

# 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  
**MCHENRY FOR CONGRESS**

ADDRESS (number and street) PO BOX 1406  
 Check if different than previously reported. (ACC) HICKORY NC 28603

2. **FEC IDENTIFICATION NUMBER** C C00393629 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)  
CITY STATE ZIP CODE STATE DISTRICT  
NC 10

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 11 / 06 / 2012 in the State of    
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on 11 / 06 / 2012 in the State of  

5. Covering Period 07 / 01 / 2011 through 09 / 30 / 2011

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 Catherine McHenry Rains  
Signature of Treasurer Catherine McHenry Rains [Electronically Filed] Date 10 / 15 / 2011

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**MCHENRY 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))....	155959.00	471977.56
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	4200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	155959.00	467777.56
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	48057.11	223584.91
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	94.93
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	48057.11	223489.98
8. Cash on Hand at Close of Reporting Period (from Line 27).....	235617.84	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**MCHENRY FOR CONGRESS**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2011 To: M M / D D / Y Y Y Y 09 / 30 / 2011

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	51125.00	221680.26
(ii) Unitemized.....	3334.00	10284.00
(iii) TOTAL of contributions from individuals ▶	54459.00	231964.26
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	101500.00	240013.30
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	155959.00	471977.56
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	94.93
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	155959.00	472072.49

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	48057.11	223584.91
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	59500.00
(b) Of All Other Loans .....	0.00	30500.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	90000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	200.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	4000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	4200.00
21. OTHER DISBURSEMENTS .....	200.00	71205.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	48257.11	388989.91

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	127915.95
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	155959.00
25. SUBTOTAL (add Line 23 and Line 24).....	283874.95
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	48257.11
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	235617.84

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3N  
Transaction ID :

Schedule B includes all required additional memo entries for reimbursements. All other reimbursements do not meet the \$200.00 per vendor threshold; therefore no further itemization is necessary.

Form/Schedule:  
Transaction ID:

**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 73			
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
	12	13a	13b	14	

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)  
**MCHENRY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Herbert Allen**

Mailing Address 711 Fifth Avenue

City State Zip Code  
New York NY 10022

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

Name of Employer Occupation  
Allen & Company Investment Banker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 15 / 2011

**Transaction ID : 10715.C11763**

Amount of Each Receipt this Period  
2000.00

Receipt

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

Mailing Address P.O. Box 877

City State Zip Code  
Linville NC 28646

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

Name of Employer Occupation  
First American Companies, Inc. Developer/Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2011

**Transaction ID : 11014.C11932**

Amount of Each Receipt this Period  
1200.00

Receipt

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

Mailing Address P.O. Box 877

City State Zip Code  
Linville NC 28646

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

Name of Employer Occupation  
First American Companies, Inc. Developer/Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2011

**Transaction ID : 11014.C11931**

Amount of Each Receipt this Period  
1300.00

Receipt

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

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

4500.00

**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 73
	<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)  
**MCHENRY FOR CONGRESS**

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

Mailing Address 5057 Lighthouse Court

City Morganton State NC Zip Code 28655

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

Name of Employer Self Employed Occupation Investing Newsletters

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2011

**Transaction ID : 10715.C11758**

Amount of Each Receipt this Period  
 Receipt 1000.00

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

Mailing Address 600 Polkville Rd

City Shelby State NC Zip Code 28150-2898

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

Name of Employer None Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2011

**Transaction ID : 11014.C11905**

Amount of Each Receipt this Period  
 Receipt 250.00

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

Mailing Address 2167 Southridge Drive

City Belmont State NC Zip Code 28012

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

Name of Employer Self Occupation Builder

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2011

**Transaction ID : 11014.C11910**

Amount of Each Receipt this Period  
 Receipt 1500.00

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

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

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 73
	<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)  
**MCHENRY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Michael Beam**

Mailing Address 805 Vista Dr

City State Zip Code  
Cherryville NC 28021-2619

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

Name of Employer Occupation  
Sunbeam Investments Investor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2011

**Transaction ID : 11014.C11882**

Amount of Each Receipt this Period  
 900.00

Receipt

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

Mailing Address 805 Vista Dr

City State Zip Code  
Cherryville NC 28021-2619

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

Name of Employer Occupation  
Sunbeam Investments Investor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2011

**Transaction ID : 11014.C11881**

Amount of Each Receipt this Period  
 1500.00

Receipt

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

Mailing Address 3119 Broadfield Road

City State Zip Code  
Charlotte NC 28226

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

Name of Employer Occupation  
Bestsweet, Inc. Management

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2011

**Transaction ID : 10715.C11764**

Amount of Each Receipt this Period  
 1000.00

Receipt

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

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

3400.00



**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 73
	<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)  
**MCHENRY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Bonnie Bittle**

Mailing Address 409 Fairway Dr

City Lake Lure State NC Zip Code 28746-9857

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

Name of Employer Bittle Inc. Occupation Secretary

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2011

**Transaction ID : 11014.C11777**

Amount of Each Receipt this Period  
 Receipt 250.00

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

Mailing Address 135 J Morgan St.

City Forest City State NC Zip Code 28043-3252

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

Name of Employer Self Employed Occupation Financial Advisor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2011

**Transaction ID : 10715.C11760**

Amount of Each Receipt this Period  
 Receipt 500.00

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

Mailing Address 1300 S Dekalb St

City Shelby State NC Zip Code 28152-7210

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

Name of Employer Triple D Publishing Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2011

**Transaction ID : 11014.C11909**

Amount of Each Receipt this Period  
 Receipt 2500.00

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

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

3250.00

**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 73
	<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)  
**MCHENRY FOR CONGRESS**

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

Mailing Address PO Box 1929

City State Zip Code  
Lake Oswego OR 97035

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

Name of Employer Occupation  
None Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 25 / 2011

**Transaction ID : 11014.C11779**

Amount of Each Receipt this Period  
2000.00

Receipt

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

Mailing Address 2616 Oak Grove Rd

City State Zip Code  
Shelby NC 28150

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

Name of Employer Occupation  
Self Employed Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 28 / 2011

**Transaction ID : 11014.C11904**

Amount of Each Receipt this Period  
250.00

Receipt

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

Mailing Address 9273 Lerwick Dr

City State Zip Code  
Dublin OH 43017

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

Name of Employer Occupation  
Clark & Associates President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 16 / 2011

**Transaction ID : 11014.C11868**

Amount of Each Receipt this Period  
500.00

Receipt

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

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

2750.00

**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 73
	<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)  
**MCHENRY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Debbie Clary**

Mailing Address 214 S. Lafayette Street, Suite B.

City Shelby	State NC	Zip Code 28150
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FEC ID number of contributing federal political committee. **C**

Name of Employer NC Senate	Occupation Senator
-------------------------------	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
525.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : 11014.C11935**

Amount of Each Receipt this Period  
525.00

In-kind

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

Mailing Address 1312 Montrose Dr

City Shelby	State NC	Zip Code 28150-6047
----------------	-------------	------------------------

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

Name of Employer Shelby Anesthesiology	Occupation Anesthesiologist
---	--------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2011

**Transaction ID : 11014.C11888**

Amount of Each Receipt this Period  
500.00

Receipt

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

Mailing Address PO Box 624

City Lake Lure	State NC	Zip Code 28746
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2011

**Transaction ID : 10715.C11761**

Amount of Each Receipt this Period  
250.00

Receipt

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

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

1275.00

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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 12 OF 73

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NAME OF COMMITTEE (In Full)  
**MCHENRY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Henry Faison**

Mailing Address 121 W Trade St FI 27

City State Zip Code  
 Charlotte NC 28202-5399

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

Name of Employer Occupation  
 Faison and Associates Chairman

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2011

**Transaction ID : 11014.C11780**

Amount of Each Receipt this Period  
 2500.00

Receipt

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

Mailing Address 121 W Trade St FI 27

City State Zip Code  
 Charlotte NC 28202-5399

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

Name of Employer Occupation  
 Faison and Associates Chairman

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2011

**Transaction ID : 11014.C11781**

Amount of Each Receipt this Period  
 2500.00

Receipt

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

Mailing Address 2530 Glenwood Avenue

City State Zip Code  
 Raleigh NC 27608-1002

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

Name of Employer Occupation  
 Keystone Corporation CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : 11014.C11936**

Amount of Each Receipt this Period  
 2000.00

Receipt

**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 13 OF 73
	<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)  
**MCHENRY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Sam Geduldig**

Mailing Address 1519 Pathfinder Lane

City State Zip Code  
Mc Lean VA 22101

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

Name of Employer Occupation  
Clark & Lytle Geduldig Partner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 16 / 2011

