	Do not use this form to update information									
	ommittee Inform	mation	12							part 1977 (1978)
	ll Name								c. II	D Number
Vote	e Jimmy Doster									
			State and Zip Code)						d. D	Date Filed
	8 Erwin RD STE		51	_	-	_				
Dum	ham, NC 27705								e. P	Phone Number
						- ' N		-car.		919-809-9890
2. Re	eport Year	3. Perio	od Start Date (mm/d	dd/yy)	4. Period I (mm/dd/yy)	A	te	5. Treasurer Full		e
	2014	_	03/06/14	<u></u>	04/	/19/14	_	Daniel James Do	ster	
	pe of Committe	ee (Che	ck One)	9. Ty	pe of Report	<u>(c</u>	heck o	nly one type of repor	t from	one category)
\boxtimes	Candidate Campai		Party	Munici	ipal		State/C	County		ferendum
	PAC Independent	<u>_</u> '	Referendum		Organizational	.1		Organizational		Organizational
	Independent Expenditure Legal Expense Fun		Joint Fundraiser		Thirty-five day	y		Quarterly		Pre-referendum
7. Ty	ype of Fund		icable, check one)		Pre-primary	1		First		Final
	"Booster Fund"	To the same of the			Pre-election	1	ı 🗀	Second		Supplemental Final
	Building Fund				Pre-runoff	,		Third		Annual
					Semi-annual	ļ		Fourth		Special
	Other:				Mid Year Year End			Semi-annual Mid Year	10	C . I.D Nama
L	Other:				Year End Final	1 1		Mid Year Year End	Iv.	. Special Report Name
8. Nu	umber of Fundr	raisers f	chie Renort	18	Special	ļ		Year End Final		
	ALL WY	<u> </u>	MIS ISSPE	1	эрес	ļ		Special		
	Account Informs					11. A	1	Information		En la company
a. Fina	ancial Institution F	Full Name	3			a. Finar	ncial Ins	stitution Full Name		
	ls Fargo Bank, N		10.3			Paypa				
b. Pur	rpose tribution		c. Account Code			b. Purp	ose ibution		<u>c.</u>	Account Code
Cu	Fibution	_	00			Com	lDuno	1		002
		<u>_</u> c	d. Period Begin Balance	<u>e</u> .		1			d.	. Period Begin Balance
			\$ 2,494.44		<u> </u>				\$	0.00
	TIFICATION									:
I certi	ify that the Com	ımittee c	or Fund is in compli	iance wi	th all applica	able pro	visions	of Article 22A, 22B	, & 22	2D-22M of Chapter 163 of
the No	C General Statu	ites and	that no funds are co and that I have beer	mming	led with pron	ribited of	r other	non-disclosed funds	I furt	ther certify that this report
15 00	mplete, true and Daniel James			1 Trannou		State Bo	\sim	Elections.	4	1124114
		Printed	Neceson				1	nted Treasurer		Date
FOR	OFFICE USE OF		I-FEROUR					1		
. D	Date Received:		APR 2 8 2014		Employee:			1		very Method Normal Mail
D	Date Postmarked	^L DU	J rham Bo e		Employee:					Registered Mail Hand Delivered
D	Date Scanned:				Employee:					Electronically Filed Signer has not received
	Date Data Entere	∌d:			Employee:				· -	mandatory training
Plea	ase Note: This	s form c	annot be used to an	nend cor	nmittee infor	rmation	such as	s the committee addr	ess, tre	easurer, assistant treasurer,
			custodia	an of boo	oks informati	tion, or a	account	t information.		
		You mu	ust amend the State	ment of	Organization	ı (CRO-	2100A	A-E) to make committ	tee cha	anges.

Disclosure Report Cover

Amendment

No

Amendment

No

Detailed SummaryUse this form to summarize all disclosure reporting forms and to total monetary information.

