Disclosure	Report	Cover
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Amendment □ Yes

d. Period Begin Balance

August 2008

\$

Use this form for general report and committee information, must be signed and submitted along with other detailed forms. Do not use this form to update information 1. Committee Information c. ID Number a, Full Name d. Date Filed b. Mailing Address (include City, State and Zip Code) 13 Ipine C. . Phone Number フィス 4. Period End Date (mm/dd/yy) | 5. Treasurer Pull Name 3. Period Start Date (mm/dd/rv) 9. Type of Report (check only one type of report from one calegory) 6. Type of Committee (Check One) 😅 Referendum State/County Candidate Campaign Party Municipal Organizationa<sup>1</sup> Organizational PAC Organizational Referendum Pre-referendum Quarterly Thirty-five day Independent Expenditure I Joint Fundraiser Final First Pre-primary Legal Expense Fund Supplemental Final Second Pre-election Annual 7. Type of Fund (if applicable check one) Third Pre-runoff Special Special Semi-annual Fourth Booster Fund Semi-annual Mid Year Building Fund 10. Special Report Name Mid Year Year End Year End Final Other: Special ☐ Final 8 Number of Pundrasers this Report Special 11. Account Information 1. Account Information a. Financial Institution Full Name Financial Institution Full Name c. Account Code b. Purpose . Purpose Account Code

CRO-1000

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.

d. Period Begin Balance

Printed Name of Signer	Signature of Appointed Treasurer	2/21/13 Date
OR OFFICE USE ONLY		

Delivery Method Employee: Date Received: Normal Mail Registered Mail Date Postmarked: Employee: Hand Delivered Electronically Filed Date Scanned: Employee: ☐ Signer has not received Employee: Date Data Entered: mandatory training

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

## Detailed Summary Use this form to summarize all disclosure reporting forms and to total monetary information

Amendment

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No

1. Committee Full Name (and Fund if applicable)	2. Type of 1	Keport	3. ID Number
Committee to Start on		tt. 6	
Start of Election Cycle: January 1,		Total this Reporting Perior	Total this d Election Cycle
4) Cash on Hand at Start W		\$ 127.1	4 \$
RECEIPIS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 0-	\$
6) Contributions from Individuals	(CRO-1210)	\$ /	\$ 450 -
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$
8) Contributions from Other Political Committees	(CRO-1230)	s	\$
9) Loan Proceeds	(CRO-1410)	s )	\$5,353 21
10) Refunds/Reimbursements to the Committee	(CRO-1240)	S	\$
11) Other Receipt Sources	No. of the last of	Salar Assessment Records	atina kanang tantanana di matamana ang kanangan kanangan kanangan kanangan kanangan kanangan kanangan kanangan
11a) Interest on Bank Accounts	(CRO-1250)	\$ - 0 -	S
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$	S
11c) Outside Sources of Income	(CRO-1250)	\$	S
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	\$
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,	11d and 11e)	\$	\$5,803.71
EXPENDITURES			Andrew Control of the
13) Disbursements	mana - 1 de 1921 del companyona i mana 1 co		A Company of the Comp
13a) Operating Expenditures	(CRO-1310)	s 40 -	\$ 5,536 17
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	\$
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$
15) Loan Repayments	(CRO-1420)	\$	\$
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$	\$ 180 -
17) In-Kind Contributions	(CRO-1510)	\$	\$
<b>18) TOTAL EXPENDITURES</b> (Add lines 13a, 13b, 13c, 14, 1		£ ::==	\$ 5, 7 16 17
19) Cash on Hand at End (Add lines 4 and 12 together, then sul	otract line 18)	\$ 87.1	£ \$ 87.14
ADDITIONAL INFORMATION  20) Non-Monotony Ciffs Civen to Other Committees	(CBU 1334)	e sa sentina estado de contra de con	
20) Non-Monetary Gifts Given to Other Committees 21) Outstanding Loops (incl. ones from other campaigns)	(CRO-1430)	\$ 5 170	Z/
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$5,173	
22) Debts and Obligations owed by the Committee	(CRO-1610) (CRO-1620)	\$	
23) Debts and Obligations owed to the Committee			
24) Account Transfers Within the Committee	(CRO-1710)	\$	\$
25) Administrative Support	(CRO-1710)	\$	\$
26) Forgiven Loans	(CRO-1440) (CRO-2220)	\$	- \$
27) 48-Hour Notice Reports Sum 28) Contributions to be Refunded	(CRO-2220)	\$	-   <del>\$</del>   \$
20) Contributions to be Retunded	(CAU-1213)	Ψ	Ψ