**Transaction ID : 11014.C11866**

Amount of Each Receipt this Period  
500.00

Receipt

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

Mailing Address 206 Cross Creek Drive

City State Zip Code  
Cherryville NC 28021

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

Name of Employer Occupation  
Self Doctor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 28 / 2011

**Transaction ID : 11014.C11908**

Amount of Each Receipt this Period  
500.00

Receipt

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

Mailing Address P.O. Box 1060

City State Zip Code  
Shelby NC 28151-1060

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

Name of Employer Occupation  
None Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 16 / 2011

**Transaction ID : 11014.C11870**

Amount of Each Receipt this Period  
250.00

Receipt

**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 73
	<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)  
**MCHENRY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Frank Hannah**

Mailing Address 1622 E Marion St

City State Zip Code  
Shelby NC 28150-4939

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

Name of Employer Occupation  
Morganton Eye Physicians Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2011

**Transaction ID : 11014.C11879**

Amount of Each Receipt this Period  
 Receipt 250.00

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

Mailing Address 921 Sharon Dr

City State Zip Code  
Kings Mountain NC 28086-2735

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

Name of Employer Occupation  
Self Employed Funeral Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : 11014.C11933**

Amount of Each Receipt this Period  
 Receipt 500.00

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

Mailing Address P.O. Box 1675

City State Zip Code  
Gastonia NC 28053

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

Name of Employer Occupation  
Henry Fibers, Inc Textiles

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2011

**Transaction ID : 11014.C11912**

Amount of Each Receipt this Period  
 Receipt 2500.00

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

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

3250.00

**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 73
	<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)  
**MCHENRY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**George Henry**

Mailing Address P.O. Box 1675

City State Zip Code  
Gastonia NC 28053

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

Name of Employer Occupation  
Henry Fibers, Inc Textiles

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2011

**Transaction ID : 11014.C11911**

Amount of Each Receipt this Period  
2500.00

Receipt

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

Mailing Address 4617 21st Street Ct NE

City State Zip Code  
Hickory NC 28601-1785

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

Name of Employer Occupation  
Self Employed Medical Transcriptionist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2011

**Transaction ID : 11014.C11883**

Amount of Each Receipt this Period  
750.00

Receipt

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

Mailing Address 614 Kingsbury Street

City State Zip Code  
Shelby NC 28150

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2011

**Transaction ID : 11014.C11906**

Amount of Each Receipt this Period  
250.00

Receipt

**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 16 OF 73
	<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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. George Lange</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 25 / 2011
Mailing Address 6104 Yeats Manor Drive		<b>Transaction ID : 11014.C11767</b>
City Tampa	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Regions Morgan Keegan Trust	Occupation Executive	Receipt
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>B. D Leon Leonhardt</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 23 / 2011
Mailing Address PO Box 580		<b>Transaction ID : 11014.C11889</b>
City Fallston	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self	Occupation Farmer / Investor	Receipt
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Robert Luddy</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2011
Mailing Address 7308 Spyglass Way		<b>Transaction ID : 11014.C11937</b>
City Raleigh	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Captiveaire, Inc.	Occupation Owner	Receipt
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3500.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 73
	<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)  
**MCHENRY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Gary Lytle**

Mailing Address 4870-D N. Old Dominion Drive

City Arlington	State VA	Zip Code 22207
-------------------	-------------	-------------------

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

Name of Employer Clark Lytle & Geduldig	Occupation Partner
--	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 16 / 2011

**Transaction ID : 11014.C11867**

Amount of Each Receipt this Period  
500.00

Receipt

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

Mailing Address 243 Trail Ridge

City Rutherfordton	State NC	Zip Code 28139
-----------------------	-------------	-------------------

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

Name of Employer None	Occupation Homemaker
--------------------------	-------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2011

**Transaction ID : 11014.C11778**

Amount of Each Receipt this Period  
500.00

Receipt

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

Mailing Address 124 Sheepnose Dr

City Lake Lure	State NC	Zip Code 28746-8767
-------------------	-------------	------------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2011

**Transaction ID : 10715.C11756**

Amount of Each Receipt this Period  
2000.00

Receipt

**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 18 OF 73
	<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)  
**MCHENRY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas Meaders**

Mailing Address 105 Northshore Ct

City State Zip Code  
Cherryville NC 28021

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

Name of Employer Occupation  
Gardner Webb Educator

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2011

**Transaction ID : 11014.C11880**

Amount of Each Receipt this Period  
 Receipt 250.00

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

Mailing Address 2316 Peninsula Ave.

City State Zip Code  
Shelby NC 28151-2168

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

Name of Employer Occupation  
Self Employed Mfg Representative

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2011

**Transaction ID : 11014.C11886**

Amount of Each Receipt this Period  
 Receipt 200.00

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

Mailing Address PO Box 1691

City State Zip Code  
Kings Mountain NC 28086-1691

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

Name of Employer Occupation  
Patrick Yarn Mills Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2011

**Transaction ID : 11014.C11890**

Amount of Each Receipt this Period  
 Receipt 2500.00

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

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

2950.00

**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 73
	<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)  
**MCHENRY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Martha Plaster**

Mailing Address 218 Vauxhall Dr

City: Shelby State: NC Zip Code: 28150-4239

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

Name of Employer: None Occupation: Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 100.00

Date of Receipt: 09 / 16 / 2011

**Transaction ID : 11014.C11878**

Amount of Each Receipt this Period: 100.00

Receipt

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

Mailing Address 218 Vauxhall Dr

City: Shelby State: NC Zip Code: 28150-4239

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

Name of Employer: None Occupation: Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 09 / 28 / 2011

**Transaction ID : 11014.C11903**

Amount of Each Receipt this Period: 150.00

Receipt

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

Mailing Address 209 Deer Chase Rd

City: Shelby State: NC Zip Code: 28150-9362

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

Name of Employer: Self Employed Occupation: Radiologist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 09 / 28 / 2011

**Transaction ID : 11014.C11907**

Amount of Each Receipt this Period: 500.00

Receipt

**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 20 OF 73
	<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)  
**MCHENRY FOR CONGRESS**

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

Mailing Address 3916 Bentwood Court

City State Zip Code  
Fairfax VA 22031-3252

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

Name of Employer Occupation  
Roberts, Raheb & Gradler LLC Principal

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2011

**Transaction ID : 11014.C11917**

Amount of Each Receipt this Period  
 1000.00

Receipt

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

Mailing Address 3662 Artee Rd

City State Zip Code  
Shelby NC 28150-7760

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

Name of Employer Occupation  
None Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2011

**Transaction ID : 11014.C11887**

Amount of Each Receipt this Period  
 250.00

Receipt

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

Mailing Address 300 W. Main Street

City State Zip Code  
Cherryville NC 28021

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

Name of Employer Occupation  
Self Employed Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : 11014.C11934**

Amount of Each Receipt this Period  
 500.00

Receipt

**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 21 OF 73
	<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)  
**MCHENRY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas Tanguay**

Mailing Address 509 Sandy Run Church Road

City: Mooresboro State: NC Zip Code: 28114

FEC ID number of contributing federal political committee: C

Name of Employer: Retired Occupation: Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 100.00

Date of Receipt: 07 / 15 / 2011

**Transaction ID : 10715.C11762**

Amount of Each Receipt this Period: 100.00

Receipt

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

Mailing Address 509 Sandy Run Church Road

City: Mooresboro State: NC Zip Code: 28114

FEC ID number of contributing federal political committee: C

Name of Employer: Retired Occupation: Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 200.00

Date of Receipt: 09 / 16 / 2011

**Transaction ID : 11014.C11877**

Amount of Each Receipt this Period: 100.00

Receipt

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

Mailing Address 154 Park Ledge Drive

City: Buffalo State: NY Zip Code: 14226

FEC ID number of contributing federal political committee: C

Name of Employer: Nixon Peabody LLP Occupation: Strategic Policy

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 07 / 25 / 2011

**Transaction ID : 11014.C11768**

Amount of Each Receipt this Period: 500.00

Receipt

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 73
	<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)  
**MCHENRY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Philip Vineyard**

Mailing Address 45A East Bay Street

City Charleston State SC Zip Code 29401

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

Name of Employer PPV, Inc. Occupation CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2011

**Transaction ID : 11014.C11892**

Amount of Each Receipt this Period  
 Receipt 2500.00

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

Mailing Address 45A East Bay Street

City Charleston State SC Zip Code 29401

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

Name of Employer PPV, Inc. Occupation CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2011