	2. Type of Report		3. ID Number
Vote Jimmy Doster	First Quarter		
Start of Election Cycle: January 1,	2014	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 2,494.44	\$ 0.00
BECRAPTS TO THE TARRET			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$ 14,521.29	\$ 14,521.29
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$ 2,494.44
9) Loan Proceeds	(CRO-1410)	\$	\$
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$	\$
11) Other Receipt Sources		March March	
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$
11b) Contributions from Not-for-Profit Organization	ns <i>(CRO-1250)</i>	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	\$
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c,	IId and IIe)	\$ 14,521.29	\$ 17,015.73
Direction of the second			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 12,036.28	\$ 12,036.28
13b) Contributions to Candidates/Political Committee	ees (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)	\$	\$
17) In-Kind Contributions	(CRO-1510)	\$ 429.29	\$ 429.29
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15,	16 and 17)	\$ 12,465.57	\$ 12,465.57
19) Cash on Hand at End (Add lines 4 and 12 together, then subtr	act line 18)	\$ 4,550.16	\$ 4,550.16
ADDITIONAL PROBLEM TO THE PROBLEM		2.42.20	
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns	s) (CRO-1430)	\$	
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$	
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$	
24) Account Transfers Within the Committee	(CRO-1720)	\$	
25) Administrative Support	(CRO-1710)	\$	\$
26) Forgiven Loans	(CRO-1440)	\$	\$
27) 48-Hour Notice Reports Sum	(CRO-2200)	\$	\$
28) Contributions to be Refunded	(CRO-1215)	\$	\$

Amendment 10 Pg of

Contributions from Individuals Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used 1. Committee Full Name (and Fund if applicable) 2. ID Number Vote Jimmy Doster 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Retired Homemaker Julia Simons c. Employer's Name/Specific Field 3 Winthrop CT Durham, NC 27707 Retired Homemaker e. Election Sum to Date \$ 100.00 k. Amount f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) \$ 001 Check 03/10/14 \$ 50.00 001 Check 04/14/14 \$ 50.00 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Businessman Daniel James Doster c. Employer's Name/Specific Field 2616 Erwin RD Apt. 1531 Durham, NC 27705 Silver Eagle e. Election Sum to Date 4,301.53 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount 001 Direct Dep 03/11/14 \$ 202.00 001 Direct Dep 03/19/14 \$ 2,000.00 001 04/01/14 \$ Direct Dep 2,000.00 ⊠ Add 3. Contributor Information Remove b. Job Title/Profession a. Full Name, Mailing Address & Phone d. Comments (include city, state, & zip) Businessman Steve Terrill 2316 Ridgemont Hill RD c. Employer's Name/Specific Field Cary, NC 27513 SAS e. Election Sum to Date \$ 500.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount 001 Check 03/21/14 \$ 500.00 \$ \$

CRO-1210

4. Total only this Page

5. Total of ALL CRO-1210 Pages

(This line must be on line 6 of Detailed Summary Page CRO-1100)

4,802.00

14,521.29

\$

Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used 1. Committee Full Name (and Fund if applicable) 2. ID Number Vote Jimmy Doster 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Businessman CRO-6300 submitted w/ this report Alan North 7440 Heartland DR c. Employer's Name/Specific Field Wake Forest, NC 27587 **Norlinx** e. Election Sum to Date 1,000.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount 001 Check 03/18/14 \$ 1,000.00 П \$ \$ 図 Add 3. Contributor Information Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Businessman John Bostick 555 Stanley Ave c. Employer's Name/Specific Field Cincinnati, OH 45226 Clear Measures e. Election Sum to Date \$ 1,000.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount 001 Check 03/26/14 1,000.00 \$ \$ 3. Contributor Information Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Consultant Travis Glaze 6897 New Burlington RD c. Employer's Name/Specific Field Waynesville, OH 45068 **Prochain Solutions** e. Election Sum to Date \$ 100.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount 001 Check \$ 03/26/14 100.00 \$ \$ 4. Total only this Page \$ 2,100.00 5. Total of ALL CRO-1210 Pages

(This line must be on line 6 of Detailed Summary Page CRO-1100)

