEMENT OF 2012 Q2 IN-KIND CONTRIBUTIONS SEE SCHEDULE A LINE 11(D) Category/Type 010	
Candidate Name DAVID ROUZER	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 07		

Full Name (Last, First, Middle Initial) B. DAVID ROUZER		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 108 PEACH ORCHARD DRIVE		Amount of Each Disbursement this Period 5496.00 Transaction ID : SB20A.4790
City BENSON State NC Zip Code 27504	Purpose of Disbursement REIMBURSEMENT OF 2012 Q3 IN-KIND CONTRIBUTIONS SEE SCHEDULE A LINE 11(D) Category/Type 010	
Candidate Name DAVID ROUZER	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 07		

Full Name (Last, First, Middle Initial) C. DAVID ROUZER		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address 108 PEACH ORCHARD DRIVE		Amount of Each Disbursement this Period 758.69 Transaction ID : SB20A.4844
City BENSON State NC Zip Code 27504	Purpose of Disbursement REIMBURSEMENT OF 2012 PREG, POSTG, AND YE IN-KIND CONTRIBUTIONS SEE SCHEDULE A LINE 11(D) Category/Type 010	
Candidate Name DAVID ROUZER	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 07		

SUBTOTAL of Disbursements This Page (optional).....	6994.69
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 142 OF 147	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DAVID ROUZER		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address 108 PEACH ORCHARD DRIVE		Amount of Each Disbursement this Period 5162.51 Transaction ID : SB20A.4845
City BENSON State NC Zip Code 27504	Purpose of Disbursement REIMBURSEMENT OF 2013 Q2 IN-KIND CONTRIBUTIONS SEE SCHEDULE A LINE 11(D)	
Candidate Name DAVID ROUZER	Category/Type 010	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 07		

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

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

SUBTOTAL of Disbursements This Page (optional).....	5162.51
TOTAL This Period (last page this line number only).....	13157.20

**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 143 OF 147	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DAVID ROUZER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BILL SHUSTER FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address PO BOX 27		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.4838
City HOLLIDAYSBURG	State PA	
Zip Code 16648	Purpose of Disbursement POLITICAL CONTRIBUTION	Category/ Type 011
Candidate Name WILLIAM SHUSTER	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PA District: 09	

Full Name (Last, First, Middle Initial) B. BRUNSWICK REC		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address PO BOX 2105		Amount of Each Disbursement this Period 250.00 Transaction ID : SB21.4873
City LELAND	State NC	
Zip Code 28451	Purpose of Disbursement POLITICAL CONTRIBUTION	Category/ Type 011
Candidate Name BRUNSWICK REC	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	1250.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
METRO MAILING AND PRINTING

Nature of Debt (Purpose):
PRINTING

Mailing Address 109 WINONA STREET

City State Zip Code
CHARLOTTE NC 28203

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.23

Amount Incurred This Period

891.17

Payment This Period

0.00

Outstanding Balance at Close of This Period

891.17

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
CANDIDATE COMMAND, LLC

Nature of Debt (Purpose):
PRINTING

Mailing Address 1420 NW VIVION SUITE 113

City State Zip Code
KANSAS CITY MO 64118

Outstanding Balance Beginning This Period

21530.00

Transaction ID : SD10.17

Amount Incurred This Period

0.00

Payment This Period

21530.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
CAPITAL CITY MAIL SERVICE

Nature of Debt (Purpose):
PRINTING

Mailing Address 2660-124 DISCOVERY DRIVE

City State Zip Code
RALEIGH NC 27616

Outstanding Balance Beginning This Period

1064.00

Transaction ID : SD10.18

Amount Incurred This Period

0.00

Payment This Period

1064.00

Outstanding Balance at Close of This Period

0.00

- 1) **SUBTOTALS** This Period This Page (optional) ▶
- 2) **TOTALS** This Period (last page this line number only) ▶
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

891.17

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LAUREN KEISER

Mailing Address 136 MANCHESTER TRAIL

City State Zip Code
CLAYTON NC 27527

Nature of Debt (Purpose):
GOTV

Outstanding Balance Beginning This Period	Transaction ID : SD10.19	
480.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	480.00	0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
METRO MAILING AND PRINTING

Mailing Address 109 WINONA STREET

City State Zip Code
CHARLOTTE NC 28203

Nature of Debt (Purpose):
PRINTING/POSTAGE

Outstanding Balance Beginning This Period	Transaction ID : SD10.20	
3015.57		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	3015.57	0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ONMESSAGE INC.

Mailing Address 705 MELVIN AVENUE #105

City State Zip Code
ANNAPOLIS MD 21401

Nature of Debt (Purpose):
ADVERTISING-TV

Outstanding Balance Beginning This Period	Transaction ID : SD10.21	
29528.41		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	29528.41	0.00

1) SUBTOTALS This Period This Page (optional)	0.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MARKEECE YOUNG

Nature of Debt (Purpose):
GOTV

Mailing Address 1830 BARBER MILL ROAD

City State Zip Code
CLAYTON NC 27520

Outstanding Balance Beginning This Period

630.00

Transaction ID : SD10.22

Amount Incurred This Period

0.00

Payment This Period

630.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
THE PROSPER GROUP CORPORATION

Nature of Debt (Purpose):
WEBSITE SERVICES

Mailing Address 435 EAST MAIN STREET
SUITE 250

City State Zip Code
GREENWOOD IN 46143

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.25

Amount Incurred This Period

10000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
SARAH WATERS

Nature of Debt (Purpose):
FUNDRAISING CONSULTING

Mailing Address 1711 CENTER ROAD

City State Zip Code
RALEIGH NC 27608

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.26

Amount Incurred This Period

3000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

1) **SUBTOTALS** This Period This Page (optional) ▶

13000.00

2) **TOTALS** This Period (last page this line number only) ▶

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER:
(check only one)

9
 10

NAME OF COMMITTEE (In Full)

DAVID ROUZER FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
OORBEEK MOREHOUSE STRATEGIES, LLC

Mailing Address 412 SOUTH CAPITOL STREET, SE
SUITE B

City State Zip Code
WASHINGTON DC 20003

Nature of Debt (Purpose):
FUNDRAISING
CONSULTING/REIMBURSEMENT TRAVEL

Outstanding Balance Beginning This Period **Transaction ID : SD10.27**

0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

15903.92 0.00 15903.92

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	15903.92
2) TOTALS This Period (last page this line number only)	29795.09
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	29795.09