Disclosure Report Cover

Ame	n dm e	nt	
	'es	ſΧΙ	No

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 undate information

		ate information.								
1. Committee Info a. Full Name	rmation	5	1000							
a. Full Name COMMITTEE TO	Y EI ECT	DEI MATTIOI	Ŧ						e. I	D Number
b. Mailing Address 1108 CHOWAN		ity, State and Zir	p Code)					d. I	Date Filed
DURHAM, NC	AVE									01/31/2014
,									e. F	Phone Number
2. Report Year 3.	. Period Sta	art Date (mm/dd/	yy)	4. Period	I End Da	ate (mn	n/dd/yy)	5. Treasur	rer J	Full Name
2013	(09/24/2013	Non		12/31/2			ANNIE W		······································
6. Type of Commit				pe of Repor	et (c	heck c	mly one	tune of ref	ort j	from one category)
X Candidate Campa☐ Joint Fundraiser	oaign 🔲 Pa	Party	Munic	cipal		State/	/County		Ref	fe rendum
Joint Fundraiser Referendum				Organizatio)rganizatio	nal	_	Organizational
7. Type of Fund		egal Expense Fund		Thirty-five	-	l `	uarterly			Pre-referendum
"Booster Fund"	(1) upproce	Die, eneux one,	H	Pre-primar	-		First Second		1-	Final
Building Fund		Ţ	H	Pre-election Pre-runoff		H	Second Third			Supplemental Final
Presidential Elect			1	Semi-annua		H	Third Fourth	į	1	Annual Special
■ NC Public Campa				Mid Ye		_	rourth emi-annual			Special
		, s = -		Year E			Mid Yea		10.	Special Report Nam
Other:				Final	11.2	片	Year En		lu.	Special Keport Ivan
8. Number of Fund	draisers thi	is Report	ō	Special	J	Fin	inal	1		
	0		1	-	1		pecial	,		
3. Account Informa				_	3. Acc	1	nformati	n n	<u></u>	
a. Financial Institut	ition Full Na							ion on Full Nam	1 e	
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b. Purpose	2	c. Account Code	le > ,	, , , , , , , , , , , , , , , , , , , 	b. Purp	oose	Activity of the second	1	c. A	ccount Code
CAMPAIGN FUN	1DS		D		RECE	IVE C	CAMPAI		-	P
		d. Period Begin			FUND					
			Baian	ce	1			1		eriod Begin Balance
		\$				-			\$	
CERTIFICATION Legrify that the				1989		**************************************		:		
Chapter 163 of the	Committee	or Fund is in com	nplianc	e with all a	ıpplicab	le prov	visions c	of Article 22	2A, 2	22B & 22D-22M of
Chapter 163 of the	ne NC Gener	eral Statutes and t	that no	o funds are	e commin	ngled w	with proh	hibited or or	ther	non-disclosed
Tunus. I tururer e	certify that t	this report is com	nplete,	true arronco	orrect ar	nd that	t Nhave	been traine	d by	the NC State Board
_ Annie		lliAms		11	u Mi	-/	hel	Or ass		01/31/2014
	ted Name of S	Signer PERSON	-	Signi	nature of A	Appoin	ted Treas	urer	_	Date
FOR OFFICE USE		¶"I hmitwψ.	4		<u></u>			2.1		
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Date Postmarked	d: DL	JRHAM BC	ЭE	Employ	yee: _	- <u> </u>		[]	Regis	istered Mail d Delivered
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Date Data Entere	red: _	ing the second s		Employ			· · · · · · · · · · · · · · · · · · ·		_	er has not received
Diagga Nota	71 · C		-					r	mand	datory training
Please Note:	This form ca	annot be used to	ameno	d committee	e inform	nation s	such as	the commit	ttee a	address, treasurer,
You	433131411	int treasurer, custo	odian (of books in	iformation	on, or a	account	in formation	n.	
TOU I	must amen	nd the Statement o	of Orga	inization (<u> </u>	<u> ЭОА-Е</u>)	<i>)</i> to make	: committee	: cha	nges.