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	coordinated party ex		ee for o	peranng exp	benses, contribu	nons	to candidate/political	
	all krain Establish							
7	1		1	/ <b>/</b>	11.			gerien:
mm. +	loe to	Flec	_		Hy more			
3. Type of Oish	earcasent Ubaro	use separate Ck	(2)24K/16	fares for a	ach bive of Dis	la esta	mest)	
Operating Exp		tributions to Candida				ordi <b>na</b>	ted Party Expenditures	150050
4. Payer buton			÷:,:Ц					
	failing Address & Ph	one		b. Coordinate	ed Committee Nan	ie	d. Comments	
(include city, state,	, & zip)			-			Bak Jee	
Brand	Bonc	a I wont	<u>'</u>	c. Level Regis	stered (Specify)		· Pank fee	~
(1)	Banky Cor	0.11-21		☐ Federal	County:			
Mile	rooty lov			☐ State	Municip	ality:	e. Election Sum to Date	
Do	ha No						\$ 40	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (	mm/dd/yyyy)	i. Amount	k. R	Lequired Remarks	_
	g. 1 41 m uz 1 Ly 20421		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		\$	1		
		<u> </u>	-		\$	+		
								3.65
4. Payes futors		A N. C.	<u>.                                    </u>		Remove		l. a	
a. Full Name, Mail (include city, sta	ing Address & Phone	·		b. Coordinate	ed Committee Nam	ıe	d. Comments	
(Hacituse City); Sta	med on refa			1				
				c. Level Regis	stered (Specify)		1	
				☐ Federal	County:			
				State	☐ Municip	ality:	e. Election Sum to Date	
							\$	
f. Account Code	g. Form of Payment	h, Purpose Code	i. Date (	mm/dd/yyyy)	j. Amount	k. R	l leguired Remarks	
	B				\$	+		
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de Payer Intern					Remove			
	ing Address & Phone			b. Coordinate	ed Committee Nam	ie	d. Comments	
(include city, sta	te, & zip)			4				
				c Level Parti	stered (Specify)		-	
				Federal	County:		1	
				☐ State	Municip	ality:	e. Election Sum to Date	
							\$	
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f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (	mm/dd/yyyy)		k. R	tequired Remarks	
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					\$			
5 intal only is	is Page						\$ 40	
Manager Company and the state of the company of the state	. CRO. ISTO Pescs							_
Control of the Contro	line 13a of Detailed Sun	imary Page CRO-11	00 if Ope	rating Expense	es)			
	line 13b of Detailed Sun		-			n)	\$ 40 -	
(This line goes in	line 13c of Detailed Sum	mary Page CRO-11	00 if Coo	rdinated Party	Expenditures)		10	
7. Hitrasia C	deles (Las destina			days)				
A* - Media	B* - Printi		C* - F	undraising	-		ther Candidate	
E - Salaries	F* - Equip			litical Party			ng Public Office Expense	
I - Postage	J - Penaltie	es	K* - ()	Mice Expen	ses U*-D	onat	ion to Legal Expense Fu	nd

K\* - Office Expenses

Q\* - Donation to Legal Expense Fund

Outstan	iding Loans	Pg of _	Ameadment  Yes No
Use this for	m to report any outstanding loans received during	a previous reporting period and	until the loan is paid in full.
	ee Erul kanne (ami kuma Usppilesike)		2. 10 Number   12. 17. 11. 11. 11. 11.
Omn	. Hoe to Elect Elas	· //	
~~	information	Add Remove	
	Mailing Address & Phone	b. Job Title/Profession	d. Comments
	y, state, & zip)	01200 1100 1100 0000	10 1
		1	Dry. Lon
Elaine C. Hyman 3203 Rockford Pd		NO. 3 P. 1 Acr. 1 and 10 P. 1	e. Starf Date (mm/dd/yyyy)
-25	S P- Kr 1 Rd	c. Employer's Name/Specific Field	3/2/ ZO17
			f. End Date (mm/dd/yyyy)
Ja	er /ma, NC 27713		•
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$3,297 7]	\$3, 117. 77
k. Full Name	of Lending Institution	<u> </u>	1. Loan Number
the second secon	nitrypation	Add Remove	
	Malling Address & Phone  y, state, & zip)	b. Job Title/Profession	d. Comments
•		_	2Nd CON
	(Kine ( . Al. )		e. Start Date (mm/dd/yyyy)
	Trine C. Aman 203 Rockford Ro	c. Employer's Name/Specific Field	4/29/2012
		1	f. End Date (mm/dd/yyyy)
	Juhan, NC 27713		
g. Rate	h. Security Piedged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$ 2,055 54	\$ 2,0 55.54
k. Full Name (	of Lending Institution	3.80.00.00.00.00	I. Loan Number
s) e karadie vije	nformation =	XIII Remove	
a. Full Name,	Malling Address & Phone	b. Job Title/Profession	d. Comments
(include city	, state, & zip)	_	
			e. Start Date (mm/dd/yyyy)
		c. Employer's Name/Specific Field	
			f. End Date (nm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$	\$
k. Full Name o	of Lending Institution		l. Loan Number
			· · · · · · · · · · · · · · · · · · ·

CRO-1430

4. Total only this Pape

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