

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
North Carolina Republican Party

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 2 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 1 |

 To:

| | |
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| M | M |
| 0 | 2 |

| | |
|---|---|
| D | D |
| 2 | 8 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 1 |

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date | | | | | | | | |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|----------|
| 6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table> | Y | Y | Y | Y | 2 | 0 | 1 | 1 | | 77832.98 |
| Y | Y | Y | Y | | | | | | | |
| 2 | 0 | 1 | 1 | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | 45771.12 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 51045.40 | 76885.72 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 96816.52 | 154718.70 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 53441.98 | 111344.16 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 43374.54 | 43374.54 | | | | | | | | |
| 9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | | | | | | | |
| 10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) | 14474.64 | | | | | | | | | |

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
North Carolina Republican Party

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 2 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 1 |

 To:

| | |
|---|---|
| M | M |
| 0 | 2 |

| | |
|---|---|
| D | D |
| 2 | 8 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 1 |

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A) | 20080.42 | 33330.42 |
| (ii) Unitemized | 27609.81 | 30952.56 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 47690.23 | 64282.98 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 6521.13 |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | 47690.23 | 70804.11 |
| 12. Transfers From Affiliated/Other Party Committees | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) | 537.58 | 537.58 |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3) | 2817.59 | 5544.03 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfer (add 18(a) and 18(b)). | 2817.59 | 5544.03 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) | 51045.40 | 76885.72 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 48227.81 | 71341.69 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---|
| 21. Operating Expenditures: | | |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share..... | 1095.73 | 2156.02 |
| (ii) Non-Federal Share..... | 2817.59 | 5544.02 |
| (b) Other Federal Operating Expenditures..... | 49528.66 | 103644.12 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶ | 53441.98 | 111344.16 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 0.00 |
| 24. Independent Expenditure (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) | 0.00 | 0.00 |
| 29. Other Disbursements..... | 0.00 | 0.00 |
| 30. Federal Election Activity (2 U.S.C 431(20)) | | |
| (a) Shared Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. | 53441.98 | 111344.16 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 50624.39 | 105800.14 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) from Line 11(d), page 3) | 47690.23 | 70804.11 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 47690.23 | 70804.11 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 50624.39 | 105800.14 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 537.58 | 537.58 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 50086.81 | 105262.56 |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 49
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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)
North Carolina Republican Party

A. Full Name (Last, First, Middle Initial)
Rhonda Amoroso

Mailing Address 1912 Ashbrook Drive

City State Zip Code
Wilmington NC 28403

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt M M / D D / Y Y Y Y
02 / 28 / 2011

Transaction ID: 10308.C369503

Amount of Each Receipt this Period 215.00

Receipt

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

Mailing Address 10801 Lederer Avenue

City State Zip Code
Charlotte NC 28277

FEC ID number of contributing federal political committee. C

Name of Employer The Bissell Companies Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y
02 / 25 / 2011

Transaction ID: 10228.C369166

Amount of Each Receipt this Period 500.00

Receipt

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

Mailing Address 5500 Brooke Dylan Court

City State Zip Code
Mc Leansville NC 27301

FEC ID number of contributing federal political committee. C

Name of Employer Rapid Response USA Occupation VP of Sales & Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt M M / D D / Y Y Y Y
02 / 28 / 2011

Transaction ID: 10308.C369512

Amount of Each Receipt this Period 215.00

Receipt

SUBTOTAL of Receipts This Page (optional) 930.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 49
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
North Carolina Republican Party

A. Full Name (Last, First, Middle Initial)
Paul Broyhill

Mailing Address PO Box 500

City Lenoir State NC Zip Code 28645-0500

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

Name of Employer Broyhill Investments, Inc. Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 02 / 11 / 2011
Transaction ID: 10216.C368559
Amount of Each Receipt this Period: 500.00
Receipt

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

Mailing Address 339 Wingrave Drive

City Charlotte State NC Zip Code 28270-5925

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

Name of Employer Presbyterian Hospital Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 02 / 18 / 2011
Transaction ID: 10224.C368995
Amount of Each Receipt this Period: 500.00
Receipt

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

Mailing Address 339 Wingrave Drive

City Charlotte State NC Zip Code 28270-5925

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

Name of Employer Presbyterian Hospital Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt: 02 / 21 / 2011
Transaction ID: 10224.C369012
Amount of Each Receipt this Period: 250.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 1250.00

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

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

| | | |
|---|---|-------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 / 49 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 | |
| | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
North Carolina Republican Party

| | | | |
|---|---|---------------------------|---|
| A. | Full Name (Last, First, Middle Initial) Howard Coble | | Date of Receipt |
| | Mailing Address 5741-L Bramblegate Drive | | <input type="text" value="02"/> / <input type="text" value="01"/> / <input type="text" value="2011"/> |
| | City | State | Zip Code |
| | Greensboro | NC | 27409 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: 10216.C368258 |
| Name of Employer US Congress | | Occupation Congressman | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | <input type="text" value="1000.00"/> |
| | | | Receipt |

| | | | |
|---|---|-----------------------------|---|
| B. | Full Name (Last, First, Middle Initial) Jeffrey Cox | | Date of Receipt |
| | Mailing Address 5500 Brooke Dylan Court | | <input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2011"/> |
| | City | State | Zip Code |
| | Mc Leansville | NC | 27301 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: 10308.C369511 |
| Name of Employer Self | | Occupation Environmental | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | <input type="text" value="215.00"/> |
| | | | Receipt |

| | | | |
|---|---|--------------------------|---|
| C. | Full Name (Last, First, Middle Initial) Edward Curran | | Date of Receipt |
| | Mailing Address 1418 Biltmore Drive | | <input type="text" value="02"/> / <input type="text" value="25"/> / <input type="text" value="2011"/> |
| | City | State | Zip Code |
| | Charlotte | NC | 28207-2557 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: 10228.C369142 |
| Name of Employer The Bissell Co., Inc | | Occupation Executive | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | <input type="text" value="250.00"/> |
| | | | Receipt |

| | |
|--|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text" value="1465.00"/> |
| TOTAL This Period (last page this line number only) | <input type="text"/> |

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

| | | |
|---|---|-------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 / 49 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 | |
| | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
North Carolina Republican Party

| | | |
|---|---|---|
| A. | Full Name (Last, First, Middle Initial) Henry Faison | Date of Receipt MM / DD / YYYY 02 / 28 / 2011 |
| | Mailing Address 121 West Trade Street, 27th Floor | Transaction ID: 10228.C369208 |
| | City State Zip Code Charlotte NC 28202-5399 | Amount of Each Receipt this Period 1000.00 |
| | FEC ID number of contributing federal political committee. C | Receipt |
| | Name of Employer Occupation Faison Associates Chairman | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | |

| | | |
|---|--|---|
| B. | Full Name (Last, First, Middle Initial) Parks Griffin | Date of Receipt MM / DD / YYYY 02 / 14 / 2011 |
| | Mailing Address 6205 Costins Court | Transaction ID: 10216.C368660 |
| | City State Zip Code Wilmington NC 28409-2387 | Amount of Each Receipt this Period 1000.00 |
| | FEC ID number of contributing federal political committee. C | Receipt |
| | Name of Employer Occupation Griffin-Estep Benefit Group Insurance Agent | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | |

| | | |
|---|---|---|
| C. | Full Name (Last, First, Middle Initial) Terry Hutchens | Date of Receipt MM / DD / YYYY 02 / 21 / 2011 |
| | Mailing Address 1117 Offshore Drive | Transaction ID: 10224.C369018 |
| | City State Zip Code Fayetteville NC 28305-5250 | Amount of Each Receipt this Period 5000.00 |
| | FEC ID number of contributing federal political committee. C | Receipt |
| | Name of Employer Occupation Hutchens & Senter Attorney | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 5000.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) | 7000.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 49
(check only one)

| | | | |
|---|------------------------------|------------------------------|---|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
North Carolina Republican Party

A.

