

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Piedmont Natural Gas PAC

Full Name (Last, First, Middle Initial)

A. Jim Tracy for Congress - TN 4 Dist

Mailing Address 2 West Windsor Ave

City Alexandria State VA Zip Code 22301-1514

Purpose of Disbursement
VOID -

Candidate Name
Sen. Jim Tracy

Office Sought: House Senate President
State: TN District: 04

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 06 / 2013

Transaction ID : B4082760EE7DB4B3DA4B

Amount of Each Disbursement this Period

-1000.00

Full Name (Last, First, Middle Initial)

B. Kay Hagan US Senate Committee Inc

Mailing Address PO Box 29103

City Greensboro State NC Zip Code 27429-9103

Purpose of Disbursement

Candidate Name
Sen. Kay R. Hagan

Office Sought: House Senate President
State: NC District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 20 / 2013

Transaction ID : BE98D2B791BF14A5BA0A

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Malcolm Graham for Congress

Mailing Address PO Box 480214

City Charlotte State NC Zip Code 28269-5302

Purpose of Disbursement

Candidate Name
Malcolm Graham

Office Sought: House Senate President
State: NC District: 12

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2013

Transaction ID : B8C7CC6DE72DB4993BFE

Amount of Each Disbursement this Period

250.00

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

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

250.00