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Amendment **Contributions from Individuals** Pg 10 of Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used 1. Committee Full Name (and Fund if applicable) 2. ID Number Vote Jimmy Doster 3. Contributor Information M Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Businessman **Bradley Rowan** 1133 Abbington DR c. Employer's Name/Specific Field Union, KY 41091 Clear Measures e. Election Sum to Date 200.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount 001 Check \$ 03/26/14 200.00 \$ 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Independent contractor Garrett Klas 2243 Bellaire Ave c. Employer's Name/Specific Field Raleigh, NC 27608 Independent contractor e. Election Sum to Date 150.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount 001 Check 04/01/14 150.00 \Box \$ 3. Contributor Information Add П Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Health care policy Michael Keough 4520 Queenstown Ct c. Employer's Name/Specific Field Raleigh, NC 27612 Inclusive Health e. Election Sum to Date \$ 50.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount

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CRO-121	0		NC State Deeple CElections		

		m Individuals		Pg	_4 of	10_	Amendmer Yes	-
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Vote Jim	my Doster							
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(include	city, state, & zip)			Retired Du Pont				
Robert A								
207 Watt				c. Employer's Name/Spo	ecific Field	_		
Durnam,	NC 27701			Retired Du Pont		a Flaction 6	Sum to Date	-
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	city, state, & zip)			Self employed - bu	siness			
Lois Bee	l' 5				arkeling	-		
8849 Cav	ti, OH 45231			c. Employer's Name/Spe		-		
Cincillia	u, O11 43231			Self employed - 5	xrketing	e. Election S	Sum to Date	
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			,		-	\$	100.00	
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	city, state, & zip)			Retired Educator Pu	rdue			
Barbara I								
	v Burington RD ille, OH 45068			c. Employer's Name/Spe Retired Educator Pu				
way nest	me, 011 45000			Retired Educator 1 u	ilduc	e. Election S	Sum to Date	
f. Prior	a decount Code	I L Towns CD	1			\$	2,500.00	
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5. Total of ALL CRO-1210 Pages
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Contributions from Individuals

Pg <u>5</u> of <u>10</u> Amendment No

Use this form to report ind	ividual contributions	over \$50 or contr	ibutions under \$3	50 if form CRO	1205 is not used
1. Committee Full Name	(and Fund if application	able)			2. ID Number

i. Comm	ittee Full Name (and Fund if applicat	oie)			2. ID Nun	ider	
Vote Jimr	my Doster							
	butor Informatio		Ø		emove			
a. Full Nam	ne, Mailing Address &	& Phone		b. Job Title/Profession	1	d. Comment	is	
	city, state, & zip)			Realtor				
John Smu								
	S Mingo RD. PMI	B #224		c. Employer's Name/S	pecific Field			
Tulsa, OK	C 74133			Prudential			 	
						e. Election S	um to Date	
						\$	40.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Kind Description	j. Date (mm/dd/yy	уу)	k. Amount	
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	ne, Mailing Address &	k Phone		b. Job Title/Profession	1	d. Comment	is	
	city, state, & zip)			Businessman				
David Do								
21077 Du				c. Employer's Name/S	1			
Novi, MI	48375			Silver Eagle LLC				
						e. Election S	um to Date	:
						\$	500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Kind Description	j. Date (mm/dd/yy	уу)	k. Amount	
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· ·	city, state, & zip)			Businessman				
Stuart Sm			1			-		
16 Birnha			1	c. Employer's Name/S	pecific Field	-		
Durnam,	NC 27707		1	Duke University				
			1			e. Election S	um to Date	
			·			\$	50.00	
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		m Individuals	F over \$50 or contributions ur	eg <u>6</u> of of oder \$50 if form CR		Amendmen Yes of used	t No
		and Fund if applica			2. ID Nun		
Vote Jim	my Doster						
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1-1-1-1	ne, Mailing Address	& Phone	b. Job Title/Profession		d. Comment	ts	
(include Scott Ma	city, state, & zip)		Financial Adviso	r			
	eymede Dr		c. Employer's Name/	Specific Field			
	NC 27713		Captrust				
					e. Election S	Sum to Date	
					\$	50.00	
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						\$	
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	ne, Mailing Address	& Phone	b. Job Title/Profession	n	d. Comment	ts	
	city, state, & zip)		Administrator				
	Hoover II nt Marks RD		c. Employer's Name	Specific Field	-		
	NC 27707		Hillcrest Convale				
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					\$	50.00	
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	ne, Mailing Address	& Phone	b. Job Title/Profession)n	d. Comment	ts .	
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7 Elam C			c. Employer's Name/	Specific Field	1		
	NC 27705		Hillcrest Convale		-		
ĺ					e. Election S	Sum to Date	
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						\$	

