Disclosure	Report	Cover
_	-	

Use this form for any and	☐ Yes	II No
Use this form for general report and committee information, must be signed and submitted along	with other de	etailed forms
Do not use this form to update information.	······································	outlog tollis.
The state of the s		

1. Committee Info	rmation					
a. Full Name					····	c. ID Number
Count Hee	To 6/6	LT TERRE	u ac A	2. Sear bi	NN GH	C ID Name:
D. MARINE ACCUSES (19)	iciade City, Sta	te and Zip Code)				d. Date Filed
3201 YOU BURHAM	KTOWN	Avenue	#119	7		03/06/2014
OUCHAM	1, 4 C	27712				e. Phone Number
2. Report Year 3.					Is m	919 425 1277
2014	02/26	20/4		End Date (mm/dd	/yy) 5. Treasu	rer Full Name
6. Type of Commit				06/2014	KAN	ALD L. NEWTON
Candidate Campaig	gn Par		Type of Ke micipal	port (check only State/Co	one type of re	port from one category)
☐ PAC		erendum	Organization		unty nizational	Referendum
Independent Expen	diture 🔲 Join	nt Fundraiser	Thirty-five da	1-6	nterly	Organizational
Legal Expense Fun	d	in	Pre-primary	` n ``	First	Pre-referendum Final
		16	Pre-election	吊	Second	Supplemental Final
7. Type of Fund	(if applicable,	check one)	Pre-runoff	lii ii	Third	Annual
Booster Fund			Semi-annual	iri	Fourth	Special
Building Fund	•		Mid Ye	ar Semi	-annual	LI Special
Other: CAMPI	ATEN PO	mmittee 🗆	Year En	4 🗖	Mid Year	10. Special Report Name
			Final	10	Year End	Special Report Haire
8. Number of Fund	lraisers this	Report	Special	Final		1
		l l		☐ Spec	ial	
11. Account Inform				11. Account In	ormation	
a. Financial Institution	Full Name		***************************************	a. Financial Institu		
YADKI	4 BA	4V				
b. Purpose	., .,	c. Account Code				·
		C. ACCOUNT CORE		b. Purpose		c. Account Code
Can salan D.	†					}
CAMPATEN CO	um The	d. Period Regin Ra	lance			
CAMPATEN CON	RING	A Degrada				d. Period Begin Balance
	, (0	\$ 7.	n			 \$
CERTIFICATION						
I certify that the Con	nmittee or Fun	d is in compliance	with all appli	icable provisions o	f Article 22A, 22	2B & 22D-22M of Chapter 163
Compret Of	www.co and the	t BO TURKS ARE COM	minoien with	DOODS bited on other		funds. I further certify that this
report is complete, tr	ue and correct	and that I have be	en trained by	the NC State Boar	d of Elections	
1/20HAY		<i>[</i>	17	/ 1) , , , ,
		EWTOU		muly	ch-V	V 03/64 /2014
Printed	Name of Signe	PERSON	Stign	nature of Appointed	reasurer	Date
FOR OFFICE USE	ONLY				<i>y</i>	
Date Received:	MA	R 0 6 2014	Employ	ree: <u>J</u>		livery Method Normal Mail
Date Postmarked	I: DUE	RHAM BO	Employ	ee:		Registered Mail Hand Delivered
Date Scanned:			Employ	ee:		Electronically Filed
Date Data Entere						Signer has not received
			Employ			mandatory training
Please Note: T		not be used to an	~ •		such as the co-	mandatory training
	This form can	reasurer, custodi	nend commi	information or a	ccount inform	mandatory training
	This form can	reasurer, custodi	nend commi		ccount inform	mandatory training

Detailed Summary	Amendi					
Use this form to summarize all disclosure reporting forms a	und to total mo	onetary inform	ation	☐ Ye	s MZ No	
r. Communet run rame (and rund if applicable)	2. Type of	Report		ID Num	ber	
Committee To Elect Teamne & Sea	maraga	57+				
Start of Election Cycle: January 1, 26/4		Tota			Total this	
4) Cash on Hand at Start		\$ 7		\$	ection Cycle	4
RECEIPTS		<u> </u>		1 *	U	
5) Aggregated Contributions from Individuals	(CRO-1205)	S		\$		
6) Contributions from Individuals	(CRO-1210)	\$ 197	, 12	 		ILSW
7) Contributions from Political Party Committees	(CRO-1220)	10	1 6 5	\$	196.0	LUN
8) Contributions from Other Political Committees	(CRO-1230)			 		4
9) Loan Proceeds	(CRO-1410)	<u> </u>	· · · · · · · · · · · · · · · · · · ·	\$		_
10) Refunds/Reimbursements to the Committee	(CRO-1240)	L*		\$		_
11) Other Receipt Sources	(03.0-12.0)	•		\$	and the second s	200
11a) Interest on Bank Accounts	(CRO-1250)		34			
11b) Contributions from Not-For-Profit Organization		, ,		\$		
11c) Outside Sources of Income		 		\$		_]
11d) Legal Expense Fund - Other Sources	(CRO-1256)	\$		\$		
11e) Exempt Purchase Price Sales	(CRO-1270)	<u> </u>		\$		
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11	(CRO-1265)			\$		
EXPENDITURES	c,11d and 11e)	\$ 196	.00	\$	96.00	_
13) Disbursements	ļ	+		1 10 mg 10 m		3
13a) Operating Expenditures	(CRO-1316)	S		-		
13b) Contributions to Candidates/Political Committee				\$	····	4
13c) Coordinated Party Expenditures	(CRO-1310)	<u> </u>		\$		1
14) Aggregated Non-Media Expenditures		\$		\$		_
15) Loan Repayments	- 1	\$		\$		
16) Refunds/Reimbursements from the Committee		\$		\$		1
17) In-Kind Contributions	(CRO-1320)	\$		\$]
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1	(CRO-1510)		, m	\$	96.00	.
(19) Cash on Hand at End (Add lines 4 and 12 together, then su	5, 16 and 17)			\$	96.00	resh
ADDITIONAL INFORMATION	OURCE HIRE 10)	3 100	. 60	\$	100.00 _	rest
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$		ALC:		
		·	<u> </u>		4.200	
 Outstanding Loans (incl. ones from other campaigns) 	(CRO-1430)	2			To a second	
	´-L	\$				
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$				
22) Debts and Obligations owed by the Committee 23) Debts and Obligations owed to the Committee	(CRO-1610) (CRO-1620)	\$				
22) Debts and Obligations owed by the Committee 23) Debts and Obligations owed to the Committee 24) Account Transfers Within the Committee	(CRO-1610) (CRO-1620) (CRO-1720)	\$ \$ \$				
Debts and Obligations owed by the Committee Debts and Obligations owed to the Committee A) Account Transfers Within the Committee Description of the Committee De	(CRO-1610) (CRO-1620) (CRO-1720) (CRO-1710)	\$ \$ \$ \$				
21) Outstanding Loans (incl. ones from other campaigns) 22) Debts and Obligations owed by the Committee 23) Debts and Obligations owed to the Committee 24) Account Transfers Within the Committee 25) Administrative Support 26) Forgiven Loans 27) 48-Hour Notice Reports Sum	(CRO-1610) (CRO-1620) (CRO-1720) (CRO-1710) (CRO-1440)	\$ \$ \$				