**Transaction ID : 11014.C11891**

Amount of Each Receipt this Period  
 Receipt 2500.00

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

Mailing Address 4278 Burnwood Trail

City Denver State NC Zip Code 28037

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

Name of Employer Self Occupation Self

Receipt For: 2012  
 Primary  General  
 Other (specify) P-2010

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2011

**Transaction ID : 11014.C11841**

Amount of Each Receipt this Period  
 Receipt 250.00

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

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

5250.00

**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 73
	<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)  
**MCHENRY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Donald Williams**

Mailing Address 271 McCall Drive

City State Zip Code  
Forest City NC 28043

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 25 / 2011

**Transaction ID : 11014.C11776**

Amount of Each Receipt this Period  
200.00

Receipt

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

Mailing Address 19010 Mary Ardrey Circle

City State Zip Code  
Cornelius NC 28031

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

Name of Employer Occupation  
Bestsweet, Inc. CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 30 / 2011

**Transaction ID : 11014.C11837**

Amount of Each Receipt this Period  
100.00

Receipt

**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).....

300.00

51125.00

**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 73
	<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	

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)  
**MCHENRY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**AFLAC Inc. Political Action Committee**

Mailing Address 1932 Wynnton Rd

City Columbus State GA Zip Code 31999-0001

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

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2011

**Transaction ID : 11014.C11923**

Amount of Each Receipt this Period  
 Receipt 1000.00

Amount of Each Receipt this Period  
 Receipt 3000.00

**B.** Full Name (Last, First, Middle Initial)  
**American Institute of CPAs PAC**

Mailing Address Palladian Corporate Center  
220 Leigh Farm Road

City Durham State NC Zip Code 27707-8110

FEC ID number of contributing federal political committee. **C** C00077321

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : 11014.C11928**

Amount of Each Receipt this Period  
 Receipt 2000.00

Amount of Each Receipt this Period  
 Receipt 3500.00

**C.** Full Name (Last, First, Middle Initial)  
**Assurant Inc. Political Action Committee**

Mailing Address 501 W. Michigan St.  
Po Box 3050

City Milwaukee State WI Zip Code 53203

FEC ID number of contributing federal political committee. **C** C00185694

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2011

**Transaction ID : 11014.C11924**

Amount of Each Receipt this Period  
 Receipt 1000.00

Amount of Each Receipt this Period  
 Receipt 1000.00

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

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

4000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 73
	<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)  
**MCHENRY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Bank of America Corp. Federal PAC**

Mailing Address 1909 K. Street NW Ste. 710

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C00364778**

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 15 / 2011

**Transaction ID : 11014.C11797**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2500.00

Receipt

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

Mailing Address 1200 Wilson Blvd.

City Arlington State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C C00142711**

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 05 / 2011

**Transaction ID : 11014.C11794**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Receipt

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

Mailing Address 1101 Pennsylvania Ave NW Ste 1000

City Washington State DC Zip Code 20004-2524

FEC ID number of contributing federal political committee. **C C00008474**

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : 11014.C11939**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Receipt

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

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

\_\_\_\_\_ 4500.00

\_\_\_\_\_

**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 73
	<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)  
**MCHENRY FOR CONGRESS**

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

Mailing Address 1701 JFK Boulevard

City Philadelphia State PA Zip Code 19103-2838

FEC ID number of contributing federal political committee. **C C00248716**

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 15 / 2011

**Transaction ID : 11014.C11798**

Amount of Each Receipt this Period  
 Receipt 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**CSX Corporation Good Government Fund**

Mailing Address 1331 Pennsylvania Ave NW Ste 560

City Washington State DC Zip Code 20004-1745

FEC ID number of contributing federal political committee. **C C00163832**

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2011

**Transaction ID : 11014.C11920**

Amount of Each Receipt this Period  
 Receipt 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Deloitte & Touche Federal PAC**

Mailing Address PO Box 365

City Washington State DC Zip Code 20044-0365

FEC ID number of contributing federal political committee. **C C00211318**

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 05 / 2011

**Transaction ID : 11014.C11791**

Amount of Each Receipt this Period  
 Receipt 2000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 73
	<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)  
**MCHENRY FOR CONGRESS**

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

Mailing Address 1200 19th St NW

City Washington State DC Zip Code 20036-2402

FEC ID number of contributing federal political committee. **C C00151340**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2011

**Transaction ID : 11014.C11782**

Amount of Each Receipt this Period  
 Receipt 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Every Republican is Crucial PAC**

Mailing Address 209 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1107

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 05 / 2011

**Transaction ID : 11014.C11788**

Amount of Each Receipt this Period  
 Receipt 5000.00

**C.** Full Name (Last, First, Middle Initial)  
**FMR Corp. Political Action Committee**

Mailing Address 82 Devonshire St

City Boston State MA Zip Code 02109-3605

FEC ID number of contributing federal political committee. **C C00380550**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 05 / 2011

**Transaction ID : 11014.C11793**

Amount of Each Receipt this Period  
 Receipt 2000.00

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

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

8000.00

**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 73
	<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)  
**MCHENRY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**General Electric Company PAC**

Mailing Address 1299 Pennsylvania Ave NW Ste 1100

City Washington State DC Zip Code 20004-2414

FEC ID number of contributing federal political committee. **C C00024869**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 16 / 2011

**Transaction ID : 11014.C11864**

Amount of Each Receipt this Period  
 Receipt 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Genworth Financial Inc. PAC**

Mailing Address 6620 W Broad St

City Richmond State VA Zip Code 23230-1716

FEC ID number of contributing federal political committee. **C C00404194**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : 11014.C11930**

Amount of Each Receipt this Period  
 Receipt 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Goldman Sachs Political Action Committee**

Mailing Address 101 Constitution Ave., NW Suite 10

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00350744**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 05 / 2011

**Transaction ID : 11014.C11792**

Amount of Each Receipt this Period  
 Receipt 2000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 73
	<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)  
**MCHENRY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Goldman Sachs Political Action Committee**

Mailing Address 101 Constitution Ave., NW Suite 10

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00350744**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2011

**Transaction ID : 11014.C11850**

Amount of Each Receipt this Period  
1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Goldman Sachs Political Action Committee**

Mailing Address 101 Constitution Ave., NW Suite 10

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00350744**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2011

**Transaction ID : 11014.C11851**

Amount of Each Receipt this Period  
1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
**Independent Insurance Agents Of America**

Mailing Address 412 1st St SE Ste 300

City Washington State DC Zip Code 20003-1804

FEC ID number of contributing federal political committee. **C C00022343**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : 11014.C11929**

Amount of Each Receipt this Period  
5000.00

Receipt

**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 30 OF 73
	<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)  
**MCHENRY FOR CONGRESS**

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

Mailing Address 1101 Pennsylvania Avenue, NW  
Suite 200

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00034405**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2011

**Transaction ID : 11014.C11769**

Amount of Each Receipt this Period  
1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Koch Industries Inc. PAC**

Mailing Address 655 15th Street Nw Suite 445

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 16 / 2011

**Transaction ID : 11014.C11860**

Amount of Each Receipt this Period  
5000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
**KPMG Partners/Principals & Employees**

Mailing Address PO Box 18254

City Washington State DC Zip Code 20036-8254

FEC ID number of contributing federal political committee. **C C00280222**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 15 / 2011

**Transaction ID : 11014.C11796**

Amount of Each Receipt this Period  
3500.00

Receipt

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

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

9500.00

**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 73
	<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)  
**MCHENRY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**KPMG Partners/Principals & Employees**

Mailing Address PO Box 18254

City Washington State DC Zip Code 20036-8254

FEC ID number of contributing federal political committee. **C** C00280222

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2011

**Transaction ID : 11014.C11898**

Amount of Each Receipt this Period  
1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Majority Committee PAC MCPAC**

Mailing Address P.O. Box 10134

City Bakersfield State CA Zip Code 93389-0134

FEC ID number of contributing federal political committee. **C** C00428052

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 05 / 2011

**Transaction ID : 11014.C11789**

Amount of Each Receipt this Period  
5000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
**Metlife, Inc Employees PAC**

Mailing Address One MetLife Plaza  
27-01 Queens Plaza North, Area 4D

City Long Island City State NY Zip Code 11101

FEC ID number of contributing federal political committee. **C** C00040923

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2011

**Transaction ID : 11014.C11919**

Amount of Each Receipt this Period  
1000.00

Receipt

**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 32 OF 73
	<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)  
**MCHENRY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Morgan Stanley Political Action Committee**