Full Name (Last, First, Middle Initial)
Thomas Kenan

Mailing Address PO Box 4150

City State Zip Code
Chapel Hill NC 27515-4150

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

Name of Employer Self Occupation Trustee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 28 / 2011

Transaction ID: 10228.C369234

Amount of Each Receipt this Period
250.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Kevin Kennelly

Mailing Address 2325 Thetford Court

City State Zip Code
Charlotte NC 28211

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

Name of Employer Park Meridian Bank Occupation Banker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 23 / 2011

Transaction ID: 10224.C369081

Amount of Each Receipt this Period
250.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Proctor Kidwell

Mailing Address 5690 Cherry Run Road

City State Zip Code
Washington NC 27889

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

Name of Employer Self Occupation Income & Tax Accounting

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 430.00

Date of Receipt
MM / DD / YYYY
02 / 28 / 2011

Transaction ID: 10308.C369507

Amount of Each Receipt this Period
430.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **930.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 49
(check only one)

| | | | | | | | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|
| <input checked="" type="checkbox"/> | 11a | <input type="checkbox"/> | 11b | <input type="checkbox"/> | 11c | <input type="checkbox"/> | 12 | <input type="checkbox"/> | 13 | <input type="checkbox"/> | 14 | <input type="checkbox"/> | 15 | <input type="checkbox"/> | 16 | <input type="checkbox"/> | 17 |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|

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NAME OF COMMITTEE (In Full)
North Carolina Republican Party

A.

Full Name (Last, First, Middle Initial)
Thomas Lawing

Mailing Address 2609 Valencia Terrace

City State Zip Code
Charlotte NC 28226-4955

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

Name of Employer Self Occupation Realtor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 14 / 2011

Transaction ID: 10216.C368659

Amount of Each Receipt this Period
250.00

Receipt

B.

Full Name (Last, First, Middle Initial)
George Mahoney

Mailing Address 4417 Belknap Road

City State Zip Code
Charlotte NC 28201-1017

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
02 / 23 / 2011

Transaction ID: 10224.C369079

Amount of Each Receipt this Period
1000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
George McDowell

Mailing Address 809 Edgehill Road South

City State Zip Code
Charlotte NC 28207-1881

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

Name of Employer Bank Of America Occupation Investment Banker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
02 / 18 / 2011

Transaction ID: 10224.C368980

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 49
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
North Carolina Republican Party

A. Full Name (Last, First, Middle Initial)
Edwin McMahan

Mailing Address 1959 Queens Road West

City State Zip Code
Charlotte NC 28207

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

Name of Employer Little & Associates Occupation CEO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 3 / 2 0 1 1

Transaction ID: 10224.C369080

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 1338 East Barden Road

City State Zip Code
Charlotte NC 28226-5828

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

Name of Employer Transamerica Corporation Occupation Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 1 8 / 2 0 1 1

Transaction ID: 10224.C368981

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address PO Box 30036

City State Zip Code
Charlotte NC 28230-0036

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

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 1 8 / 2 0 1 1

Transaction ID: 10224.C368979

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **1500.00**

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

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

| | | |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 13 / 49 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 | |
| | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
North Carolina Republican Party

| | | |
|-----------|--|---|
| A. | Full Name (Last, First, Middle Initial) Joel Ostrow | Date of Receipt MM / DD / YYYY 02 / 21 / 2011 |
| | Mailing Address 6921 Shinnecock Hill Lane | Transaction ID: 10224.C369015 |
| | City State Zip Code Charlotte NC 28277 | Amount of Each Receipt this Period 250.00 |
| | FEC ID number of contributing federal political committee. C | Receipt |
| | Name of Employer Self Occupation Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 |

| | | |
|-----------|---|---|
| B. | Full Name (Last, First, Middle Initial) William Palmer | Date of Receipt MM / DD / YYYY 02 / 17 / 2011 |
| | Mailing Address 2328 Mecklenburg Avenue | Transaction ID: 10217.C368910 |
| | City State Zip Code Charlotte NC 28205 | Amount of Each Receipt this Period 250.00 |
| | FEC ID number of contributing federal political committee. C | Receipt |
| | Name of Employer Kirk, Palmer & Thigpen Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 |

| | | |
|-----------|--|---|
| C. | Full Name (Last, First, Middle Initial) Henry Roemer | Date of Receipt MM / DD / YYYY 02 / 08 / 2011 |
| | Mailing Address 341 Arbor Road | Transaction ID: 10216.C368332 |
| | City State Zip Code Winston Salem NC 27104-1909 | Amount of Each Receipt this Period 250.00 |
| | FEC ID number of contributing federal political committee. C | Receipt |
| | Name of Employer Retired Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) | 750.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 14 / 49 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
North Carolina Republican Party

| | | | |
|-----------|---|-------------|---|
| A. | Full Name (Last, First, Middle Initial) George Rountree | | Date of Receipt |
| | Mailing Address 2419 Market Street PO Box 1409 | | <input type="text" value="02"/> / <input type="text" value="16"/> / <input type="text" value="2011"/> |
| | City Wilmington | State NC | Zip Code 28402-1409 |
| | FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID: 10217.C368808 |
| | Name of Employer Rountree, Seagle & Brawley | | Occupation Lawyer |
| | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ <input type="text" value="2000.00"/> |
| | | | Amount of Each Receipt this Period <input type="text" value="2000.00"/> |
| | | | Receipt |

| | | | |
|-----------|---|-------------|---|
| B. | Full Name (Last, First, Middle Initial) Paul Stam | | Date of Receipt |
| | Mailing Address PO Box 1600 714 Hunter Street | | <input type="text" value="02"/> / <input type="text" value="01"/> / <input type="text" value="2011"/> |
| | City Apex | State NC | Zip Code 27502-1326 |
| | FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID: 10216.C368256 |
| | Name of Employer Stam, Fordham & Dinchi, PA | | Occupation Attorney |
| | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ <input type="text" value="60.84"/> |
| | | | Amount of Each Receipt this Period <input type="text" value="30.42"/> |
| | | | Receipt |

| | | | |
|-----------|---|-------------|---|
| C. | Full Name (Last, First, Middle Initial) Paul Stam | | Date of Receipt |
| | Mailing Address PO Box 1600 714 Hunter Street | | <input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2011"/> |
| | City Apex | State NC | Zip Code 27502-1326 |
| | FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID: 10308.C369505 |
| | Name of Employer Stam, Fordham & Dinchi, PA | | Occupation Attorney |
| | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ <input type="text" value="205.84"/> |
| | | | Amount of Each Receipt this Period <input type="text" value="145.00"/> |
| | | | Receipt |

| | |
|--|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text" value="2175.42"/> |
| TOTAL This Period (last page this line number only) | <input type="text"/> |