4. Total only this Page

5. Total of ALL CRO-1210 Pages

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Contr	ibutions fro	m Individuals					Amendm	ient
		lividual contributions	over \$5		Pg <u>7</u> of nder \$50 if form CE			es N
		(and Fund if applica				2. ID Nu		
	my Doster							<u> </u>
3. Contr	ibutor Informati	on	Ø	Add 🔲 I	Remove			
a. Full Nan	ne, Mailing Address	& Phone		b. Job Title/Professi	on .	d. Comme	nts	
********	city, state, & zip)		-	Businessman				
Daniel R								
	tleview Dr			c. Employer's Name	Specific Field			
Kaleigh	NC 27613			IBM		- Til (*	0	
						e. Election	Sum to Date	
						\$	100.00	
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	city, state, & zip)		·	Financial Adviso	or			
Wilson H	•					_		
31 Birnha	im LN NC 27707			c. Employer's Name	Specific Field	-		
Duillaili,	NC 27707			Captrust		- F14	C 4. D .	
							Sum to Date	
c D.J.						\$	500.00	
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	butor Informati		Ø	Add 🔲 R	emove			
	e, Mailing Address	& Phone		b. Job Title/Professio		d. Commer	nts	
Fielding N	city, state, & zip)			Financial Adviso	r			
_	Forks RD SUITE	1700		c. Employer's Name/	Cassidia Mista			
	NC 27609	1700		Captrust	Specific Field	1		
, ,				Cupitust		e. Election	Sum to Date	
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Contributions from Individuals

Pg <u>8</u> of <u>10</u> Yes No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used 1. Committee Full Name (and Fund if applicable) 2. ID Number Vote Jimmy Doster 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Realtor Opie Frazier PO BOX 1476 c. Employer's Name/Specific Field Henderson, NC 27536 Frazco Realty e. Election Sum to Date 50.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount 001 Check 04/16/14 \$ 50.00 \$ Ø 3. Contributor Information Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Realtor Harold Frazier Sr. 143 Cedarwood Dr c. Employer's Name/Specific Field Henderson, NC 27536 Frazco Realty e, Election Sum to Date 1,100.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount 001 Check 04/17/14 1,100.00 \$ 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Businessman Fred Kendall 2502 Allison Circle c. Employer's Name/Specific Field Valparaiso, IN 46383 Redworks Inc. e. Election Sum to Date \$ 500.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount 002 PayPal 03/21/14 500.00 \$ 4. Total only this Page \$ 1,650.00 5. Total of ALL CRO-1210 Pages \$ 14,521.29

(This line must be on line 6 of Detailed Summary Page CRO-1100)