Mailing Address 1585 Broadway 39th Floor

City State Zip Code  
New York NY 10036

FEC ID number of contributing federal political committee. **C** C00337626

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 05 / 2011

**Transaction ID : 11014.C11786**

Amount of Each Receipt this Period  
1500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Mortgage Bankers Association Of America**

Mailing Address 1919 Pennsylvania Avenue Nw

City State Zip Code  
Washington DC 20006

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2011

**Transaction ID : 11014.C11922**

Amount of Each Receipt this Period  
2500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
**Mutual of Omaha Companies PAC**

Mailing Address Mutual Of Omaha Plaza

City State Zip Code  
Omaha NE 68175-0002

FEC ID number of contributing federal political committee. **C** C00094581

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2011

**Transaction ID : 11014.C11849**

Amount of Each Receipt this Period  
1000.00

Receipt

**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 33 OF 73
	<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)  
**MCHENRY FOR CONGRESS**

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

Mailing Address 2901 Telestar Ct

City Falls Church State VA Zip Code 22042-1260

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2011

**Transaction ID : 11014.C11926**

Amount of Each Receipt this Period  
2500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**National Assn of Federal Credit Unions**

Mailing Address 3138 10th St N

City Arlington State VA Zip Code 22201-2108

FEC ID number of contributing federal political committee. **C** C00040659

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2011

**Transaction ID : 11014.C11896**

Amount of Each Receipt this Period  
2500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
**National Beer Wholesalers Assn. PAC**

Mailing Address 1101 King St Ste 600

City Alexandria State VA Zip Code 22314-2965

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 15 / 2011

**Transaction ID : 11014.C11795**

Amount of Each Receipt this Period  
2500.00

Receipt

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

**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 34 OF 73
	<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)  
**MCHENRY FOR CONGRESS**

**A. National Council of Textile Organization**

Full Name (Last, First, Middle Initial)  
National Council of Textile Organization

Mailing Address PO Box 99

City State Zip Code  
Gastonia NC 28053-0099

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 16 / 2011

**Transaction ID : 11014.C11865**

Amount of Each Receipt this Period  
 1000.00

Receipt

**B. National Restaurant Association PAC**

Full Name (Last, First, Middle Initial)  
National Restaurant Association PAC

Mailing Address 1200 17th St NW

City State Zip Code  
Washington DC 20036-3004

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2011

**Transaction ID : 11014.C11895**

Amount of Each Receipt this Period  
 2500.00

Receipt

**C. NILA PAC**

Full Name (Last, First, Middle Initial)  
NILA PAC

Mailing Address P.O Box 65615

City State Zip Code  
Washington DC 20035

FEC ID number of contributing federal political committee. **C** C00465211

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 05 / 2011

**Transaction ID : 11014.C11784**

Amount of Each Receipt this Period  
 2500.00

Receipt

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

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

6000.00

**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 35 OF 73
	<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)  
**MCHENRY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NRA Political Victory Fund**

Mailing Address 11250 Waples Mill Rd

City State Zip Code  
Fairfax VA 22030-7400

FEC ID number of contributing federal political committee. **C** C00053553

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2011

**Transaction ID : 11014.C11897**

Amount of Each Receipt this Period  
 Receipt 1000.00

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

Mailing Address 2600 S River Rd

City State Zip Code  
Des Plaines IL 60018-3203

FEC ID number of contributing federal political committee. **C** C00066472

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : 11014.C11938**

Amount of Each Receipt this Period  
 Receipt 1000.00

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

Mailing Address 751 Broad St

City State Zip Code  
Clifton NJ 07012-3777

FEC ID number of contributing federal political committee. **C** C00127779

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 16 / 2011

**Transaction ID : 11014.C11863**

Amount of Each Receipt this Period  
 Receipt 2000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 73
	<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)  
**MCHENRY FOR CONGRESS**

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

Mailing Address 505 9th St. N.W.  
Suite 910

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00343459**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
-500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2011

**Transaction ID : 11014.C11918**

Amount of Each Receipt this Period  
2500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Real Estate Investment Trusts PAC**

Mailing Address 1875 I St NW Ste 600

City Washington State DC Zip Code 20006-5413

FEC ID number of contributing federal political committee. **C C00303339**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2011

**Transaction ID : 11014.C11771**

Amount of Each Receipt this Period  
1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
**Real Estate Investment Trusts PAC**

Mailing Address 1875 I St NW Ste 600

City Washington State DC Zip Code 20006-5413

FEC ID number of contributing federal political committee. **C C00303339**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 05 / 2011

**Transaction ID : 11014.C11787**

Amount of Each Receipt this Period  
2500.00

Receipt

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

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

6000.00

**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 73
	<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)  
**MCHENRY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Sallie Mae Inc Political Action Committee**

Mailing Address 701 Pennsylvania Avenue, NW, Suite

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00331835**

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2011

**Transaction ID : 11014.C11921**

Amount of Each Receipt this Period  
 Receipt 2500.00

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

Mailing Address Five Moore Drive  
Research Triangle

City Durham State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C C00199703**

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 16 / 2011

**Transaction ID : 11014.C11861**

Amount of Each Receipt this Period  
 Receipt 5000.00

**C.** Full Name (Last, First, Middle Initial)  
**The Travelers Companies, Inc. PAC**

Mailing Address One Tower Square

City Hartford State CT Zip Code 06183-0001

FEC ID number of contributing federal political committee. **C C00376376**

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2011

**Transaction ID : 11014.C11899**

Amount of Each Receipt this Period  
 Receipt 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 38 OF 73
	<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)  
**MCHENRY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**The Williams Companies, Inc. PAC**

Mailing Address 1627 I Street, NW Suite 900

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C00040394**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2011

**Transaction ID : 11014.C11925**

Amount of Each Receipt this Period  
 Receipt 1000.00

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

Mailing Address 555 W Adams St Fl 7  
7th Floor

City Chicago State IL Zip Code 60661-3719

FEC ID number of contributing federal political committee. **C C00313700**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2011

**Transaction ID : 11014.C11770**

Amount of Each Receipt this Period  
 Receipt 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Truliant Federal Credit Union PAC**

Mailing Address 2098 Frontis Plaza Blvd

City Winston Salem State NC Zip Code 27103-5613

FEC ID number of contributing federal political committee. **C C00326132**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2011

**Transaction ID : 11014.C11893**

Amount of Each Receipt this Period  
 Receipt 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 39 OF 73
	<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)  
**MCHENRY FOR CONGRESS**

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

Mailing Address 316 Pennsylvania Avenue, SE

City Washington State DC Zip Code 20003-1185

FEC ID number of contributing federal political committee. **C C00064766**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 16 / 2011

**Transaction ID : 11014.C11862**

Amount of Each Receipt this Period  
2500.00

Receipt

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

Mailing Address 1300 I Street, NW, Suite 400 West

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00186288**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : 11014.C11927**

Amount of Each Receipt this Period  
1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
**Wal-Mart Stores Inc. PAC for Responsible**

Mailing Address 702 SW 8th St

City Bentonville State AR Zip Code 72716-6209

FEC ID number of contributing federal political committee. **C C00093054**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2011

**Transaction ID : 11014.C11852**

Amount of Each Receipt this Period  
2500.00

Receipt

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

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

6000.00

**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 40 OF 73
	<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)  
**MCHENRY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Wells Fargo Employee PAC**

Mailing Address Wells Fargo Center MAC N9305 084  
Sixth & Marquette

City Minneapolis State MN Zip Code 55479

FEC ID number of contributing federal political committee. **C** C00034595

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 05 / 2011

**Transaction ID : 11014.C11785**

Amount of Each Receipt this Period  
 Receipt 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Wine And Spirits Wholesalers Of America**