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

| | | |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 15 / 49 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 | |
| | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
North Carolina Republican Party

| | | |
|-----------|--|---|
| A. | Full Name (Last, First, Middle Initial) David Stedman | Date of Receipt MM / DD / YYYY 02 / 08 / 2011 |
| | Mailing Address 1244 Arbor Road Box 424 | Transaction ID: 10216.C368327 |
| | City State Zip Code Winston Salem NC 27104-1197 | Amount of Each Receipt this Period 1000.00 |
| | FEC ID number of contributing federal political committee. C | Receipt |
| | Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 1000.00 | |

| | | |
|-----------|--|---|
| B. | Full Name (Last, First, Middle Initial) Doc Thurston | Date of Receipt MM / DD / YYYY 02 / 21 / 2011 |
| | Mailing Address 473 Hempstead Place | Transaction ID: 10224.C369014 |
| | City State Zip Code Charlotte NC 28207 | Amount of Each Receipt this Period 250.00 |
| | FEC ID number of contributing federal political committee. C | Receipt |
| | Name of Employer Xion Media Occupation CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 250.00 | |

| | | |
|-----------|---|---|
| C. | Full Name (Last, First, Middle Initial) Stella Thurston | Date of Receipt MM / DD / YYYY 02 / 21 / 2011 |
| | Mailing Address 473 Hempstead Place | Transaction ID: 10224.C369013 |
| | City State Zip Code Charlotte NC 28207 | Amount of Each Receipt this Period 250.00 |
| | FEC ID number of contributing federal political committee. C | Receipt |
| | Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 250.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) | 1500.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 49

(check only one)

| | | | |
|---|------------------------------|------------------------------|---|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
North Carolina Republican Party

A.

Full Name (Last, First, Middle Initial)
David Wickersham

Mailing Address 38 Sunshine Drive

City State Zip Code
Arapahoe NC 28510

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
365.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 3 / 2 0 1 1

Transaction ID: 10216.C368324

Amount of Each Receipt this Period

365.00

Receipt

B.

Full Name (Last, First, Middle Initial)
David Wickersham

Mailing Address 38 Sunshine Drive

City State Zip Code
Arapahoe NC 28510

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
580.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 1

Transaction ID: 10308.C369504

Amount of Each Receipt this Period

215.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Dennis Yates

Mailing Address 145 Union Street South

City State Zip Code
Concord NC 28025

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

Name of Employer Occupation
Yates Chreitzberg Architects Architect

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 2 / 2 0 1 1

Transaction ID: 10216.C368282

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

830.00

TOTAL This Period (last page this line number only)

20080.42

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 17 / 49 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| <input checked="" type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
North Carolina Republican Party

A.

| | | |
|---|--------------------------|---|
| Full Name (Last, First, Middle Initial) Tami Fitzgerald | | Date of Receipt |
| Mailing Address 109 Carpathian Way | | <input type="text" value="02"/> / <input type="text" value="17"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Raleigh | NC | 27615-1612 |
| FEC ID number of contributing federal political committee. | | Transaction ID: 10217.C368886 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="339.58"/> |
| Name of Employer Self | Occupation Consultant | Offsets to Operating Expenditure |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | NOTE:Health Insurance Reimbur |
| <input type="text" value="339.58"/> | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text" value="339.58"/> |
| TOTAL This Period (last page this line number only) | <input type="text" value="339.58"/> |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 18 / 49

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input 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)
North Carolina Republican Party

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) ADP Easypay | Transaction ID: 10314.E32084 Date of Disbursement 02 / 04 / 2011 |
| | Mailing Address 201 Regency Executive Park Drive | Amount of Each Disbursement this Period 67.90 |
| | City Charlotte State NC Zip Code 28217-3986 | |
| | Purpose of Disbursement Payroll Professional Fee | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | PAYROLL PROFESSIONAL FEE |
| | State: District: | |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) ADP Easypay | Transaction ID: 10314.E32067 Date of Disbursement 02 / 15 / 2011 |
| | Mailing Address 201 Regency Executive Park Drive | Amount of Each Disbursement this Period 80.37 |
| | City Charlotte State NC Zip Code 28217-3986 | |
| | Purpose of Disbursement Payroll Professional Fee | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | PAYROLL PROFESSIONAL FEE |
| | State: District: | |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) ADP Easypay | Transaction ID: 10314.E32065 Date of Disbursement 02 / 15 / 2011 |
| | Mailing Address 201 Regency Executive Park Drive | Amount of Each Disbursement this Period 4724.33 |
| | City Charlotte State NC Zip Code 28217-3986 | |
| | Purpose of Disbursement Payroll Taxes | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | PAYROLL TAXES |
| | State: District: | |

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) | 4872.60 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER: (check only one)

PAGE 19 / 49

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input 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)
North Carolina Republican Party

| | |
|--|---|
| A. Full Name (Last, First, Middle Initial) ADP Easypay Mailing Address 201 Regency Executive Park Drive City Charlotte State NC Zip Code 28217-3986 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Transaction ID: 10314.E32092 Date of Disbursement 02 / 22 / 2011 |
| | Amount of Each Disbursement this Period 235.26 Category/Type PAYROLL TAXES |

| | |
|---|---|
| B. Full Name (Last, First, Middle Initial) ADP Easypay Mailing Address 201 Regency Executive Park Drive City Charlotte State NC Zip Code 28217-3986 Purpose of Disbursement Payroll Professional Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Transaction ID: 10314.E32068 Date of Disbursement 02 / 28 / 2011 |
| | Amount of Each Disbursement this Period 80.07 Category/Type PAYROLL PROFESSIONAL FEE |

| | |
|--|--|
| C. Full Name (Last, First, Middle Initial) ADP Easypay Mailing Address 201 Regency Executive Park Drive City Charlotte State NC Zip Code 28217-3986 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Transaction ID: 10314.E32066 Date of Disbursement 02 / 28 / 2011 |
| | Amount of Each Disbursement this Period 4715.24 Category/Type PAYROLL TAXES |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 5030.57 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

**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 checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input 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)
North Carolina Republican Party

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) AT&T | Transaction ID: 10228.E31993 Date of Disbursement 02 / 23 / 2011 |
| | Mailing Address PO Box 105262 | Amount of Each Disbursement this Period 130.77 |
| | City Atlanta State GA Zip Code 30348-5262 | |
| | Purpose of Disbursement Phone Line for Security & CC Machin Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | PHONE LINE FOR SECURITY & CC MACHIN |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Bank of America | Transaction ID: 10314.E32083 Date of Disbursement 02 / 15 / 2011 |
| | Mailing Address PO Box 1091 | Amount of Each Disbursement this Period 23.53 |
| | City Charlotte State NC Zip Code 28201-1091 | |
| | Purpose of Disbursement Service Charge Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | SERVICE CHARGE |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Bank of America | Transaction ID: 10314.E32086 Date of Disbursement 02 / 15 / 2011 |
| | Mailing Address PO Box 1091 | Amount of Each Disbursement this Period 240.62 |
| | City Charlotte State NC Zip Code 28201-1091 | |
| | Purpose of Disbursement Service Charge Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | SERVICE CHARGE |

| | |
|--|---------------|
| SUBTOTAL of Disbursements This Page (optional) | 394.92 |
| TOTAL This Period (last page this line number only) | |

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 checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input 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)
North Carolina Republican Party

A.

Full Name (Last, First, Middle Initial)
Bank of America

Mailing Address PO Box 1091

City Charlotte State NC Zip Code 28201-1091

Purpose of Disbursement
Service Charge
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 10314.E32082
Date of Disbursement

02 / 28 / 2011

Amount of Each Disbursement this Period

14.00

SERVICE CHARGE

B.

Full Name (Last, First, Middle Initial)
Miss Jennifer L. Behr

Mailing Address 4825 Black Mountain Path

City Raleigh State NC Zip Code 27612-

Purpose of Disbursement
Travel Expense Reimbursement
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 10224.E31960
Date of Disbursement

02 / 15 / 2011

Amount of Each Disbursement this Period

135.78

TRAVEL EXPENSE REIMBURSEMENT

C.