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		n Individuals vidual contributions o	a. 050		Pg <u>9</u>	of	10 1205 is ma	Ye	s 📙 No
		and Fund if applica		or contributions u	naer \$50 i	I form CRU	2. ID Num		
		ани гини и арриса	<u>oicj</u>				2. LD NUM	IDEI	
Vote Jim	my Doster								
3. Contri	butor Informatio	n est les	Ø	Add 🔲 R	lemove				
	ne, Mailing Address &	& Phone		b. Job Title/Profession	o n		d. Comments	5	
(include Timothy	city, state, & zip)	<u> </u>		Professor					
213 Zirco				c. Employer's Name	/Specific Fig	ld			
1	le, NC 27545			NCCU	, p				
							e. Election St	um to Date	
							\$	50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Lind Description	j. Dat	e (mm/dd/yy	уу)	k. Amount	:
	002	PayPal				04/13/1	14	\$	50.00
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								\$	
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	city, state, & zip)			Businessman					
	mes Doster				(C) 1/2 TO				
	vin RD Apt. 1531 NC 27705			c. Employer's Name Silver Eagle	Specific Fie	eia			
Durnam,	NC 27703			Silver Lagic			e. Election Si	um to Date	
							\$	4,301.53	
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Kind Description	j. Dat	e (mm/dd/yy	уу)	k. Amount	:
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	n/a	n/a	FB p	ost promo		03/12/2	014	\$	20.00
	n/a	n/a	FB p	ost promo		04/10/2	014	\$	6.99
3. Contri	butor Informatio	n 🕮 💮		AddR	temove				
	ne, Mailing Address &	k Phone		b. Job Title/Profession	on		d. Comments	3	
t	city, state, & zip) mes Doster			Businessman					
	rin RD Apt. 1531			c. Employer's Name	/Specific Fie	ld			
	NC 27705			Silver Eagle	operiic i i				
							e. Election Su	um to Date	
							\$	4,301.53	
f. Prior	g. Account Code	h. Form of Payment	i. În-K	and Description	j. Dat	e (mm/dd/yy	уу)	k. Amount	
	n/a	n/a	Goog	gle Adwords		04/18/20)14	\$	65.55
•	t .							1	

4. Total only this Page

5. Total of ALL CRO-1210 Pages

14,521.29

149.53

\$

\$

\$

Contributions from Individuals Pg 10 of 10

Use this f	form to report indi	ividual contributions c	over \$50	0 or contributions unde	er \$50 if form CR(O 1205 is no	ot used	
1. Comm	iittee Full Name ((and Fund if applicat	ble)	\$6.7784.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5		2. ID Nun	nber	44.41.41
Vote Jim	my Doster				l			
a. Full Nan	ibutor Informatione, Mailing Address &		Ø	Add Rem b. Job Title/Profession Businessman	nove	d. Comment	its	
Dan Dost	······································			Businessman				
516 Wild	l Rose CT		:	c. Employer's Name/Spe	ecific Field			I
Raleighj,	, NC 27615		:	Cardinal Ridge	_	Wit-offen /	~ - Data	
					T T T T T T T T T T T T T T T T T T T		Sum to Date	
						\$	329.76	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Kind Description	j. Date (mm/dd/yyy	уу)	k. Amount	
	n/a	n/a	Palm	n Cards	03/13/20)14	\$	217.75
	n/a	n/a	Pape	er	04/16/20	.014	\$	12.01
	n/a	n/a	Stick	kers	03/10/20	.014	\$	100.00
	ibutor Informatio			Add 🗌 Rem	nove			100
	ne, Mailing Address &	& Phone		b. Job Title/Profession		d. Comment	ts	
(include	city, state, & zip)			4	I	1		
			,	c. Employer's Name/Spe	ecific Field			
			1					
			,		ļ	e. Election S	Sum to Date	
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f. Prior	g. Account Code	h. Form of Payment	i. In-K	Kind Description	j. Date (mm/dd/yyy	yy)	k. Amount	
							\$	
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3. Contri	ibutor Informatio	on T		Add 🔲 Rem	nove			
a. Full Nam	ne, Mailing Address &			b. Job Title/Profession	Ţ	d. Comment	ts	
(include	city, state, & zip)							
			I	c. Employer's Name/Spe	ecific Field	-		
			1					
			1		ļ	e. Election S	Sum to Date	
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f. Prior	g. Account Code	h. Form of Payment	i. In-K	Kind Description	j. Date (mm/dd/yyy	yy)	k. Amount	-
							\$	
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4. Total	only this Page	e		- Sign ()	THE STATE OF THE S	\$		329.76
	7		***************************************					
	of ALL CRO				19 (20)	\$		14,521.29