Mailing Address 805 Fifteenth St Nw Suite 430

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 05 / 2011

**Transaction ID : 11014.C11790**

Amount of Each Receipt this Period  
 Receipt 1000.00

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

Mailing Address 701 Pennsylvania Ave NW  
Ste 500

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00279455

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2011

**Transaction ID : 10715.C11765**

Amount of Each Receipt this Period  
 Receipt 4000.00

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

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

7500.00

101500.00



**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 41 OF 73	
	<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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Advantage, Inc</b>		Date of Disbursement MM / DD / YYYY 07 / 11 / 2011
Mailing Address 1611 N. Kent Street Suite 905		Amount of Each Disbursement this Period 82.15
City Arlington	State VA	
Zip Code 22209-	Purpose of Disbursement Automated Call Service	<b>Transaction ID : 11014.E4260</b>
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)	<b>AUTOMATED CALL SERVICE</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Advantage, Inc</b>		Date of Disbursement MM / DD / YYYY 09 / 01 / 2011
Mailing Address 1611 N. Kent Street Suite 905		Amount of Each Disbursement this Period 50.00
City Arlington	State VA	
Zip Code 22209-	Purpose of Disbursement Automated Call Service	<b>Transaction ID : 11014.E4261</b>
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)	<b>AUTOMATED CALL SERVICE</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Aristotle International, Inc</b>		Date of Disbursement MM / DD / YYYY 07 / 11 / 2011
Mailing Address 205 Pennsylvania Ave Se		Amount of Each Disbursement this Period 2250.00
City Washington	State DC	
Zip Code 20003-	Purpose of Disbursement Computer Support Fee	<b>Transaction ID : 11014.E4262</b>
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)	<b>COMPUTER SUPPORT FEE</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2382.15
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 73			
	<input checked="" type="checkbox"/> 17 <input 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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Catawba Co. Chamber of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2011
Mailing Address PO Box 1828		Amount of Each Disbursement this Period 341.00
City Hickory	State NC	
Zip Code 28603-1828	Purpose of Disbursement Membership Dues	Transaction ID : 11014.E4273
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)	MEMBERSHIP DUES
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Catawba Print &amp; Mail, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2011
Mailing Address PO Box 9001		Amount of Each Disbursement this Period 743.58
City Hickory	State NC	
Zip Code 28603-9001	Purpose of Disbursement Printing	Transaction ID : 11014.E4275
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)	PRINTING
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Century Link</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2011
Mailing Address PO Box 96064		Amount of Each Disbursement this Period 400.93
City Charlotte	State NC	
Zip Code 28296-0064	Purpose of Disbursement Telephone Expense	Transaction ID : 11014.E4279
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)	TELEPHONE EXPENSE
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1485.51
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 73			
	<input checked="" type="checkbox"/> 17 <input 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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Century Link</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2011
Mailing Address PO Box 96064		Amount of Each Disbursement this Period 397.36
City Charlotte	State NC	
Zip Code 28296-0064	Purpose of Disbursement Telephone Expense	<b>Transaction ID : 11014.E4280</b>
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)	TELEPHONE EXPENSE
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Century Link</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2011
Mailing Address PO Box 96064		Amount of Each Disbursement this Period 397.44
City Charlotte	State NC	
Zip Code 28296-0064	Purpose of Disbursement Telephone Expense	<b>Transaction ID : 11014.E4281</b>
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)	TELEPHONE EXPENSE
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Century Link</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2011
Mailing Address PO Box 96064		Amount of Each Disbursement this Period 39.82
City Charlotte	State NC	
Zip Code 28296-0064	Purpose of Disbursement Teleconference Expense	<b>Transaction ID : 11014.E4282</b>
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)	TELECONFERENCE EXPENSE
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	834.62
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 73	
	<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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Platinum Business Credit Card</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2011
Mailing Address Po Box 15650		Amount of Each Disbursement this Period 1586.21
City Wilmington	State DE	
Zip Code 19886-	Purpose of Disbursement Credit Card: See Below	<b>Transaction ID : 11014.E4283</b>
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)	<b>CREDIT CARD: SEE BELOW</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. 03 Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2011
Mailing Address PO Box 25363		Amount of Each Disbursement this Period 50.00
City Raleigh	State NC	
Zip Code 27611-	Purpose of Disbursement Webhosting	<b>Transaction ID : 11014.E4342</b>
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)	<b>[MEMO ITEM]</b> MEMO: WEBHOSTING
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Fed Ex</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2011
Mailing Address 1555 Rankin Lake Rd		Amount of Each Disbursement this Period 70.40
City Gastonia	State NC	
Zip Code 28052-	Purpose of Disbursement Overnight Delivery Fee	<b>Transaction ID : 11014.E4345</b>
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)	<b>[MEMO ITEM]</b> MEMO: OVERNIGHT DELIVERY FEE
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1586.21
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 73	
	<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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. House Gift Shop</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2011
Mailing Address B-218 Longworth House Office Bldg		Amount of Each Disbursement this Period 000,000.00 105.60
City Washington State DC Zip Code 20515-	Purpose of Disbursement Appreciation Souvenirs	
Candidate Name		Transaction ID : 11014.E4348
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:	Category/Type	[MEMO ITEM] MEMO: APPRECIATION SOUVENIRS

Full Name (Last, First, Middle Initial) <b>B. IContact</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2011
Mailing Address 2635 Meridian Pkwy		Amount of Each Disbursement this Period 000,000.00 74.00
City Durham State NC Zip Code 27713-	Purpose of Disbursement Email Marketing Service	
Candidate Name		Transaction ID : 11014.E4349
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:	Category/Type	[MEMO ITEM] MEMO: EMAIL MARKETING SERVICE

Full Name (Last, First, Middle Initial) <b>c. US Airways, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2011
Mailing Address 111 West Rio Salado Pkwy		Amount of Each Disbursement this Period 000,000.00 288.90
City Tempe State AZ Zip Code 85281-	Purpose of Disbursement Travel Expense	
Candidate Name		Transaction ID : 11014.E4352
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:	Category/Type	[MEMO ITEM] MEMO: TRAVEL EXPENSE

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 73			
	<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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. US Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2011
Mailing Address 231 Government Ave SW		Amount of Each Disbursement this Period 308.58
City Hickory	State NC	
Zip Code 28602-2955	Purpose of Disbursement Postage	Transaction ID : 11014.E4353
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)	[MEMO ITEM] MEMO: POSTAGE
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2011
Mailing Address Po Box 105378		Amount of Each Disbursement this Period 144.50
City Atlanta	State GA	
Zip Code 30348-	Purpose of Disbursement Mobile Phone Expense	Transaction ID : 11014.E4354
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)	[MEMO ITEM] MEMO: MOBILE PHONE EXPENSE
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Youssef</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2011
Mailing Address 242 11th Ave NE		Amount of Each Disbursement this Period 273.88
City Hickory	State NC	
Zip Code 28601-	Purpose of Disbursement Food & Beverage Expense	Transaction ID : 11014.E4357
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)	[MEMO ITEM] MEMO: FOOD & BEVERAGE EXPENSE
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 73			
	<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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Platinum Business Credit Card</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2011
Mailing Address Po Box 15650		Amount of Each Disbursement this Period 1544.78
City Wilmington	State DE	
Zip Code 19886-	Purpose of Disbursement Credit Card: See Below	<b>Transaction ID : 11014.E4284</b>
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)	CREDIT CARD: SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) <b>B. 03 Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2011
Mailing Address PO Box 25363		Amount of Each Disbursement this Period 50.00
City Raleigh	State NC	
Zip Code 27611-	Purpose of Disbursement Webhosting	<b>Transaction ID : 11014.E4343</b>
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)	<b>[MEMO ITEM]</b> MEMO: WEBHOSTING
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Fed Ex</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2011
Mailing Address 1555 Rankin Lake Rd		Amount of Each Disbursement this Period 15.18
City Gastonia	State NC	
Zip Code 28052-	Purpose of Disbursement Overnight Delivery Fee	<b>Transaction ID : 11014.E4346</b>
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)	<b>[MEMO ITEM]</b> MEMO: OVERNIGHT DELIVERY FEE
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1544.78
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 73			
	<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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. IContact</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2011
Mailing Address 2635 Meridian Pkwy		Amount of Each Disbursement this Period 74.00
City Durham	State NC	
Zip Code 27713-		Transaction ID : 11014.E4350
Purpose of Disbursement Email Marketing Service	Category/Type	
Candidate Name		[MEMO ITEM] MEMO: EMAIL MARKETING SERVICE
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>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2011
Mailing Address Po Box 105378		Amount of Each Disbursement this Period 130.67
City Atlanta	State GA	
Zip Code 30348-		Transaction ID : 11014.E4355
Purpose of Disbursement Mobile Phone Expense	Category/Type	
Candidate Name		[MEMO ITEM] MEMO: MOBILE PHONE EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2011
Mailing Address 300 First St Se		Amount of Each Disbursement this Period 14.61
City Washington	State DC	
Zip Code 20003-		Transaction ID : 11014.E4358
Purpose of Disbursement Food & Beverage Expense	Category/Type	
Candidate Name		[MEMO ITEM] MEMO: FOOD & BEVERAGE EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 73			
	<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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Forbes Printing Co</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2011
Mailing Address 1035 Harper Ave SE		Amount of Each Disbursement this Period 600.00
City Lenoir	State NC	
Zip Code 28645-		Transaction ID : 11014.E4360
Purpose of Disbursement Printing	Category/Type	
Candidate Name		[MEMO ITEM] MEMO: PRINTING
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>B. Office Max</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2011
Mailing Address 1718 Hwy 70 SE		Amount of Each Disbursement this Period 482.92
City Hickory	State NC	
Zip Code 28602-		Transaction ID : 11014.E4361
Purpose of Disbursement Office Supplies	Category/Type	
Candidate Name		[MEMO ITEM] MEMO: OFFICE SUPPLIES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Platinum Business Credit Card</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2011
Mailing Address Po Box 15650		Amount of Each Disbursement this Period 1125.31
City Wilmington	State DE	
Zip Code 19886-		Transaction ID : 11014.E4285
Purpose of Disbursement Credit Card: See Below	Category/Type	
Candidate Name		CREDIT CARD: SEE BELOW
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1125.31
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 73
	<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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. 03 Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2011
Mailing Address PO Box 25363		Amount of Each Disbursement this Period 50.00
City Raleigh	State NC	
Zip Code 27611-	Purpose of Disbursement Webhosting	Transaction ID : 11014.E4344
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)	[MEMO ITEM] MEMO: WEBHOSTING
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Fed Ex</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2011
Mailing Address 1555 Rankin Lake Rd		Amount of Each Disbursement this Period 20.99
City Gastonia	State NC	
Zip Code 28052-	Purpose of Disbursement Overnight Delivery Fee	Transaction ID : 11014.E4347
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)	[MEMO ITEM] MEMO: OVERNIGHT DELIVERY FEE
State: District:		