Detailed Summary

Amendment

☐ Yes 🏿 No

☐ Yes Use this form to summarize all disclosure reporting forms and to total monetary information 1. Committee Full Name (and Fund if applicable) 2. Type of Report 3. ID Number COMMITTEE TO ELECT DEL MATTIOLI 2013 Year End Semi-Annual Total this Total this 2012 Start of Election Cycle: January 1, Reporting Period **Election Cycle** 4) Cash on Hand at Start 439.74 0.00 RECEIPTS 5) Aggregated Contributions from Individuals (CRO-1205) 610.00 1,336.00 6) Contributions from Individuals (CRO-1210) \$ \$ 600.00 4,039.50 7) Contributions from Political Party Committees (CRO-1220) \$ 0.00 \$ 0.00 8) Contributions from Other Political Committees (CRO-1230) \$ \$ 0.00 0.00 9) Loan Proceeds (CRO-1410) \$ 0.00 \$ 0.00 0) Refunds/Reimbursements to the Committee (CRO-1240) 0.00 \$ 0.00 1) Other Receipt Sources 11a) Interest on Bank Accounts (CRO-1250) 0.00 0.00 11b) Contributions from Not-For-Profit Organizations (CRO-1250) \$ \$ 0.00 0.00 11c) Outside Sources of Income (CRO-1250) \$ \$ 200.00 200.00 11d) Legal Expense Fund - Other Sources (CRO-1270)\$ 0.00 \$ 0.00 11e) Exempt Purchase Price Sales (CRO-1265)\$ 0.00 \$ 0.00 2) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e) 1,410.00 5,575.50 EXPENDITURES 3) Disbursements 13a) Operating Expenditures (CRO-1310) \$ \$ 1.652.07 4,638.33 13b) Contributions to Candidates/Political Committees (CRO-1310) \$ \$ 0.00 0.00 13c) Coordinated Party Expenditures (CRO-1310) \$ \$ 0.00 0.00 4) Aggregated Non-Media Expenditures (CRO-1315) \$ \$ 24.45 49.45 5) Loan Repayments (CRO-1420) \$ \$ 0.00 0.00 6) Refunds/Reimbursements from the Committee (CRO-1320)\$ \$ 1,683.00 1,683.00 7) In-Kind Contributions (CRO-1510) \$ 475.00 1,189.50 8) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) \$ 3,834.52 7,560.28 9) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) \$ (1,984.78)(1,984.78)ADDITIONAL INFORMATION 20) Non-Monetary Gifts Given to Other Committees (CRO-1330) \$ 0.00 21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)\$ 3,058.72 22) Debts and Obligations owed by the Committee (CRO-1610) \$ 0.00 23) Debts and Obligations owed to the Committee (CRO-1620) 0.00 24) Account Transfers Within the Committee (CRO-1720) \$ 0.00 25) Administrative Support (CRO-1710) \$ 0.00 0.00 26) Forgiven Loans (CRO-1440) \$ 0.00 0.00 \$ 27) 48-Hour Notice Reports Sum (CRO-2220) 0.00 \$ 0.00 28) Contributions to be Refunded (CRO-1215) \$ 1,000.00 4,185.45