Amendment

No

					Amen	dment	
In-Kind Contributions	Pg	<u>1</u>	of	1	. 🗀	Yes	No

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
Vote Jimmy Doster					
	lemov		2006-21 21620-3	ı	A CONTRACTOR OF THE CONTRACTOR
a. Full Name, Mailing Address & Phone	b. Ty		Contributor	c. Con	aments
(include city, state, & zip)	ļЦ		vidual		
Daniel James Doster			didate		
2616 Erwin RD Apt. 1531	님	Party			
Durham, NC 27705		PAC			
			erendum	d. Elec	ction Sum to Date
		Otne	er Receipt Source	\$	4,301.53
e. Description			f. Date (mm/dd/yyy	/y)	g. Fair Market Amount
Facebook Post Promotion			03/08/2014	ļ	\$ 6.99
Facebook Post Promotion			03/12/2014	4	\$ 20.00
Facebook Post Promotion			04/10/2014	1	\$ 6.99
3. Contributor Information Add R	lemov	е			
a. Full Name, Mailing Address & Phone	b. Ty	pe of C	Contributor	c. Con	nments
(include city, state, & zip)		Indiv	vidual		
Daniel James Doster	$ \boxtimes$		didate		
2616 Erwin RD Apt. 1531		Party	·		
Durham, NC 27705		PAC			
			erendum	d. Elec	ction Sum to Date
		Othe	er Receipt Source	\$	4,301.53
e. Description			f. Date (mm/dd/yyy	y y)	g. Fair Market Amount
Google Adwords			04/18/2014	ļ	\$ 65.55
	***				\$
					\$
	Remov		83.614.843		22654604
a. Full Name, Mailing Address & Phone			Contributor	c. Con	nments
(include city, state, & zip)			vidual		
Dan Doster			didate		
516 Wild Rose CT	H	Party	·		
Raleigh, NC 27615		PAC	erendum	Flor	ction Sum to Date
			er Receipt Source	U. E.ICC	tion Sum to Date
			-	\$	339.56
e. Description	·		f. Date (mm/dd/yyy	/ y)	g. Fair Market Amount
Palm Cards			03/13/2014	,	\$ 217.75
Paper			04/16/2014	1	\$ 12.01
Stickers			03/10/2014	1	\$ 100.00
4. Total only this Page			1000	\$	429.29
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)				\$	429.29

											Amendment	
Disbursements							Pg	1	of	<u>5</u>	☐ Yes ☐ N	ŀ
TT 41 C	11.	C	. 3	•	C	. •					11.1 . / 11.1 1	

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political

committees and coordinated	party expenditures.	