Full Name (Last, First, Middle Initial) <b>c. IContact</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2011
Mailing Address 2635 Meridian Pkwy		Amount of Each Disbursement this Period 74.00
City Durham	State NC	
Zip Code 27713-	Purpose of Disbursement Email Marketing Service	Transaction ID : 11014.E4351
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)	[MEMO ITEM] MEMO: EMAIL MARKETING SERVICE
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 73			
	<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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2011
Mailing Address Po Box 105378		Amount of Each Disbursement this Period 130.03
City Atlanta	State GA	
Zip Code 30348-		Transaction ID : 11014.E4356
Purpose of Disbursement Mobile Phone Expense	Category/Type	
Candidate Name		[MEMO ITEM] MEMO: MOBILE PHONE EXPENSE
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>B. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2011
Mailing Address 300 First St Se		Amount of Each Disbursement this Period 145.73
City Washington	State DC	
Zip Code 20003-		Transaction ID : 11014.E4359
Purpose of Disbursement Food & Beverage Expense	Category/Type	
Candidate Name		[MEMO ITEM] MEMO: FOOD & BEVERAGE EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Office Max</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2011
Mailing Address 1718 Hwy 70 SE		Amount of Each Disbursement this Period 71.85
City Hickory	State NC	
Zip Code 28602-		Transaction ID : 11014.E4362
Purpose of Disbursement Office Supplies	Category/Type	
Candidate Name		[MEMO ITEM] MEMO: OFFICE SUPPLIES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 73			
	<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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Renaissance Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2011
Mailing Address 31 Woodfin St		Amount of Each Disbursement this Period 374.34
City Asheville	State NC	
Zip Code 28801-		Transaction ID : 11014.E4364
Purpose of Disbursement Travel Expense	Category/Type	
Candidate Name		[MEMO ITEM] MEMO: TRAVEL EXPENSE
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>B. Erica Church</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2011
Mailing Address 3752 Westwood Rd		Amount of Each Disbursement this Period 1795.30
City Hamptonville	State NC	
Zip Code 27020-		Transaction ID : 11014.E4299
Purpose of Disbursement Salary	Category/Type	
Candidate Name		SALARY
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Erica Church</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2011
Mailing Address 3752 Westwood Rd		Amount of Each Disbursement this Period 62.31
City Hamptonville	State NC	
Zip Code 27020-		Transaction ID : 11014.E4303
Purpose of Disbursement Travel Expense	Category/Type	
Candidate Name		TRAVEL EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1857.61
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 73			
	<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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Erica Church</b>		Date of Disbursement MM / DD / YYYY 07 / 11 / 2011
Mailing Address 3752 Westwood Rd		Amount of Each Disbursement this Period 50.00
City Hamptonville	State NC	
Zip Code 27020-	Purpose of Disbursement Mobile Phone Allowance	<b>Transaction ID : 11014.E4296</b>
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)	<b>MOBILE PHONE ALLOWANCE</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Erica Church</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2011
Mailing Address 3752 Westwood Rd		Amount of Each Disbursement this Period 50.00
City Hamptonville	State NC	
Zip Code 27020-	Purpose of Disbursement Mobile Phone Allowance	<b>Transaction ID : 11014.E4297</b>
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)	<b>MOBILE PHONE ALLOWANCE</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Erica Church</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2011
Mailing Address 3752 Westwood Rd		Amount of Each Disbursement this Period 99.44
City Hamptonville	State NC	
Zip Code 27020-	Purpose of Disbursement Travel Expense	<b>Transaction ID : 11014.E4304</b>
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)	<b>TRAVEL EXPENSE</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	199.44
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 73			
	<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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Erica Church</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2011
Mailing Address 3752 Westwood Rd			Amount of Each Disbursement this Period 1795.30
City Hamptonville	State NC	Zip Code 27020-	
Purpose of Disbursement Salary		Category/ Type	<b>Transaction ID : 11014.E4300</b>
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)		SALARY
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Erica Church</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2011
Mailing Address 3752 Westwood Rd			Amount of Each Disbursement this Period 1089.64
City Hamptonville	State NC	Zip Code 27020-	
Purpose of Disbursement Salary		Category/ Type	<b>Transaction ID : 11014.E4301</b>
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)		SALARY
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Erica Church</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2011
Mailing Address 3752 Westwood Rd			Amount of Each Disbursement this Period 50.00
City Hamptonville	State NC	Zip Code 27020-	
Purpose of Disbursement Mobile Phone Allowance		Category/ Type	<b>Transaction ID : 11014.E4298</b>
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)		MOBILE PHONE ALLOWANCE
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2934.94
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 73	
	<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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Erica Church</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2011	
Mailing Address 3752 Westwood Rd			Amount of Each Disbursement this Period 1795.30	
City Hamptonville	State NC	Zip Code 27020-	Transaction ID : 11014.E4302	
Purpose of Disbursement Salary		Category/ Type	SALARY	
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>B. Erica Church</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2011	
Mailing Address 3752 Westwood Rd			Amount of Each Disbursement this Period 50.00	
City Hamptonville	State NC	Zip Code 27020-	Transaction ID : 11014.E4307	
Purpose of Disbursement Mobile Phone Allowance		Category/ Type	MOBILE PHONE ALLOWANCE	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Erica Church</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2011	
Mailing Address 3752 Westwood Rd			Amount of Each Disbursement this Period 39.60	
City Hamptonville	State NC	Zip Code 27020-	Transaction ID : 11014.E4306	
Purpose of Disbursement Travel Expense		Category/ Type	TRAVEL EXPENSE	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1884.90
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 73			
	<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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Erica Church</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2011	
Mailing Address 3752 Westwood Rd			Amount of Each Disbursement this Period 67.76	
City Hamptonville	State NC	Zip Code 27020-	Transaction ID : 11014.E4305	
Purpose of Disbursement Travel Expense		Category/ Type	TRAVEL EXPENSE	
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>B. Debbie Clary</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2011	
Mailing Address 214 S. Lafayette Street, Suite B.			Amount of Each Disbursement this Period 525.00	
City Shelby	State NC	Zip Code 28150-	Transaction ID : 11014.C11935IK	
Purpose of Disbursement		Category/ Type	IN KIND:	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Computer Pro</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2011	
Mailing Address 3011 1st Ave PI SW			Amount of Each Disbursement this Period 204.85	
City Hickory	State NC	Zip Code 28602-	Transaction ID : 11014.E4286	
Purpose of Disbursement Computer Repair		Category/ Type	COMPUTER REPAIR	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	797.61
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 73	
	<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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CTS Holdings, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2011
Mailing Address 2525 Horizon Lake Dr Ste #120		Amount of Each Disbursement this Period 1.95
City Memphis State TN Zip Code 38133-	Purpose of Disbursement Credit Card Processing Fee Category/Type	
Candidate Name		Transaction ID : 11014.E4311
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)	CREDIT CARD PROCESSING FEE	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CTS Holdings, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2011
Mailing Address 2525 Horizon Lake Dr Ste #120		Amount of Each Disbursement this Period 109.45
City Memphis State TN Zip Code 38133-	Purpose of Disbursement Credit Card Processing Fee Category/Type	
Candidate Name		Transaction ID : 11014.E4287
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)	CREDIT CARD PROCESSING FEE	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. CTS Holdings, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2011
Mailing Address 2525 Horizon Lake Dr Ste #120		Amount of Each Disbursement this Period 4.95
City Memphis State TN Zip Code 38133-	Purpose of Disbursement Credit Card Processing Fee Category/Type	
Candidate Name		Transaction ID : 11014.E4312
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)	CREDIT CARD PROCESSING FEE	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	116.35
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 73			
	<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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CTS Holdings, LLC</b>			Date of Disbursement MM / DD / YYYY 08 / 02 / 2011
Mailing Address 2525 Horizon Lake Dr Ste #120			Amount of Each Disbursement this Period 9.95
City Memphis	State TN	Zip Code 38133-	
Purpose of Disbursement Credit Card Processing Fee		Category/ Type	<b>Transaction ID : 11014.E4288</b>
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)		CREDIT CARD PROCESSING FEE
State: District:			