Amendment Aggregated Contributions from Individuals Page 1 of X No ☐ Yes

Optional form used to report NC Contributions From Individuals of \$50 or less

			Fund if applicable)	From malviduals of 5.		2. ID !	Number	
		EE TO ELECT D					·······································	
20								
		or Information	- F	18 8 80 25 T				
	nena Add	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (m m/dd	/уууу)	f. Amount	
☐ R	Remove	D	Check		11/04/201	3	\$	50.00
☐ R	Add Remove	D	Check		10/04/201	.3	\$	50.00
<u> </u>	Add Remove	D	Check		10/15/201	.3	\$	25.00
	kdd kemove	D	Check		10/05/201	3	\$	25.00
1—	lemove	D	Cash		10/05/201	3	\$	25.00
1=	dd emove	D	Check		10/02/201	3	\$	10.00
	dd emove	D	Check		10/05/201	3	\$	25.00
_	dd emove	D	Check		10/08/201	3	\$	25.00
□ A	.dd emove	D	Check		10/05/201	3	\$	50.00
	dd emove	D	Check		10/01/201	3	\$	25.00
A	dd emove	D	Check		10/02/201	3	\$	50.00
=	dd emove	D	Check		10/05/201	3	\$	25.00
A	dd emove	D	Check		09/24/201	3	\$	50.00
	dd emove	D	Check		10/05/201	3	\$	50.00
_	dd emove	D	Check		10/05/201	3	\$	25.00
=	dd emove	D	Check		10/26/2013	3	\$	25.00
☐ Ad	dd emove	D	Check		10/05/2013	3	\$	50.00
☐ Ac	dd emove	D	Check		10/05/2013	3	\$	25.00
4. To	otal on	y this Page				\$		\$610.00
5. To	otal of	ALL CRO-120	5 Pages			\$		\$610.00
CRO-		si ve on une 5 of Dec	tailed Summary Page C	RO-1100) State Board of Elections				Anril 2007

April 2007

Amendment **Contributions from Individuals** Contributions from Individuals Pg 1 of 1 Yes No Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Com	mittee Full Name	(and Fund if applicab	e)			2.1	D Number	
COMM	IITTEE TO ELE	CT DEL MATTIOLI						
3. Cont	ributor Informati	On "		Add 🔲 Re	move			
a. Full N	lame, Mailing Ado	dress & Phone		b. Job Title/Pr		7	Comments	
	de city, state, & z	ip)		EDUCATOR				
	DA GREEN DESTONE DR			c. Employer's	Name/Specific Field			
	AM, NC 27717				UBLIC SCHOOLS			
Dordi	DOMININI OBEIC SCHOOLS							to Date
						\$		100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount	
	D	Check			11/04/2013		\$	100.00
							\$	
							\$	
3. Cont	ributor Informati	on self-self-self-self-self-self-self-self-		Add 🔲 Re	move		,	
a. Full N	Name, Mailing Add	dress & Phone		b. Job Title/Pr	ofession	d. (Comments	
	ide city, state, & z	ip)		PROFESSOF	\			
i	G KENNEDY			a Employage	Name/Specific Field	-		
	ARIK DRIVE				Name/specific Field	-		
DUKH	AM, NC 27707			NCCU		e. l	Dection Sum	to Date
						\$	······································	125.00
	.	T			1	'	1	125.00
		h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount	<u></u>
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	Name, Mailing Ad			b. Job Title/Pi	rofession	d. (Comments	
	ide city, state, & z	ip)		4				
	IATTIOLI HOWAN AVE			c. Employer's	Name/Specific Field	-		
	AM, NC 27713					1		
	7 HVI, IVC 27713					e. 1	Dection Sum	to Date
						\$		475.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy))	k. Amount	
		In-Kind	VIDEO SHOO CAMPAIGN		09/27/2013		\$	475.00
							\$	
							\$	
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0.0000000000000000000000000000000000000		O-1210 Pages 6 of Detailed Summary	Page CRO-1100)		tukuju (2003) Proviju (2000) Pokuju (2003) Proviju (2000)	\$		600.00

Other	Receipt	Sources
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									Ame	nume	Ht	
er Receipt Sources					Pg .	1	of	1	_ 🗆 '	Yes	No No	
C	. 1	- 1	c					~	_	••	•	

Use this form to report income not reported on another form, i.e. interest income, not for profit contributions etc.