Use	his form to repo	rt individual contribu	tions over \$50 or	contributions un	der \$50 if form (ΨΛ	1205 :
1. C	mmittee Full N	ame (and Fund if ar	policable)	Tondroud on a	aci 450 ii idiii (
1. Committee Full Name (and Fund if applicable) Committee Full Name (and Fund if applicable) Committee Full Name (and Fund if applicable)						12.	ID Number
3. Ca	1). LANITIONIAE Information						
a. Ful	Name, Mailing Ad	dress & Phone	<u>L</u>				
(inc	lude city, state, & z	ip)		b. Job Title/Prof			Comments
70	erence k	. Searborn	674				ASA & CHECK
6	3ib Corona	do LANE		c. Employer's Na	me/Specific Field]7	open & file
The state of the s	RHAM, N	C 27713		VHC Gener	al Adminst	╁	Section Sum to Date
	·	, -				S	
f. Prio	g. Account Code	h. Form of Payment	i. In-Kind Descr	iption	li Data (1	T
		CHECK	Siln6 7	Fee	j. Date (mm/dd/yy	<u>yy)</u>	k. Amount \$ 96.00
		CHECK	bpen En	fee, onk Acci.	03/66/200		\$ 100.00
				, - 1, - 0, 1	704001	7	\$
3. Co	ntributor Inform	nation		Add Rer			*
	Name, Mailing Add				nove		
	de city, state, & zij			b. Job Title/Profes	sion	d. C	omments
				1			
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					- opecine racio		
						e. E	ection Sum to Date
. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	<u> </u>		\$	
			- III Descrip	Alen	j. Date (mm/dd/yyy	y)	k. Amount
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(mcrea	le city, state, & zip)						
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						. Ele	ction Sum to Date
D-2						\$	
	g. Account Code	h. Form of Payment	i. In-Kind Descript	ion j.	Date (mm/dd/yyyy) k	- Amount
							\$
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	d only this Pa					\$	191
Tota	d of ALL CR	O-1210 Pages				Ψ	116.10
Total of ALL CRO-1210 Pages This line must be on line 6 of Detailed Summary Page CRO-1100) \$ 196.00							

Contributions from Individuals

Use this form to report non-monetary c Use CRO-1215 if In-Kind Contribution	ons were or will be refunde	goods or servi led within 7 da	rg/_ of/	he com	nmittee or fund.
1. Committee Full Name (and Fund i	if applicable)			2. IJ	D Number
Committee to Gen 16	erneuve R.So		vgh_		/ A 1 10 man 10 mm
3. Contributor Information	Add	Remove	7		
a. Full Name, Mailing Address & Phone (include city, state, & zin)			Contributor	c. Co	om ments
Ginclude city, state, & zip) TERRENER R. Slarbonsv 6310 Rovon ado Lane	7h		-	f	sling fees
Burtham, Me 27713		Refe	ferendum her Receipt Source		ection Sum to Date
•				\$	
e. Description			f. Date (mm/dd/yy	/уу)	g. Fair Market Amount
Candidates Siling ,	fus		62/24/20	114	\$ 96.00
•			/ /		s
					s
3. Contributor Information a. Full Name, Mailing Address & Phone	Add	Remove			
a. Full Name, Maning Address & Phone (include city, state, & zip)		b. Type of C	Contributor ividual	c. Con	mments
		Cand Party PAC Refe	ndidate ty	d. Elec	ection Sum to Date
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3. Contributor Information					\$
a. Full Name, Mailing Address & Phone	Add	b. Type of Co	4 97		
(include city, state, & zip)		b. Type of Co	Contributor vidual	c. Com	ıments
		Candi Party PAC	didate y	, we	ction Sum to Date
		1=	er Receipt Source		tion Sum to Date
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e. Description			f. Date (mm/dd/yyy)	у)	g. Fair Market Amount
			<u> </u>		\$
					\$
A PRO A N N AND WALL					\$
4. Total only this Page 5. Total of ALL CRO-1510 Pages				\$	96,0
(This line must be on line 17 of Detailed Summe	vary Page CRO-1100)		·	\$	96.00

In-Kind Contributions