Full Name (Last, First, Middle Initial) <b>B. CTS Holdings, LLC</b>			Date of Disbursement MM / DD / YYYY 08 / 05 / 2011
Mailing Address 2525 Horizon Lake Dr Ste #120			Amount of Each Disbursement this Period 0.49
City Memphis	State TN	Zip Code 38133-	
Purpose of Disbursement Credit Card Processing Fee		Category/ Type	<b>Transaction ID : 11014.E4313</b>
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)		CREDIT CARD PROCESSING FEE
State: District:			

Full Name (Last, First, Middle Initial) <b>c. CTS Holdings, LLC</b>			Date of Disbursement MM / DD / YYYY 08 / 09 / 2011
Mailing Address 2525 Horizon Lake Dr Ste #120			Amount of Each Disbursement this Period 23.35
City Memphis	State TN	Zip Code 38133-	
Purpose of Disbursement Credit Card Processing Fee		Category/ Type	<b>Transaction ID : 11014.E4289</b>
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)		CREDIT CARD PROCESSING FEE
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	33.79
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 73			
	<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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CTS Holdings, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2011		
Mailing Address 2525 Horizon Lake Dr Ste #120			Amount of Each Disbursement this Period 9.95		
City Memphis	State TN	Zip Code 38133-	Transaction ID : 11014.E4290		
Purpose of Disbursement Credit Card Processing Fee		Category/ Type	CREDIT CARD PROCESSING FEE		
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>B. CTS Holdings, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2011		
Mailing Address 2525 Horizon Lake Dr Ste #120			Amount of Each Disbursement this Period 10.00		
City Memphis	State TN	Zip Code 38133-	Transaction ID : 11014.E4291		
Purpose of Disbursement Credit Card Processing Fee		Category/ Type	CREDIT CARD PROCESSING FEE		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. CTS Holdings, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2011		
Mailing Address 2525 Horizon Lake Dr Ste #120			Amount of Each Disbursement this Period 9.95		
City Memphis	State TN	Zip Code 38133-	Transaction ID : 11014.E4292		
Purpose of Disbursement Credit Card Processing Fee		Category/ Type	CREDIT CARD PROCESSING FEE		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	29.90
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 73			
	<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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. EFTPS(Internal Revenue Service)</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2011
Mailing Address PO Box 105703		Amount of Each Disbursement this Period 272.17
City Atlanta	State GA	
Zip Code 30348-	Purpose of Disbursement Payroll Taxes	<b>Transaction ID : 11014.E4293</b>
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)	PAYROLL TAXES
State: District:		

Full Name (Last, First, Middle Initial) <b>B. EFTPS(Internal Revenue Service)</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2011
Mailing Address PO Box 105703		Amount of Each Disbursement this Period 427.90
City Atlanta	State GA	
Zip Code 30348-	Purpose of Disbursement Payroll Taxes	<b>Transaction ID : 11014.E4294</b>
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)	PAYROLL TAXES
State: District:		

Full Name (Last, First, Middle Initial) <b>C. EFTPS(Internal Revenue Service)</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2011
Mailing Address PO Box 105703		Amount of Each Disbursement this Period 249.67
City Atlanta	State GA	
Zip Code 30348-	Purpose of Disbursement Payroll Taxes	<b>Transaction ID : 11014.E4295</b>
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)	PAYROLL TAXES
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	949.74
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 73			
	<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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Employment Security Commission of NC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2011
Mailing Address PO Box 25903			Amount of Each Disbursement this Period 26.14
City Raleigh	State NC	Zip Code 27611-	
Purpose of Disbursement Unemployment Tax		Category/ Type	<b>Transaction ID : 11014.E4308</b>
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)		UNEMPLOYMENT TAX
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Employment Security Commission of NC</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2011
Mailing Address PO Box 25903			Amount of Each Disbursement this Period 41.59
City Raleigh	State NC	Zip Code 27611-	
Purpose of Disbursement Unemployment Tax		Category/ Type	<b>Transaction ID : 11014.E4309</b>
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)		UNEMPLOYMENT TAX
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Employment Security Commission of NC</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2011
Mailing Address PO Box 25903			Amount of Each Disbursement this Period 26.14
City Raleigh	State NC	Zip Code 27611-	
Purpose of Disbursement Unemployment Tax		Category/ Type	<b>Transaction ID : 11014.E4310</b>
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)		UNEMPLOYMENT TAX
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	93.87
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 73	
	<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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Gaston Regional Chamber Of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2011
Mailing Address 601 W Franklin Blvd		Amount of Each Disbursement this Period 185.00
City Gastonia	State NC	
Zip Code 28052-	Purpose of Disbursement Membership Dues	Transaction ID : 11014.E4320
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)	MEMBERSHIP DUES
State: District:		

Full Name (Last, First, Middle Initial) <b>B. iContribute</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2011
Mailing Address PO Box 8522		Amount of Each Disbursement this Period 211.00
City Falls Church	State VA	
Zip Code 22044-	Purpose of Disbursement Credit Card Processing Fee	Transaction ID : 11014.E4314
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)	CREDIT CARD PROCESSING FEE
State: District:		

Full Name (Last, First, Middle Initial) <b>C. iContribute</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2011
Mailing Address PO Box 8522		Amount of Each Disbursement this Period 211.00
City Falls Church	State VA	
Zip Code 22044-	Purpose of Disbursement Credit Card Processing Fee	Transaction ID : 11014.E4315
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)	CREDIT CARD PROCESSING FEE
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	607.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 73			
	<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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. NC Dept. of Revenue</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2011
Mailing Address PO Box 25000		Amount of Each Disbursement this Period 64.00
City Raleigh	State NC	
Zip Code 27640-0615	Purpose of Disbursement Payroll Taxes	Transaction ID : 11014.E4321
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)	PAYROLL TAXES
State: District:		

Full Name (Last, First, Middle Initial) <b>B. NC Dept. of Revenue</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2011
Mailing Address PO Box 25000		Amount of Each Disbursement this Period 79.00
City Raleigh	State NC	
Zip Code 27640-0615	Purpose of Disbursement Payroll Taxes	Transaction ID : 11014.E4322
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)	PAYROLL TAXES
State: District:		