1. Committee Fo	ill Name (and Fund if	nnlicable)		у штоотно, постог р	2 11	Number
	TO ELECT DEL MA				2.11	Number
3. Type of Recei	pt Source (<i>Please us</i>	se separate CRO-1 outions from Not-for-				
4. Contributor I				move		
a. Full Name, Ma (include city, s	illing Address & Phone tate, & zip)			fit Federal ID #	d. Co	om ments
	LEADERSHIP PAC COURT NE #100 N, DC 20002		c. Outside Sou	urce Explanation	-	
	•				e. E	ection Sum to Date
			:		\$	200.00
f. Account Code	g. Form of Payment	h. In-Kind Descrip	otion	i. Date (mm/dd/yy	ууу) ј	. Amount
D	Check			11/04/2013		\$ 200.00
						\$
5. Total only	this Page				\$	200.00
(This line goes is (This line goes is	LL CRO-1250 Pap n line 11a of Detailed Sun n line 11b of Detailed Sun n line 11c of Detailed Sun	nmary Page CRO-11 nmary Page CRO-11	00 if Not-for-Pro		\$	200.00

CRO-1250 NC State Board of Elections December 2007

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T,	13	vu	1136			

				Am en dm	ent
Pg	1	of	2_	☐ Yes	X No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

	ull Name (and Fund)	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~						2. ID Nu	mber
COMMITTEE	TO ELECT DEL M	ATTIOLI							
3. Type of Disbu	rsement (Please	use separate CR()-1310	forms for eac	tvn	e of Dishu	rseme	nt.)	
X Operating Exp		ributions to Candidat							xpenditures
4. Payee Inform	ation			Add 🗆	Ren	nove			
	ailing Address & Ph	one		b. Coordinate			am e	d. Comm	ents
(include city, sta	-					······			
ART SIGN CO	MPANY			1					
209 S GOLEY	ST			c. Level Regis	te re d	(Specify)		1	
DURHAM, NC	27701			☐ Federal		County:			
				State		☐ Municip	ality:	e. Electio	n Sum to Date
								\$	1,735.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/vvvv)	i. Ar	nount	k. Re	quired Re	
D	Check	Α		0/21/2013	\$	735.00	SIG		
				7/21/2015	 	755.00	JIG1		
					\$				
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	illing Address & Pho	one		b. Coordinate	d Co	mmittee Na	ame	d. Com m	ents
(include city, sta	······································								
AMANDA EUE	BANKS			a Laval Dania		(6			
NC				c. Level Regist	terea	County:			
				State		☐ County. ☐ Municip		e Electio	n Sum to Date
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4. Payee Inform	ation :		П	Add 🔲	Rem	ova			
	iling Address & Pho	one	Ш	b. Coordinated			ım e	d. Comm	ente
(include city, sta		1.0						u. Comm	c ii ts
OFFICE DEPO	······································	······································							
4001 CHAPEL				c. Level Regist	e re d	(Specify)			
DURHAM, NC				Federal		County:			
				☐ State		Municip	ality:	e. Electio	n Sum to Date
								\$	135.06
f Account Code	g. Form of Payment	h. Purpose Code	i Doto	(m = /dd/=====	: A		l. Da		
D D	Debit Card	A		***************************************		nount	ļ	quired Re	
	Deon Card	A	- 05	0/25/2013	\$	90.79	CAN	IPAIGN I	HAND OUTS
					\$				
5. Total only this	Page .							\$	1,325.79
6. Total of ALL 0	CRO-1310 Pages								
(This line goes in	ı line 13a of Detailed S	ummary Page CRO-	1100 if	Operating Expen	ises)			ው	1 (52 07
(This line goes in	t line 13b of Detailed S	ummary Page CRO-	1100 if	Contrib to Candi	idates		mm)	\$	1,652.07
(This line goes in	line 13c of Detailed S	ummary Page CRO-	1100 if	Coordinated Par	ty Ex	penditures)			
7. Purpose Co	des (List detailed	expenditure code	in (h.) a	lbove)					
A* - Media	B* - Printin	_		ındraising		D - To .	Anoth	ner Candio	late
E - Salaries	F* - Equipme			itical Party					ffice Expenses
I - Postage	J - Penalties	5	K* - O	ffice Expenses		Q* - Do	onatio	n to Lega	l Expense Fund
O* Other	dotailed			11/15					
coues require	detailed explanation	i in required rem	arks fi	eia(K)					