Full Name (Last, First, Middle Initial)
Miss Jennifer L. Behr

Mailing Address 4825 Black Mountain Path

City Raleigh State NC Zip Code 27612-

Purpose of Disbursement
Payroll
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 10314.E32069
Date of Disbursement

02 / 15 / 2011

Amount of Each Disbursement this Period

1542.66

PAYROLL

SUBTOTAL of Disbursements This Page (optional) ▶

1692.44

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

**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 checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input 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)
North Carolina Republican Party

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Miss Jennifer L. Behr | Transaction ID: 10228.E31992 Date of Disbursement 02 / 23 / 2011 |
| | Mailing Address 4825 Black Mountain Path | Amount of Each Disbursement this Period 171.59 |
| | City Raleigh State NC Zip Code 27612- | |
| | Purpose of Disbursement Travel Expense Reimbursement | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | TRAVEL EXPENSE REIMBURSEMENT |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Miss Jennifer L. Behr | Transaction ID: 10314.E32070 Date of Disbursement 02 / 28 / 2011 |
| | Mailing Address 4825 Black Mountain Path | Amount of Each Disbursement this Period 1542.67 |
| | City Raleigh State NC Zip Code 27612- | |
| | Purpose of Disbursement Payroll | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | PAYROLL |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of NC | Transaction ID: 10224.E31979 Date of Disbursement 02 / 15 / 2011 |
| | Mailing Address PO Box 30071 | Amount of Each Disbursement this Period 2573.20 |
| | City Durham State NC Zip Code 27702-3071 | |
| | Purpose of Disbursement Employee Insurance | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | EMPLOYEE INSURANCE |

| | | |
|--|---|---------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 4287.46 |
| TOTAL This Period (last page this line number only) | ▶ | |

**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)

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|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input 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)
North Carolina Republican Party

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Mr. Mark Braden | Transaction ID: 10228.E31985 Date of Disbursement MM / DD / YYYY 02 / 17 / 2011 |
| | Mailing Address 1009 Wade Avenue, Apt. 244 | Amount of Each Disbursement this Period 1968.64 |
| | City Raleigh State NC Zip Code 27605- | |
| | Purpose of Disbursement Payroll | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | PAYROLL |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Mr. Mark Braden | Transaction ID: 10228.E31991 Date of Disbursement MM / DD / YYYY 02 / 23 / 2011 |
| | Mailing Address 1009 Wade Avenue, Apt. 244 | Amount of Each Disbursement this Period 444.52 |
| | City Raleigh State NC Zip Code 27605- | |
| | Purpose of Disbursement Travel Expense & See Below | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | TRAVEL EXPENSE & SEE BELOW |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Speedway Club at | Transaction ID: 10228.E31990 Date of Disbursement MM / DD / YYYY 02 / 23 / 2011 |
| | Mailing Address Charlotte Motor Speedway 5555 Concord Parkway South | Amount of Each Disbursement this Period 163.00 |
| | City Concord State NC Zip Code 28027- | |
| | Purpose of Disbursement Food for Party Fundraising Event | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | [MEMO ITEM] MEMO: FOOD FOR PARTY FUND-RAISING EVENT |

| | | |
|--|---|---------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 2413.16 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 24 / 49

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input 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)
North Carolina Republican Party

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Mr. Mark Braden | Transaction ID: 10314.E32055 Date of Disbursement 02 / 28 / 2011 |
| | Mailing Address 1009 Wade Avenue, Apt. 244 | Amount of Each Disbursement this Period 212.22 |
| | City Raleigh State NC Zip Code 27605- | |
| | Purpose of Disbursement Travel & See Below | |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | TRAVEL & SEE BELOW |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) AT&T Wireless | Transaction ID: 10314.E32054 Date of Disbursement 02 / 28 / 2011 |
| | Mailing Address PO Box 537104 | Amount of Each Disbursement this Period 137.25 |
| | City Atlanta State GA Zip Code 30352- | |
| | Purpose of Disbursement Cell Phone Charges | |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | [MEMO ITEM] MEMO: CELL PHONE CHARGES |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Mr. Mark Braden | Transaction ID: 10314.E32071 Date of Disbursement 02 / 28 / 2011 |
| | Mailing Address 1009 Wade Avenue, Apt. 244 | Amount of Each Disbursement this Period 1968.64 |
| | City Raleigh State NC Zip Code 27605- | |
| | Purpose of Disbursement Payroll | |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | PAYROLL |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) | 2180.86 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 25 / 49

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input 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)
North Carolina Republican Party

| | | |
|----|---|--|
| A. | Full Name (Last, First, Middle Initial) Ms. Hayley Burrus | Transaction ID: 10314.E32072 |
| | Mailing Address 1400-01 Varsity Drive | Date of Disbursement MM / DD / YYYY 02 / 15 / 2011 |
| | City Raleigh State NC Zip Code 27606- | Amount of Each Disbursement this Period 292.73 |
| | Purpose of Disbursement Payroll Candidate Name | PAYROLL |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|----|---|--|
| B. | Full Name (Last, First, Middle Initial) Ms. Hayley Burrus | Transaction ID: 10314.E32073 |
| | Mailing Address 1400-01 Varsity Drive | Date of Disbursement MM / DD / YYYY 02 / 28 / 2011 |
| | City Raleigh State NC Zip Code 27606- | Amount of Each Disbursement this Period 334.01 |
| | Purpose of Disbursement Payroll Candidate Name | PAYROLL |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|----|---|--|
| C. | Full Name (Last, First, Middle Initial) Ms. Kim Canady | Transaction ID: 10314.E32074 |
| | Mailing Address 99 Glenn Farm Lane | Date of Disbursement MM / DD / YYYY 02 / 15 / 2011 |
| | City Wendell State NC Zip Code 27591- | Amount of Each Disbursement this Period 979.83 |
| | Purpose of Disbursement Payroll Candidate Name | PAYROLL |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) | 1606.57 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 26 / 49

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input 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)
North Carolina Republican Party

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) Ms. Kim Canady Mailing Address 99 Glenn Farm Lane City Wendell State NC Zip Code 27591- Purpose of Disbursement Food for Meetings Reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 10314.E32057 Date of Disbursement MM / DD / YYYY 02 / 28 / 2011 |
| | Amount of Each Disbursement this Period 169.46 FOOD FOR MEETINGS REIMBURSEMENT |

| | |
|---|--|
| B. Full Name (Last, First, Middle Initial) Ms. Kim Canady Mailing Address 99 Glenn Farm Lane City Wendell State NC Zip Code 27591- Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 10314.E32075 Date of Disbursement MM / DD / YYYY 02 / 28 / 2011 |
| | Amount of Each Disbursement this Period 979.84 PAYROLL |

| | |
|--|--|
| C. Full Name (Last, First, Middle Initial) Charlotte City Club Mailing Address 121 West Trade Street #3100 City Charlotte State NC Zip Code 28202- Purpose of Disbursement Food For Party Fundraising Event Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 10314.E32053 Date of Disbursement MM / DD / YYYY 02 / 21 / 2011 |
| | Amount of Each Disbursement this Period 2398.16 FOOD FOR PARTY FUNDRAISING EVENT |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 3547.46 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 27 / 49

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input 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)
North Carolina Republican Party