Full Name (Last, First, Middle Initial) <b>c. NC Dept. of Revenue</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2011
Mailing Address PO Box 25000		Amount of Each Disbursement this Period 64.00
City Raleigh	State NC	
Zip Code 27640-0615	Purpose of Disbursement Payroll Taxes	Transaction ID : 11014.E4323
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)	PAYROLL TAXES
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	207.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 64 OF 73	
	<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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Bill Oorbeek</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2011
Mailing Address 5903 Woodfield Estates Dr		Amount of Each Disbursement this Period 2059.65
City Alexandria	State VA Zip Code 22310-	
Purpose of Disbursement Reimbursement: See Below		Transaction ID : 11014.E4269
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)	REIMBURSEMENT: SEE BELOW
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. W Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2011
Mailing Address 1567 Broadway at 47 St		Amount of Each Disbursement this Period 2059.65
City New York	State NY Zip Code 10036-	
Purpose of Disbursement Travel Expense		Transaction ID : 11014.E4337
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)	[MEMO ITEM] MEMO: TRAVEL EXPENSE
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. Bill Oorbeek</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2011
Mailing Address 5903 Woodfield Estates Dr		Amount of Each Disbursement this Period 610.00
City Alexandria	State VA Zip Code 22310-	
Purpose of Disbursement Reimbursement: See Below		Transaction ID : 11014.E4270
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)	REIMBURSEMENT: SEE BELOW
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2669.65
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 73			
	<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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. A Thyme &amp; Place</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2011
Mailing Address 2500 Dewitt Ave		Amount of Each Disbursement this Period 610.00
City Alexandria	State VA	
Zip Code 22301-	Purpose of Disbursement Event Food Expense	Transaction ID : 11014.E4338
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)	[MEMO ITEM] MEMO: EVENT FOOD EXPENSE
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Bill Oorbeek</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2011
Mailing Address 5903 Woodfield Estates Dr		Amount of Each Disbursement this Period 1465.00
City Alexandria	State VA	
Zip Code 22310-	Purpose of Disbursement Reimbursement: See Below	Transaction ID : 11014.E4271
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)	REIMBURSEMENT: SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Central Michel Richard</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2011
Mailing Address 1001 Pennsylvania Ave NW		Amount of Each Disbursement this Period 1465.00
City Washington	State DC	
Zip Code 20004-	Purpose of Disbursement Event Food & Beverages	Transaction ID : 11014.E4339
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)	[MEMO ITEM] MEMO: EVENT FOOD & BEVERAGES
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1465.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 66 OF 73	
	<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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Bill Oorbeek</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2011
Mailing Address 5903 Woodfield Estates Dr		Amount of Each Disbursement this Period 2379.42
City Alexandria	State VA Zip Code 22310-	
Purpose of Disbursement Reimbursement: See Below		Transaction ID : 11014.E4272
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)	REIMBURSEMENT: SEE BELOW
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. The Caucus Room</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2011
Mailing Address 401 9th St NW		Amount of Each Disbursement this Period 1528.22
City Washington	State DC Zip Code 20004-	
Purpose of Disbursement Event Food & Beverage Expense		Transaction ID : 11014.E4340
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)	[MEMO ITEM] MEMO: EVENT FOOD & BEVERAGE EXPENSE
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. Sonoma Restaurant</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2011
Mailing Address 223 Pennsylvania Ave SE		Amount of Each Disbursement this Period 851.20
City Washington	State DC Zip Code 20500-	
Purpose of Disbursement Event Food & Beverage Expense		Transaction ID : 11014.E4341
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)	[MEMO ITEM] MEMO: EVENT FOOD & BEVERAGE EXPENSE
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2379.42
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 73			
	<input checked="" type="checkbox"/> 17 <input 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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. The Armory Bldg/Prism Property Mgmt</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2011
Mailing Address Po Box 729		Amount of Each Disbursement this Period 850.00
City Hickory	State NC	Zip Code 28603-
Purpose of Disbursement Office Rent	Transaction ID : 11014.E4266	
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:	OFFICE RENT	

Full Name (Last, First, Middle Initial) <b>B. The Armory Bldg/Prism Property Mgmt</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2011
Mailing Address Po Box 729		Amount of Each Disbursement this Period 850.00
City Hickory	State NC	Zip Code 28603-
Purpose of Disbursement Office Rent	Transaction ID : 11014.E4267	
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:	OFFICE RENT	

Full Name (Last, First, Middle Initial) <b>c. The Armory Bldg/Prism Property Mgmt</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2011
Mailing Address Po Box 729		Amount of Each Disbursement this Period 850.00
City Hickory	State NC	Zip Code 28603-
Purpose of Disbursement Office Rent	Transaction ID : 11014.E4324	
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:	OFFICE RENT	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2550.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 73			
	<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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Catherine Rains</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2011
Mailing Address 317 Oakwood Ln		Amount of Each Disbursement this Period 1635.00 <b>Transaction ID : 11014.E4276</b>
City Devon	State PA	
Zip Code 19333-		Category/Type SALARY
Purpose of Disbursement Salary		
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>B. Catherine Rains</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2011
Mailing Address 317 Oakwood Ln		Amount of Each Disbursement this Period 1635.00 <b>Transaction ID : 11014.E4277</b>
City Devon	State PA	
Zip Code 19333-		Category/Type SALARY
Purpose of Disbursement Salary		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Catherine Rains</b>		Date of Disbursement MM / DD / YYYY 09 / 01 / 2011
Mailing Address 317 Oakwood Ln		Amount of Each Disbursement this Period 1635.00 <b>Transaction ID : 11014.E4278</b>
City Devon	State PA	
Zip Code 19333-		Category/Type SALARY
Purpose of Disbursement Salary		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4905.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 73			
	<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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Sprint</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2011
Mailing Address PO Box 219100		Amount of Each Disbursement this Period 130.64
City Kansas City	State MO	
Zip Code 64121-9100	Purpose of Disbursement Telephone Expense	Transaction ID : 11014.E4325
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)	TELEPHONE EXPENSE
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sprint</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2011
Mailing Address PO Box 219100		Amount of Each Disbursement this Period 128.24
City Kansas City	State MO	
Zip Code 64121-9100	Purpose of Disbursement Telephone Expense	Transaction ID : 11014.E4326
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)	TELEPHONE EXPENSE
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The Oorbeek Group</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2011
Mailing Address 5903 Woodfield Estates Dr		Amount of Each Disbursement this Period 4987.00
City Alexandria	State VA	
Zip Code 22310-	Purpose of Disbursement Fundraising	Transaction ID : 11014.E4328
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)	FUNDRAISING
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5245.88
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 73	
	<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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. The Oorbeek Group</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2011	
Mailing Address 5903 Woodfield Estates Dr			Amount of Each Disbursement this Period 2500.00	
City Alexandria	State VA	Zip Code 22310-	Transaction ID : 11014.E4327	
Purpose of Disbursement Fundraising		Category/ Type	FUNDRAISING	
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>B. The Oorbeek Group</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2011	
Mailing Address 5903 Woodfield Estates Dr			Amount of Each Disbursement this Period 2500.00	
City Alexandria	State VA	Zip Code 22310-	Transaction ID : 11014.E4329	
Purpose of Disbursement Fundraising		Category/ Type	FUNDRAISING	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. The Oorbeek Group</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2011	
Mailing Address 5903 Woodfield Estates Dr			Amount of Each Disbursement this Period 2500.00	
City Alexandria	State VA	Zip Code 22310-	Transaction ID : 11014.E4330	
Purpose of Disbursement Fundraising		Category/ Type	FUNDRAISING	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 71 OF 73	
	<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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. US Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2011
Mailing Address 231 Government Ave SW		Amount of Each Disbursement this Period 48.00
City Hickory	State NC	
Zip Code 28602-2955	Purpose of Disbursement Postage	Transaction ID : 11014.E4331
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)	POSTAGE
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2011
Mailing Address Po Box 105378		Amount of Each Disbursement this Period 236.27
City Atlanta	State GA	
Zip Code 30348-	Purpose of Disbursement Mobile Phone Expense	Transaction ID : 11014.E4332
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)	MOBILE PHONE EXPENSE
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2011
Mailing Address Po Box 105378		Amount of Each Disbursement this Period 430.10
City Atlanta	State GA	
Zip Code 30348-	Purpose of Disbursement Mobile Phone Expense	Transaction ID : 11014.E4333
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)	MOBILE PHONE EXPENSE
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	714.37
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 73			
	<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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2011
Mailing Address Po Box 105378		Amount of Each Disbursement this Period 150.62
City Atlanta	State GA	
Zip Code 30348-		Transaction ID : 11014.E4334
Purpose of Disbursement Mobile Phone Expense	Category/ Type	
Candidate Name		MOBILE PHONE EXPENSE
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>B. Warren &amp; Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2011
Mailing Address PO Box 1871		Amount of Each Disbursement this Period 30.88
City Gastonia	State NC	
Zip Code 28052-		Transaction ID : 11014.E4335
Purpose of Disbursement Payroll Processing Fee	Category/ Type	
Candidate Name		PAYROLL PROCESSING FEE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Warren &amp; Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2011
Mailing Address PO Box 1871		Amount of Each Disbursement this Period 1305.56
City Gastonia	State NC	
Zip Code 28052-		Transaction ID : 11014.E4336
Purpose of Disbursement Payroll Processing Fee	Category/ Type	
Candidate Name		PAYROLL PROCESSING FEE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1487.06
<b>TOTAL</b> This Period (last page this line number only).....	47587.11



**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 73 OF 73	
	<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)  
**MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Catawba County Republican Party</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2011	
Mailing Address Po Box 153			Amount of Each Disbursement this Period 200.00 <b>Transaction ID : 11014.E4274</b>	
City Hickory	State NC	Zip Code 28603-		
Purpose of Disbursement ADVERTISEMENT EXPENSE		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President				
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code		
Purpose of Disbursement		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:		

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code		
Purpose of Disbursement		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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	200.00
<b>TOTAL</b> This Period (last page this line number only).....	200.00