D	ic	hı	ırc	ρ	m	ρ	nts	2
v	13	v	113	U	ш	C	114	•

				Amendme	ent
Pg	2_	of	2_	☐ Yes	X No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Fu	ill Name (and Fund	if applicable)						2. ID Nui	nber
COMMITTEE	TO ELECT DEL M	1ATTIOLI							
3. Type of Disbu		use separate CRO			type				
Operating Exp	enses Con	tributions to Candidate	es/Politi	ical Committees		Coo	rdinat	ed Party Ex	penditures
4. Payee Informa	ation			Add 🔲	Remo	ve			
a. Full Name, Ma	ailing Address & Ph	ione		b. Coordinate	d Com	mittee Na	me	d. Comm	en ts
(include city, stat	te, & zip)		3						
STAPLES									
3600 NORTH D				c. Level Regist					
DURHAM, NC	27705			Federal		County: Municip		Mastic	Sum to Data
				State		Municip	anty.	e. Election	n Sum to Date
								\$	124.87
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Am	ount	k. Re	quired Re	marks
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		+	 		\$				
4. Payee Informs				Add 🗆	Remo				
	ailing Address & Ph	ione		b. Coordinate	d Com	mittee Na	me	d. Comm	ents
(include city, stat	te, & zip)	***************************************	·····						
SUBWAY	= ====			c. Level Regis	tored (enacify)			
DURHAM, NC	27703			Federal	iereu (i				
				State	Ē	Municip		e. Electio	n Sum to Date
								<u></u>	
								\$	55.52
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Am	ount	k. Re	quired Re	marks
D	Debit Card	О		0/08/2013	\$	55.52	LUN	CH FOR	POLL
 	· · · · · · · · · · · · · · · · · · ·		 		\$	-		KERS	
					2				
4. Payee Informa		*		Add 🗆	Remo				
**************************************	ailing Address & Pl	ione		b. Coordinate	d Com	mittee Na	ım e	d. Comm	ents
(include city, stat	te, & zip)		······································						
ZAXBY'S				- Yaval Pagis	42 mg d (Casalfu)			
#39801				c. Level Regis	tereu (County:			
CARY, NC				State	F	Municip		e Electio	n Sum to Date
						<u> </u>			
								\$	145.89
f. Account Code	g. Form of Paymen	t h. Purpose Code	i. Date	(m m/dd/yyyy)	j. Am	ount	k. Re	quired Re	marks
D	Debit Card	О		0/08/2013	\$	145.89	END	OD CA	MPAIGN
			┼		ļ		PAR		
					\$				
5. Total only this	s Page							\$	326.28
6. Total of ALL	CRO-1310 Pages								
	n line 13a of Detailed	Summary Page CRO	-1100 if	Operating Expe	nses)			•	1 652 07
-	n line 13b of Detailed		_			Political C	omm)	\$	1,652.07
	n line 13c of Detailed								
7. Purpose Co	odes (List detaile	d expenditure code	in (h.)	above)					
A* - Media	B* - Printi			undraising		n . To	Anot	her Candi	date
E - Salaries	F* - Equip	0		litical Party					Office Expenses
I - Postage	J - Penalti			Office Expense:	•		-	•	al Expense Fund
O* Other		C 3	11 ~	Mice Lapens	,	٧ -	Ulhua.	AI to Leg.	II Lapense I and
The second secon	e detailed explanati	ion in required ren	narks f	ield (k)					

Aggregated	Non-Media	Expenditures
. 1551 05000	I TORK ITACORE	LAPORMICATOR

Page 1 of 1 Amendment No

Optional form used to report NC Non-Media Expenditures of \$50 or less.