	Full Name (and Fun	d if applicable)					2. ID Number
Vote Jimmy Do							
3. Type of Dish			***************************************	0-1310 forms for each	,,.,,,,,,,		
Operating I				dates/Political Committee	S		ordinated Party Expenditures
4. Payee Inform	****			Add		Remove	d Comments
	iling Address & Phone		υ.	. Coordinated Commission	ee 14a	ime	d. Comments
Office Depot	, & zip)		4			ļ	
Office Depot 4001 Chapel H	rii nii		<u> </u>	* * Project and (Cno.			1
•			c.	Level Registered (Spec	ity)		1
Durham, NC 27	7707		-	Federal [\dashv	County:	
			L	State		Municipality:	e. Election Sum to Date
						ļ	\$ 51.33
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)		j. Amount	k. Required Remarks
001	Debit	17				DE1 22	Flip chart
——————————————————————————————————————	Deon	K		03/07/2014		\$51.33	markers
						\$	
					-		
4. Payee Inform			***T******	Add [Remove	
	ling Address & Phone		D.	. Coordinated Committe	ee Na	ıme	d. Comments
(include city, state,	, & zip)	···	4			ļ	
Staples	~ m		<u> </u>				
3600 N Duke ST			. c.	. Level Registered (Spec	ify)		
Durham, NC				Federal	_	County:	
			L	State		Municipality:	e. Election Sum to Date
							\$ 79.89
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	_	j. Amount	k. Required Remarks
001	Debit	K		03/06/2014		\$79.89	Whiteboard Easl
			_			\$	Easi
4. Payee Inform		Section 2		Add	بِـ	Remove	And the second s
	ling Address & Phone		b.	. Coordinated Committe	ee Na	ime	d. Comments
(include city, state,	, & zip)		4				İ
Nationbuilder			_				1
448 S. Hill St. S		ı	c.	Level Registered (Spec	ify)		1
Los Angeles, C	A 90013	!	ļĻ	Federal [_]	County:	<u> </u>
		!	L	State	<u> </u>	Municipality:	e. Election Sum to Date
							\$ 38.00
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)		j. Amount	k. Required Remarks
001	Debit	A		03/12/2014		\$19.00	Website Hosting
001	Debit	A		04/14/2014		\$19.00	Website Hosting
5. Total only th	sie Dage	Tangan Tangan		his pr			\$ 169.22
	L CRO-1310 Pages						\$ 109.22
	n line 13a of Detailed Sum	mmarv Page CRO-110	n if	Oneratine Expenses)			i
	n line 13b of Detailed Sum				olitic	al Cammi	\$ 12,036.28
	n line 13c of Detailed Sum						
	les (List detailed exp				I tee.	res)	
A* - Media	B* - Printing	C* - Fund				D - To Another	- Condidate
E - Salaries	F* - Equipment			0			Public Office Expenses
I - Postage	J - Penalties	K* - Offic					to Legal Expense Fund
O* - Other							
* Codes requir	re detailed explanati	on in required re	ėma	irks field (k)			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

					Amenan	ient	
Disbursements	Pg	<u>2</u>	of	<u>5</u>	□ <i>\</i>	es 🗀	No No

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political

committees	and	coordinated	narty	expenditures.
COMMITTECCS	anu	coordinated	party	CAPCHUITUICS.

	Full Name (and Fund	d if applicable)			100	2. ID Number
Vote Jimmy Do		usa sabarata C	DA	-1310 forms for each	Ema of Dichuman	
Operating E				ates/Political Committees		
4. Pavee Inform		Contributions to Can		dd Committees	Remove	ordinated Party Expenditures
	ing Address & Phone		T	.dd . Coordinated Committee I		d. Comments
a. Full Name, Maili (include city, state,	-	ļ	<u> </u>	Cool dinasca Commission	\\	G. Comments
ABCSIGNS BIZ			1			
5851 Larue Stei				Level Registered (Specify)	Α	4
Theodore, AL 3		ŀ	广	Federal Specing	County:	4
THEOGOTO, TALL	0302	ļ	١F	State	County: Municipality:	e. Election Sum to Date
		ļ	-] State	минсіранту.	e. Election Sum to Date
		ļ	1			\$ 4,143.69
f. Account Code	g. Form of Payment	h. Purpose Code	\Box	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
		<u> </u>	+			Yard Signs
001	Direct Dep	Α		03/11/2014	\$2,358.17	I atu signs
ļ			+	1		Yard Signs
001	Direct Dep	A		03/20/2014	\$1,785.52	I atu Signs
4. Payee Inform	ostion		A	dd T	Remove	
	ing Address & Phone		**********	Coordinated Committee !		d. Comments
(include city, state,	- 	· · · · · · · · · · · · · · · · · · ·	_	Coordinates States	Tame .	u. Comments
iStockPhoto	& zipj		1			1
Suite 200-1240	20th Ave SE	ŀ	c.	Level Registered (Specify)	Α	4
Calgary, Alberta		}		Federal Federal	County:	4
Canada Canada	1 12G TIVIG	ļ		State	County: Municipality:	e. Election Sum to Date
Canada		}	 	_ State	Municipanty.	e. Election Sum to Date
			<u>_</u>			\$ 54.90
f. Account Code	g. Form of Payment	h. Purpose Code	_	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Debit	Α		03/13/2014	\$54.90	Stock image
001	Deon		_	U3/13/2017	\$34.70	
ļ				-	\$	
To the state of th] -	N.				
4. Payee Inform		A	A		Remove	T
	ing Address & Phone	4.5	b.	Coordinated Committee N	Vame	d. Comments
(include city, state, &	& zip)	·	ı			
YouPrint.com				- 10		
8000 Haskell Av		j	. c.)	Level Registered (Specify)		
Van Nuys, CA 9) 1406	J	닏	Federal	County:	
ĺ		1	<u>_</u> _	State	Municipality:	e. Election Sum to Date
		ļ	t			\$ 507.92
	1	T. D. Code			- I	
f. Account Code	g. Form of Payment	h. Purpose Code	+	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Debit	A		03/31/2014	\$507.92	Business Cards
			_		420	
	1	1			\$	
		L.				
5. Total only this		There .		77/165		\$ 4,706.51
************************************	CRO-1310 Pages	200 110				
	line 13a of Detailed Sum				:	\$ 12,036.28
				Contrib to Candidates/Politi		Ψ 12,000.20
the state of the s				Coordinated Party Expendit	tures)	
	es (List detailed exp				200	STORY STORY
A* - Media E - Salaries	B* - Printing	C* - Funda		U	D - To Anothe	
E - Salaries I - Postage	F* - Equipment J - Penalties			•		Public Office Expenses
O* - Other	J - remanues	K* - Office	èL	kpenses	Q* - Donation	n to Legal Expense Fund
	e detailed explanation	on in required re	ma	rks field (k)		