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) Datasages Consulting Group Mailing Address 10911 Raven Ridge Road, Suite 103- City Raleigh State NC Zip Code 27614- Purpose of Disbursement Computer Support Candidate Name | Transaction ID: 10216.E31896 Date of Disbursement 02 / 02 / 2011 |
| | Amount of Each Disbursement this Period 149.69 Category/Type COMPUTER SUPPORT |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|--|
| B. Full Name (Last, First, Middle Initial) Datasages Consulting Group Mailing Address 10911 Raven Ridge Road, Suite 103- City Raleigh State NC Zip Code 27614- Purpose of Disbursement Computer Support Candidate Name | Transaction ID: 10216.E31895 Date of Disbursement 02 / 02 / 2011 |
| | Amount of Each Disbursement this Period 750.00 Category/Type COMPUTER SUPPORT |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|---|
| C. Full Name (Last, First, Middle Initial) Datasages Consulting Group Mailing Address 10911 Raven Ridge Road, Suite 103- City Raleigh State NC Zip Code 27614- Purpose of Disbursement Computer Support Candidate Name | Transaction ID: 10216.E31894 Date of Disbursement 02 / 02 / 2011 |
| | Amount of Each Disbursement this Period 1275.00 Category/Type COMPUTER SUPPORT |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 2174.69 |
| TOTAL This Period (last page this line number only) ▶ | |

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 checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input 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)
North Carolina Republican Party

A.

Full Name (Last, First, Middle Initial)
Mr. Riccardo Diaz

Transaction ID: 10216.E31893
Date of Disbursement

Mailing Address 923 Grandview Avenue

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 | | 0 | 3 | | 2 | 0 | 1 | 1 |

City Union State NJ Zip Code 07083-

Amount of Each Disbursement this Period

| |
|--------|
| 499.95 |
|--------|

Purpose of Disbursement
Web Video-DNC Convention

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

WEB VIDEO-DNC CONVENTION

State: District:

B.

Full Name (Last, First, Middle Initial)
Mrs. Tami L. Fitzgerald

Transaction ID: 10224.E31965
Date of Disbursement

Mailing Address 109 Carpathian Way

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 | | 1 | 5 | | 2 | 0 | 1 | 1 |

City Raleigh State NC Zip Code 27615-

Amount of Each Disbursement this Period

| |
|-------|
| 52.07 |
|-------|

Purpose of Disbursement
See Below

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

SEE BELOW

State: District:

C.

Full Name (Last, First, Middle Initial)
Verizon Wireless

Transaction ID: 10224.E31964
Date of Disbursement

Mailing Address PO Box 660108

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 | | 1 | 5 | | 2 | 0 | 1 | 1 |

City Dallas State TX Zip Code 75266-

Amount of Each Disbursement this Period

| |
|-------|
| 52.07 |
|-------|

Purpose of Disbursement
Cell Phone Charges

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

[MEMO ITEM]
MEMO: CELL PHONE CHARGES

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

| |
|--------|
| 552.02 |
|--------|

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

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**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 checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input 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)
North Carolina Republican Party

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Mr. Robert C. Hayes | Transaction ID: 10314.E32064 Date of Disbursement 02 / 23 / 2011 |
| | Mailing Address PO Box 954 | Amount of Each Disbursement this Period 1037.82 |
| | City Concord State NC Zip Code 28026- | |
| | Purpose of Disbursement Travel/Meals Reimbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | TRAVEL/MEALS REIMBURSEMENT |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Holiday Inn-Brownstone | Transaction ID: 10216.E31900 Date of Disbursement 02 / 02 / 2011 |
| | Mailing Address 1707 Hillsborough Street | Amount of Each Disbursement this Period 2257.36 |
| | City Raleigh State NC Zip Code 27605- | |
| | Purpose of Disbursement Room/Food for Exec. Comm. Meeting | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | ROOM/FOOD FOR EXEC. COMM. MEETING |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) I365 Inc. | Transaction ID: 10216.E31868 Date of Disbursement 02 / 02 / 2011 |
| | Mailing Address 15422 Collections Center Drive | Amount of Each Disbursement this Period 459.39 |
| | City Chicago State IL Zip Code 60693- | |
| | Purpose of Disbursement Computer Back Up Protection | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | COMPUTER BACK UP PROTECTI-ON |

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) | 3754.57 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER: (check only one)

PAGE 30 / 49

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input 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)
North Carolina Republican Party

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) I365 Inc. <hr/> Mailing Address 15422 Collections Center Drive <hr/> City Chicago State IL Zip Code 60693- <hr/> Purpose of Disbursement Computer Back Up Protection Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 10228.E31988 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 465.10 |
| | Category/ Type COMPUTER BACK UP PROTECTI- ON |
| | Full Name (Last, First, Middle Initial) Mrs. Karen G. Langham <hr/> Mailing Address 4737 Royal Troon Drive <hr/> City Raleigh State NC Zip Code 27604-5845 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Amount of Each Disbursement this Period 1330.25 | |
| Category/ Type PAYROLL | Transaction ID: 10314.E32077 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 1 1 |
| Amount of Each Disbursement this Period 1814.79 | Category/ Type PAYROLL |

| | |
|---|--|
| B. Full Name (Last, First, Middle Initial) Mrs. Karen G. Langham <hr/> Mailing Address 4737 Royal Troon Drive <hr/> City Raleigh State NC Zip Code 27604-5845 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 10314.E32076 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 1330.25 |
| | Category/ Type PAYROLL |
| | Full Name (Last, First, Middle Initial) Mrs. Karen G. Langham <hr/> Mailing Address 4737 Royal Troon Drive <hr/> City Raleigh State NC Zip Code 27604-5845 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Amount of Each Disbursement this Period 1814.79 | Category/ Type PAYROLL |

| | |
|---|--|
| C. Full Name (Last, First, Middle Initial) Mrs. Karen G. Langham <hr/> Mailing Address 4737 Royal Troon Drive <hr/> City Raleigh State NC Zip Code 27604-5845 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 10314.E32077 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 1814.79 |
| | Category/ Type PAYROLL |
| | Full Name (Last, First, Middle Initial) Mrs. Karen G. Langham <hr/> Mailing Address 4737 Royal Troon Drive <hr/> City Raleigh State NC Zip Code 27604-5845 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Amount of Each Disbursement this Period 1814.79 | Category/ Type PAYROLL |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 3610.14 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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 checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input 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)
North Carolina Republican Party

| | |
|---|--|
| <p>A. Full Name (Last, First, Middle Initial) Met Life Small Business Center</p> <p>Mailing Address PO Box 804466</p> <p>City Kansas City State MO Zip Code 64180-4466</p> <p>Purpose of Disbursement Employee Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: 10308.E32033 Date of Disbursement 02 / 23 / 2011</p> <p>Amount of Each Disbursement this Period 522.63</p> <p>EMPLOYEE INSURANCE</p> |
| <p>B. Full Name (Last, First, Middle Initial) Metro Mailing and Printing</p> <p>Mailing Address 109 Winona Street</p> <p>City Charlotte State NC Zip Code 28203-</p> <p>Purpose of Disbursement Invitations for Party Fund. Event</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: 10228.E31989 Date of Disbursement 02 / 23 / 2011</p> <p>Amount of Each Disbursement this Period 1556.72</p> <p>INVITATIONS FOR PARTY FUN-D. EVENT</p> |
| <p>C. Full Name (Last, First, Middle Initial) Neopost Inc.</p> <p>Mailing Address PO Box 45800</p> <p>City San Francisco State CA Zip Code 94145-0800</p> <p>Purpose of Disbursement Postage Meter Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: 10224.E31967 Date of Disbursement 02 / 15 / 2011</p> <p>Amount of Each Disbursement this Period 407.30</p> <p>POSTAGE METER RENTAL</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