Optional form	ii useu to repo	ort NC Non-Med	ia Experiunures o	1 \$30 01 less.		
1/Committee	Fall Name (and	i Fund if applicable		- C.	$2.00\mathrm{Num}$	ren in production and the second
COMMITTE	E TO ELECT I	DEL MATTIOLI				
3. Payee Infor	mation					
a. Amend b.	Account Code	c. Form of Paymen	t d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
☐ Add	D	Draft	0	10/15/2013	\$ 5	RETURNED DEPOSIT
Remove				1	<u>Ψ</u> -	ITEM FEE
Add	D	Debit Card	О	10/04/2013	S 7	7.45 CAMPAIGN FINAL
Remove					ΙΨ ΄	PARTY
☐ Add	D	Debit Card	О	10/08/2013	\$ 12	2.00 CAMPAIGN ENDING
Remove						PARTY
4. Total onl	y this Page		Market Co.		\$	24.45
5. Total of	ALL CRO-1	315 Pages			_	24.45
		f Detailed Summary	Page CRO-1100)		\$	24.45
A Parries	Cardos II ista	demiled expendi	ine code mirdos	howe)		The same of the sa
DZ K SU POSC		- Printing	CONTRACTOR		To Another	· Candidate
E - Salarie		- Equipment	G - Political			Public Office Expenses
L - Postage		Penalties				s to Legal Expense Fund
O* - Othe	CONTRACTOR OF THE PROPERTY OF	1 Olimines		<u> </u>	2 onation	10 milen = The man
		led explanation	· · · · · · · · · · · · · · · · · · ·			

CRO-1315

NC State Board of Elections

December 2009

Rafunds/Re	imhu	reamante	From the Cor	mmittaa s	1 . 1	ı	Amendmen	_
			ements, including co					No No
			plicable)				D Number	
COMMITTEE TO								
3. Payee Informati	ion		П	Add □ Re	move			
a. Full Name, Maili		iress & Phone		d. Type of Comm		g. C	Comments	
(include city, sta	ite, & zi	p)		☐ Candidate	☐ PAC	10		
DEL MATTIOLI				Referendum	Party			
1108 COWAN AV			,	e. Level Register Federal	red (Specify) County:	h. C	Original Rece	
DURHAM, NC 2	17713		,	State	☐ Municipality:		09/20/2	013
			'			i. O	riginal Rece	ipt Amount
			'			\$		620.00
b. Job Title/Professi	ion	c. Employer's N	Name/Specific Field	f. Purpose Code		j. Đ	lection Sum 1	to Date
	ı		!	P		\$		500.00
k. Account Code	1. Form	of Payment	m. Required Remar	·ke	n. Date (mm/dd/yy	Ĺ	La Amount	
D D	Check		REIMBURSEMENT FO			7331		(20.00
ע 			BUTTONS	OIC OI IIII . L. L. L.	11/12/2013		\$	620.00
3. Payee Informati		3 (3×1) (LL) (3×1)		· -	move			
a. Full Name, Maili	_			d. Type of Comm		g. C	comments	
(include city, stat	······································	p)		Candidate Referendum	☐ PAC ☐ Party			
MARK MATTIO			'	e. Level Register		h. (riginal Rece	int Date
CHOWAN ROAD DURHAM, NC 2			,	Federal	County:	11.	10/01/2	
DOMINI, NC 2	,//13		!	☐ State	Municipality:		10/01/2	013
ı			'			i. O	riginal Rece	ipt Amount
						\$		1,000.00
b. Job Title/Professi	ion		Name/Specific Field	f. Purpose Code		j. E	lection Sum 1	to Date
MEDICAL	1	DOCTOR	'	P		\$		0.00
k. Account Code	l. Form	of Payment	m. Required Remar	<u> </u> :ks	n. Date (mm/dd/y)	vvv)	o. Amount	
D	Check		REIMBURSEMENT O			, J J ,		1 000 00
					11/18/2013		\$	1,000.00
3. Payee Informati					move 👙 🧬			
a. Full Name, Maili (include city, stat				d. Type of Comm	nittee PAC	g. C	Comments	
		D)		Referendum	☐ PAC ☐ Party			
ANNIE WILLIAN PO BOX 13128	VIS.		'	e. Level Register		h. C	original Rece	ipt Date
DURHAM, NC 2	27709		'	☐ Federal	County:		09/21/2	····
	.,,,,,		'	☐ State	Municipality:			
I			'				riginal Rece	
	74	T	<u> </u>	<u> </u>		\$		65.20
b. Job Title/Professi TRAVEL DESIGNER		c. Employer's N		f. Purpose Code		j. E	lection Sum (
TRAVEL DESIGNER	• [A CLASS 1 TRA	VELER	LP		\$		2.20
k. Account Code	l. Form	of Payment	m. Required Remar	ks	n. Date (mm/dd/yy	ууу)	o. Amount	
D	Check		REFUND FOR CENTE	ERFEST MEALS	10/21/2013		\$	63.00
4. Total only this P	David					- c		
5. Total of ALL CR		n Pages	160 m			\$		1,683.00
			mmary Page CRO-1100	0)	18000	\$		1,683.00
6. Purpose Code	es (List	detailed disbur	sement code in (f) ab	oove)				
L - Returned to C			Overpayment for Ser		N - Exceed	ed C	Contibution L	imit
P* - Reimburser	SECURE SET CONTROL CONTROL	National Company of the Company of t	Other					
* Codes remire	. detaile	d evolunation i	n required remarks	field (m)				