2486.65

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 32 / 49

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input 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)
North Carolina Republican Party

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Neopost Inc. | Transaction ID: 10224.E31977 Date of Disbursement 02 / 21 / 2011 |
| | Mailing Address PO Box 45800 | Amount of Each Disbursement this Period 300.00 |
| | City San Francisco State CA Zip Code 94145-0800 | |
| | Purpose of Disbursement Postage for Postage Meter Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | POSTAGE FOR POSTAGE METER |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Mr. Russell Peck | Transaction ID: 10314.E32078 Date of Disbursement 02 / 15 / 2011 |
| | Mailing Address 1330 Dylan Heath Court | Amount of Each Disbursement this Period 2142.52 |
| | City Raleigh State NC Zip Code 27608- | |
| | Purpose of Disbursement Payroll Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | PAYROLL |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Mr. Russell Peck | Transaction ID: 10314.E32061 Date of Disbursement 02 / 23 / 2011 |
| | Mailing Address 1330 Dylan Heath Court | Amount of Each Disbursement this Period 210.40 |
| | City Raleigh State NC Zip Code 27608- | |
| | Purpose of Disbursement Conference Call & Cell Phone Reimbu Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | CONFERENCE CALL & CELL PHONE REIMBU |

| | | |
|--|---|---------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 2652.92 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER: (check only one)

PAGE 33 / 49

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input 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)
North Carolina Republican Party

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Mr. Russell Peck | Transaction ID: 10314.E32079 Date of Disbursement 02 / 28 / 2011 |
| | Mailing Address 1330 Dylan Heath Court | Amount of Each Disbursement this Period 2142.52 |
| | City Raleigh State NC Zip Code 27608- | |
| | Purpose of Disbursement Payroll Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | PAYROLL |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Mrs. Wanda T. Shivers | Transaction ID: 10314.E32080 Date of Disbursement 02 / 15 / 2011 |
| | Mailing Address 4204 Stratford Drive | Amount of Each Disbursement this Period 1145.42 |
| | City Wilson State NC Zip Code 27896- | |
| | Purpose of Disbursement Payroll Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | PAYROLL |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Mrs. Wanda T. Shivers | Transaction ID: 10314.E32081 Date of Disbursement 02 / 28 / 2011 |
| | Mailing Address 4204 Stratford Drive | Amount of Each Disbursement this Period 1145.41 |
| | City Wilson State NC Zip Code 27896- | |
| | Purpose of Disbursement Payroll Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | PAYROLL |

| | | |
|--|---|---------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 4433.35 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 34 / 49

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input 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)
North Carolina Republican Party

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) Speedway Club at Mailing Address Charlotte Motor Speedway 5555 Concord Parkway South City Concord State NC Zip Code 28027- Purpose of Disbursement Food for Party Fundraising Event Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 10224.E31976 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 1000.00 FOOD FOR PARTY FUNDRAISING EVENT |

| | |
|--|--|
| B. Full Name (Last, First, Middle Initial) Strategic Fundraising Mailing Address 2625 Momentum Place City Chicago State IL Zip Code 60689- Purpose of Disbursement Generic Telemarket. Prospect Donors Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 10216.E31888 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 10.00 GENERIC TELEMARKET. PROSPECT DONORS |

| | |
|--|--|
| C. Full Name (Last, First, Middle Initial) Strategic Fundraising Mailing Address 2625 Momentum Place City Chicago State IL Zip Code 60689- Purpose of Disbursement Generic Telemarket. Prospect Donors Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 10224.E31958 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 35.00 GENERIC TELEMARKET. PROSPECT DONORS |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1045.00 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 35 / 49

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input 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)
North Carolina Republican Party

| | |
|--|---|
| <p>A. Full Name (Last, First, Middle Initial) Strategic Fundraising</p> <p>Mailing Address 2625 Momentum Place</p> <p>City Chicago State IL Zip Code 60689-</p> <p>Purpose of Disbursement Generic Telemarket. Prospect Donors</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: 10228.E31987 Date of Disbursement 02 / 23 / 2011</p> <p>Amount of Each Disbursement this Period 291.00</p> <p>GENERIC TELEMARKET. PROSP-ECT DONORS</p> |
| <p>B. Full Name (Last, First, Middle Initial) Strategic Fundraising</p> <p>Mailing Address 2625 Momentum Place</p> <p>City Chicago State IL Zip Code 60689-</p> <p>Purpose of Disbursement Generic Telemarket. Prospect Donors</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: 10302.E32027 Date of Disbursement 02 / 23 / 2011</p> <p>Amount of Each Disbursement this Period 23.00</p> <p>GENERIC TELEMARKET. PROSP-ECT DONORS</p> |
| <p>C. Full Name (Last, First, Middle Initial) Time Warner Cable</p> <p>Mailing Address PO Box 70873</p> <p>City Charlotte State NC Zip Code 28272-0804</p> <p>Purpose of Disbursement Cable Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: 10216.E31887 Date of Disbursement 02 / 02 / 2011</p> <p>Amount of Each Disbursement this Period 124.43</p> <p>CABLE SERVICE</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

438.43

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 36 / 49

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input 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)
North Carolina Republican Party

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) US Postmaster | Transaction ID: 10314.E32058 Date of Disbursement 02 / 23 / 2011 |
| | Mailing Address Capitol Station 311 New Bern Avenue | Amount of Each Disbursement this Period 500.00 |
| | City Raleigh State NC Zip Code 27601- | |
| | Purpose of Disbursement Postage for Business Reply Mail | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | POSTAGE FOR BUSINESS REPLY MAIL |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Valic | Transaction ID: 10224.E31971 Date of Disbursement 02 / 15 / 2011 |
| | Mailing Address c/o Chase Bank of Texas PO Box 201700 | Amount of Each Disbursement this Period 466.34 |
| | City Houston State TX Zip Code 77216- | |
| | Purpose of Disbursement Employee IRA Contribution | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | EMPLOYEE IRA CONTRIBUTION |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Valic | Transaction ID: 10224.E31970 Date of Disbursement 02 / 15 / 2011 |
| | Mailing Address c/o Chase Bank of Texas PO Box 201700 | Amount of Each Disbursement this Period 126.34 |
| | City Houston State TX Zip Code 77216- | |
| | Purpose of Disbursement Employer IRA Contribution | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | EMPLOYER IRA CONTRIBUTION |

| | | |
|--|---|---------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 1092.68 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
North Carolina Republican Party

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Direct Mail Systems | Nature of Debt (Purpose): Generic Donor Direct Mail Expense |
| Mailing Address 12450 Automobile Boulevard | |
| City State ZIP Code Clearwater FL 34622- | |

| | | |
|---|---------------------------------------|--|
| Outstanding Balance Beginning This Period 0.00 | Transaction ID: LS10315.E32098 | |
| Amount Incurred This Period 8731.02 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 8731.02 |

| | |
|--|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Federal Express | Nature of Debt (Purpose): Postage/Shipping-Checks |
| Mailing Address PO Box 371461 | |
| City State ZIP Code Pittsburgh PA 15250-7461 | |

| | | |
|--|---------------------------------------|---|
| Outstanding Balance Beginning This Period 33.96 | Transaction ID: LS10216.E31899 | |
| Amount Incurred This Period 0.00 | Payment This Period 33.96 | Outstanding Balance at Close of This Period 0.00 |

| | |
|--|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor City of Raleigh | Nature of Debt (Purpose): Utilities |
| Mailing Address PO Box 71081 | |
| City State ZIP Code Charlotte NC 28272-1081 | |

| | | |
|--|---------------------------------------|---|
| Outstanding Balance Beginning This Period 42.59 | Transaction ID: LS10224.E31962 | |
| Amount Incurred This Period 0.00 | Payment This Period 42.59 | Outstanding Balance at Close of This Period 0.00 |

| | |
|--|---------|
| 1) SUBTOTALS This Period This Page (optional)..... | 8731.02 |
| 2) TOTALS This Period (last page this line number only)..... | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | |

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
North Carolina Republican Party

| | | | |
|--|-------------|------------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor City of Raleigh | | | Nature of Debt (Purpose): Utilities |
| Mailing Address PO Box 71081 | | | |
| City Charlotte | State NC | ZIP Code 28272-1081 | |

| | | | |
|--|--|---|--|
| Outstanding Balance Beginning This Period <input type="text" value="0.00"/> | | Transaction ID: LS10315.E32096 | |
| Amount Incurred This Period <input type="text" value="25.45"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="25.45"/> | |

| | | | |
|--|-------------|------------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Time Warner Cable | | | Nature of Debt (Purpose): Cable Service |
| Mailing Address PO Box 70873 | | | |
| City Charlotte | State NC | ZIP Code 28272-0804 | |

| | | | |
|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="124.43"/> | | Transaction ID: LS10216.E31887 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="124.43"/> | Outstanding Balance at Close of This Period <input type="text" value="0.00"/> | |

| | | | |
|--|-------------|------------------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Time Warner Cable | | | Nature of Debt (Purpose): Cable Service |
| Mailing Address PO Box 70873 | | | |
| City Charlotte | State NC | ZIP Code 28272-0804 | |

| | | | |
|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="0.00"/> | | Transaction ID: LS10315.E32099 | |
| Amount Incurred This Period <input type="text" value="124.43"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="124.43"/> | |

| | |
|--|-------------------------------------|
| 1) SUBTOTALS This Period This Page (optional)..... | <input type="text" value="149.88"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input type="text"/> |

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

| | |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 40 / 49 |
| | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)
North Carolina Republican Party

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Strategic Fundraising | Nature of Debt (Purpose): Generic Telemarket. Prospect Donors |
| Mailing Address 2625 Momentum Place | |
| City Chicago State IL ZIP Code 60689- | |

| | | |
|---|---|--|
| Outstanding Balance Beginning This Period <input type="text" value="10.00"/> | Transaction ID: LS10216.E31888 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="10.00"/> | Outstanding Balance at Close of This Period <input type="text" value="0.00"/> |

| | |
|--|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Strategic Fundraising | Nature of Debt (Purpose): Generic Telemarket. Prospect Donors |
| Mailing Address 2625 Momentum Place | |
| City Chicago State IL ZIP Code 60689- | |

| | | |
|--|--|---|
| Outstanding Balance Beginning This Period <input type="text" value="0.00"/> | Transaction ID: LS10315.E32102 | |
| Amount Incurred This Period <input type="text" value="1125.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="1125.00"/> |

| | |
|--|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Strategic Fundraising | Nature of Debt (Purpose): Generic Telemarketing Donors |
| Mailing Address 2625 Momentum Place | |
| City Chicago State IL ZIP Code 60689- | |

| | | |
|--|--|---|
| Outstanding Balance Beginning This Period <input type="text" value="0.00"/> | Transaction ID: LS10315.E32101 | |
| Amount Incurred This Period <input type="text" value="3308.49"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="3308.49"/> |

| | |
|--|--------------------------------------|
| 1) SUBTOTALS This Period This Page (optional)..... | <input type="text" value="4433.49"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input type="text"/> |

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
North Carolina Republican Party

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Diamond Springs | Nature of Debt (Purpose): Water Service |
| Mailing Address 2400 Charles City Road PO Box 38668 | |
| City Richmond State VA ZIP Code 23231- | |

| | | |
|--|---------------------------------------|---|
| Outstanding Balance Beginning This Period 20.66 | Transaction ID: LS10216.E31898 | |
| Amount Incurred This Period 0.00 | Payment This Period 20.66 | Outstanding Balance at Close of This Period 0.00 |

| | |
|--|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Diamond Springs | Nature of Debt (Purpose): Water Service |
| Mailing Address 2400 Charles City Road PO Box 38668 | |
| City Richmond State VA ZIP Code 23231- | |

| | | |
|---|---------------------------------------|--|
| Outstanding Balance Beginning This Period 0.00 | Transaction ID: LS10315.E32097 | |
| Amount Incurred This Period 20.66 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 20.66 |

| | |
|---|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor A Professional Conference Call | Nature of Debt (Purpose): Conference Calls County Chairmen |
| Mailing Address PO Box 2939 | |
| City Southampton State NY ZIP Code 11969- | |

| | | |
|--|---------------------------------------|---|
| Outstanding Balance Beginning This Period 38.66 | Transaction ID: LS10224.E31961 | |
| Amount Incurred This Period 0.00 | Payment This Period 38.66 | Outstanding Balance at Close of This Period 0.00 |

| | | |
|--|---|-------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 20.66 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

| | |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 42 / 49 |
| | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)
North Carolina Republican Party

| | |
|---|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor A Professional Conference Call | Nature of Debt (Purpose): Conference Calls County Chairmen |
| Mailing Address PO Box 2939 | |
| City Southampton State NY ZIP Code 11969- | |

| | | |
|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="0.00"/> | Transaction ID: LS10315.E32095 | |
| Amount Incurred This Period <input type="text" value="302.33"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="302.33"/> |

| | |
|---|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Holiday Inn-Brownstone | Nature of Debt (Purpose): Room/Food for Exec. Comm. Meeting |
| Mailing Address 1707 Hillsborough Street | |
| City Raleigh State NC ZIP Code 27605- | |

| | | |
|---|---|--|
| Outstanding Balance Beginning This Period <input type="text" value="2257.36"/> | Transaction ID: LS10216.E31900 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="2257.36"/> | Outstanding Balance at Close of This Period <input type="text" value="0.00"/> |

| | |
|--|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Alltech | Nature of Debt (Purpose): Toner Cartridges |
| Mailing Address PO Box 33547 | |
| City Raleigh State NC ZIP Code 27636-3547 | |

| | | |
|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="249.44"/> | Transaction ID: LS10216.E31897 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="249.44"/> | Outstanding Balance at Close of This Period <input type="text" value="0.00"/> |

| | |
|--|-------------------------------------|
| 1) SUBTOTALS This Period This Page (optional)..... | <input type="text" value="302.33"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input type="text"/> |

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
North Carolina Republican Party

| | | | |
|--|-------|------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Triad Telecom | | | Nature of Debt (Purpose): Telephone Service |
| Mailing Address PO Box 2673 | | | |
| City | State | ZIP Code | |
| Greensboro | NC | 27402-2673 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: LS10216.E31867 | |
| 812.23 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 812.23 | 0.00 | |

| | | | |
|--|-------|------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Triad Telecom | | | Nature of Debt (Purpose): Telephone Service |
| Mailing Address PO Box 2673 | | | |
| City | State | ZIP Code | |
| Greensboro | NC | 27402-2673 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: LS10315.E32100 | |
| 0.00 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 837.26 | 0.00 | 837.26 | |

| | | | |
|--|-------|----------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor I365 Inc. | | | Nature of Debt (Purpose): Computer Back Up Protection |
| Mailing Address 15422 Collections Center Drive | | | |
| City | State | ZIP Code | |
| Chicago | IL | 60693- | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: LS10216.E31868 | |
| 459.39 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 459.39 | 0.00 | |

| | | |
|--|---|--------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 837.26 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

| | |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 44 / 49 |
| | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)
North Carolina Republican Party

| | | | |
|---|-------------|--------------------|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. Riccardo Diaz | | | Nature of Debt (Purpose): Web Video-DNC Convention |
| Mailing Address 923 Grandview Avenue | | | |
| City Union | State NJ | ZIP Code 07083- | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: LS10216.E31893 | |
| 499.95 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 499.95 | 0.00 | |

| | |
|--|----------|
| 1) SUBTOTALS This Period This Page (optional)..... | 0.00 |
| 2) TOTALS This Period (last page this line number only)..... | 14474.64 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | 0.00 |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | 14474.64 |