Y	T 7 *	10	4 **	. •
ın-	Kin	a Ca	ontrit	outions

				Amenu	ment
Pg .	1	of	1	☐ Yes	_
			4 - 41		. C 1

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund. Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)			2. ID	Number	
COMMITTEE TO ELECT DEL MATTIOLI					
3. Contributor Information	Add [Remove			
a. Full Name, Mailing Address & Phone	b. Type o	f Contributor	c. Con	ments	
(include city, state, & zip)	X Indivi	dual		•••••	······································
DEL MATTIOLI	☐ Candi	date	ł		
1108 CHOWAN AVE	Party				
DURHAM, NC 27713	□ PAC				
	Refer		d. Dec	tion Sum 1	o Date
	U Other	Receipt Source	\$		475.00
e. Description		f. Date (mm/do	/yyyy)	g. Fair M	arket Amount
VIDEO SHOOT FOR TV CAMPAIGN AD PAID TO RUSS CORVEY		09/27/20	13	\$	475.00
				\$	
				\$	
4. Total only this Page			\$	•	475.00
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO	7-1100)		\$		475.00

CRO-1510 NC State Board of Elections December 2007

Outstanding Loans	Outsta	nding	Loans
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				Am en dm	ent	
Pg	1	of	2	☐ Yes	X No	

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Commit	tee Full Name (and Fund if applicable)				- 1	2. ID Number
СОММІТ	TEE TO ELECT DEL MATTIOLI					
3. Lender	Information	□ Add	☐ Remo	we		
	e, Mailing Address & Phone		b Title/Prof		1	d. Comments
(include	city, state, & zip)		<u> </u>	······································		
DEL MAT					L	
	OWAN AVE	a For	lovenie Na	me/Specific Fiel		e. Start Date (mm/dd/yyyy)
DURHAM	1, NC 27713	C. Eas	1 proyer 5 1va	me/Specific riei	a	08/01/2013
					1	f. End Date (mm/dd/yyyy)
					-	
g. Rate	h. Security Pledged		Original I	oan Amount		j. Remaining Loan Balance
	HINDALING TO BE A STORY	<u> </u>				
%			\$	500.0		\$ 500.00
k. Full Nam	ne of Lending Institution]	l. Loan Number
3. Lender	information	☐ Add	☐ Remo	WA.		
	ie, Mailing Address & Phone		b Title/Prof		1	d. Comments
	city, state, & zip)			······································		
DEL MAT						
	DWAN AVE	a Fra	lawania Nia			e. Start Date (mm/dd/yyyy)
DURHAM	1, NC 27713	C. FAI	c. Employer's Name/Specific Field			08/07/2013
					1	f. End Date (mm/dd/yyyy)
					T	marin managaran
¥3.40	- A-12-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1					
g. Rate	h. Security Pledged		. Original L	oan Amount	ļ	j. Remaining Loan Balance
%			\$	298.7	72	\$ 298.72
k. Full Nam	e of Lending Institution				1	l. Loan Number
2 Tander	information	Плаа	□ Domo			
	e, Mailing Address & Phone	D Add	Remo		1	d. Comments
	city, state, & zip)		V 4434	NOTAL		u. Commento
DEL MAT	TTIOLI				L	
1108 COV	VAN AVE		na newson and a constant of weeks			e. Start Date (mm/dd/yyyy)
DURHAM	1, NC 27713	c. En	iployer's Na	me/Specific Fiel	d	08/13/2013
					1	f. End Date (mm/dd/yyyy)
		ŀ			-	
	h. Security Pledged	<u> 1</u>	. Original L	oan Amount	<u>j</u>	j. Remaining Loan Balance
%			\$	500.0	00	\$ 500.00
k. Full Nam	e of Lending Institution	and profession			1	l. Loan Number
				•		
	only this Page					\$ 1,298.72
	of ALL CRO-1430 Pages			and the		\$ 3,058.72
(This line	must be on line 21 of Detailed Summary Page	CRO-110	0)			3,030.72