METHOD OF ALLOCATION FOR:

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)
 North Carolina Republican Party

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

- Presidential-Only Election Year (28% Federal)
- Presidential and Senate Election Year (36% Federal)
- Senate-Only Election Year (21% Federal)
- Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Flat Minimum Federal Percentage

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

or

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %

Nonfederal..... %

This ratio applies to (check all that apply):

- Administrative
- Generic Voter Drive
- Public Communications Referencing Party Only

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 North Carolina Republican Party

| NAME OF ACCOUNT | DATE OF RECEIPT | TOTAL AMOUNT TRANSFERRED |
|-----------------------------------|--|--------------------------|
| NC Republican Party State Account | M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 1 1 | 2817.59 |

BREAKDOWN OF TRANSFER RECEIVED

| | | |
|---|---------|---------------------------------|
| i) Total Administrative | 2817.59 | Transaction ID: H310302.C369253 |
| ii) Generic Voter Drive | | Transaction ID: |
| iii) Exempt Activities | | Transaction ID: |
| iv) Direct Fundraising (List Activity or Event Identifier) | | |
| a) _____ | | Transaction ID: |
| b) _____ | | Transaction ID: |
| c) Total Amount Transferred for Direct Fundraising | | |
| v) Direct Candidate Support (List of Activity or Event Identifier) | | |
| a) _____ | | Transaction ID: |
| b) _____ | | Transaction ID: |
| c) Total Amount Transferred For Direct Candidate Support | | |
| vi) Public Communications Referring Only to Party (Made by PAC) | | Transaction ID: |

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

| | |
|--|---------|
| TOTAL This Period (Administrative) | 2817.59 |
| TOTAL This Period (Generic Voter Drive) | 0.00 |
| TOTAL This Period (Exempt Activities) | 0.00 |
| TOTAL This Period (Direct Fundraising) | 0.00 |
| TOTAL This Period (Direct Candidate Support) | 0.00 |
| TOTAL This Period (Public Communications Referring Only to Party) | 0.00 |
| TOTAL This Period (Total Amount Transferred) | 2817.59 |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
North Carolina Republican Party

| | | | | | |
|--|-------------|------------------------|---|--|--|
| A. Full Name (Last, First, Middle Initial) Triad Telecom | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address PO Box 2673 | | | Allocated Activity or Event Year-To-Date 4848.39 | | |
| City Greensboro | State NC | Zip Code 27402-2673 | Date M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 1 1 | | |
| Purpose of Disbursement: Telephone Service | | | Transaction ID: H410216.E31867 | | |
| Activity or Event Identifier: ADMINISTRATION B 1 | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 227.42 | | 584.81 | | 812.23 |

| | | | | | |
|--|-------------|------------------------|---|--|--|
| B. Full Name (Last, First, Middle Initial) Alltech | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address PO Box 33547 | | | Allocated Activity or Event Year-To-Date 4036.16 | | |
| City Raleigh | State NC | Zip Code 27636-3547 | Date M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 1 1 | | |
| Purpose of Disbursement: Toner Cartridges | | | Transaction ID: H410216.E31897 | | |
| Activity or Event Identifier: ADMINISTRATION B 1 | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 69.84 | | 179.60 | | 249.44 |

| | | | | | |
|--|-------------|------------------------|---|--|--|
| C. Full Name (Last, First, Middle Initial) Staples Credit Plan | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address PO Box 689020 | | | Allocated Activity or Event Year-To-Date 7665.09 | | |
| City Des Moines | State IA | Zip Code 50368-9020 | Date M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 1 1 | | |
| Purpose of Disbursement: Office Supplies | | | Transaction ID: H410224.E31959 | | |
| Activity or Event Identifier: ADMINISTRATION B 1 | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 147.18 | | 378.47 | | 525.65 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 444.44 | | 1142.88 | | 1587.32 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| | | | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
North Carolina Republican Party

| | | | | | |
|--|-------------|------------------------|---|--|--|
| A. Full Name (Last, First, Middle Initial) City of Raleigh | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address PO Box 71081 | | | Allocated Activity or Event Year-To-Date 4935.68 | | |
| City Charlotte | State NC | Zip Code 28272-1081 | Date <input type="text" value="02"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> | | |
| Purpose of Disbursement: Utilities | | | Transaction ID: H410224.E31962 | | |
| Activity or Event Identifier: ADMINISTRATION B 1 | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 11.93 | | 30.66 | | 42.59 |

| | | | | | |
|--|-------------|------------------------|---|--|--|
| B. Full Name (Last, First, Middle Initial) City of Raleigh | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address PO Box 71081 | | | Allocated Activity or Event Year-To-Date 4893.09 | | |
| City Charlotte | State NC | Zip Code 28272-1081 | Date <input type="text" value="02"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> | | |
| Purpose of Disbursement: Utilities | | | Transaction ID: H410224.E31963 | | |
| Activity or Event Identifier: ADMINISTRATION B 1 | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 12.52 | | 32.18 | | 44.70 |

| | | | | | |
|--|-------------|--------------------|---|--|--|
| C. Full Name (Last, First, Middle Initial) Jani-King of Raleigh Durham | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 801 Jones Franklin Road, Suite 230 | | | Allocated Activity or Event Year-To-Date 5275.68 | | |
| City Raleigh | State NC | Zip Code 27606- | Date <input type="text" value="02"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> | | |
| Purpose of Disbursement: Cleaning Service | | | Transaction ID: H410224.E31966 | | |
| Activity or Event Identifier: ADMINISTRATION B 1 | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 95.20 | | 244.80 | | 340.00 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 119.65 | | 307.64 | | 427.29 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| | | | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
North Carolina Republican Party

A. Full Name (Last, First, Middle Initial)
Progress Energy Carolinas, Inc.

Mailing Address
PO Box 2041

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Raleigh | NC | 27698-0001 |

Purpose of Disbursement:
Utilities

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

7139.44

Activity or Event Identifier:
ADMINISTRATION B 1

Date

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 | / | 1 | 5 | / | 2 | 0 | 1 | 1 |

Transaction ID: H410224.E31968

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 521.85 | | 1341.91 | | 1863.76 |

B. Full Name (Last, First, Middle Initial)
ADT Security Services

Mailing Address
PO Box 70834

| | | |
|-----------|-------|------------|
| City | State | Zip Code |
| Charlotte | NC | 28272-0834 |

Purpose of Disbursement:
Security System

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

7700.04

Activity or Event Identifier:
ADMINISTRATION B 1

Date

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 | / | 2 | 3 | / | 2 | 0 | 1 | 1 |

Transaction ID: H410228.E31986

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 9.79 | | 25.16 | | 34.95 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 531.64 | | 1367.07 | | 1898.71 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

| | | |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
| 1095.73 | 2817.59 | 3913.32 |