Outstanding Loan	IS
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				Amendm	ent	***************************************
Pg	2	of	2_	☐ Yes	X No	

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Commit	tee Full Name (and Fund if applica	ble)			2. ID Number	
СОММІТ	TEE TO ELECT DEL MATTIOL	,I				
	Information	□ A	dd 🔲 Remov	e		
	ne, Mailing Address & Phone	b.	Job Title/Profes	sion	d. Comments	
(include	city, state, & zip)					***************************************
DEL MA						
	OWAN AVE	_			e. Start Date (mm.	
DURHAM, NC 27713		<u> </u>	c. Employer's Name/Specific Field		. 08/13/2013	
					f. End Date (mm/d	d/yyyy)
g. Rate	h. Security Pledged		i. Original Los	an Amount	j. Remaining Loan	1 Balance
%			\$	500.00	\$	500.00
k. Full Nan	ne of Lending Institution				I. Loan Number	
	Information	□ Ad	dd 🔲 Remov	e ·		
	ie, Mailing Address & Phone	b.	b. Job Title/Profession		d. Comments	
······	city, state, & zip)					
DEL MAT					04. 10.4.	
	OWAN AVE		Employer's Nam	a/Swanifia Field	e. Start Date (mm/dd/yyyy)	
DUKHAM	M, NC 27713	100	emproyer 3 Mani	e/Specific Fleru	. 08/22/20)13
					f. End Date (mm/de	d/vvyv)
× 10.4.						
	h. Security Pledged		i. Original Loa	ın Amount	j. Remaining Loan	1 Balance
%			\$	1,260.00	\$	1,260.00
k. Full Name of Lending Institution				l. Loan Number		
	only this Page	\$	1,760.00			
5. Total of ALL CRO-1430 Pages (This line must be on line 21 of Detailed Summary Page CRO-1100)					\$	3,058.72

		Amendme	nt
Contributions to be Reimbursed	Pg _ 1 of 1	□ Yes	No No
	<u> </u>	• L	

Use this form to report Contributions under \$1,000 which will be refunded within 7 days. Refunds must be disclosed on the Refunds/Reimbursements Form (CRO-1320).

Refunds must be disclosed on the Refunds/Re	ziiiibursei	ments ronn (Cr	(O-1320).		D Number	
1. Committee Full Name						r
COMMITTEE TO ELECT DEL MATTIOLI	[
3. Contributor Information		Add □ Re	move			
Full Name & Mailing Address of the Payee		Full Name &	Mailing Addre	ss of	the Reim	bursee
(the original vendor)		(the person to				
MARK MATTIOLI	MARK MATTIOLI					
CHOWAN ROAD DURHAM, NC 27713		CHOWAN ROAD DURHAM, NC 27713				
a. Contribution Description	b. Date	e (m m/dd/yyyy)	c. Credit Card	Y/N	d. Amour	nt
TO FUND CAMPAIGN	1	0/01/2013	N	•	\$	1,000.00
4. Total only this Page				\$	L	1,000.00
5. Total of ALL CRO-1215a Pages (This line goes in line 28 of Detailed Summary Pages)	ge CRO-11	100)		\$		1,000.00
CRO-1215 NC State Board of Ele	ections			×4	Ι	December 2007