Disburseme		from the committee	S	Pg for; operating expenses,	<u>3</u>	of	<u>5</u>	Amendment Yes	No
	coordinated party ex		:E 1	or, operating expenses,	Cont	ributions to	Canulua	пе/рописа:	
	ull Name (and Fun			172727-13				2. ID Number	
Vote Jimmy Do									Mil Market
3. Type of Disb	ursement <u>(Plea</u>	se use separate CI	RO)-1310 forms for each t	ope o	f Disburser	nent.)		
Operating E			did	ates/Political Committees			oordinate	d Party Expenditures	
4. Payee Inform				vdd (Serumbijumbili) (22 🔁 🕏		move	Т		
	ng Address & Phone	.]	b.	. Coordinated Committee N	ame		d. Co	mments	
(include city, state,									
RushOrderTees 11500 Roosevel		-	_	Level Designate and (Creeify)		, ,			
Building D2	ı Divu	-	г. Г	Level Registered (Specify) Federal		unty:			
Philadelphia, PA	A 19116		, F	State		nicipality:	e. Ele	ction Sum to Date	
i iiiaacipiiia, i i		1	<u> </u>						
							\$ 4	197.00	
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. A	mount	k. Re	quired Remarks	
001	Debit	A		03/31/2014	\$49	97.00	Tshi	rts	
					\$				
4. Payee Inform	ation .		Α	idd a 🗍	Re	move			
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee Name					mments	
(include city, state,	& zip)								
Doug Wade									
210 E. Ellis Dr Waynesville, Ol	EI 45040	-	c.	Level Registered (Specify)			-		
waynesvine, O	A 43006		-	_ Federal		inty: nicipality:	a Fla	ction Sum to Date	
				_ State	IVIU	incipanty.			
							\$ 1	50.00	
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. A	mount	k. Re	quired Remarks	
002	PayPal	A		03/26/2014	\$1:	50.00	Web	site coding	
					\$				
4. Payee Inform	ation	⊠	Α	√dd □	Re	move			
	ng Address & Phone		b.	. Coordinated Committee Na	ıme		d. Co	mments	
(include city, state,									
Fairway Outdoo PO Box 60125	r Funding, LLC	-		I I D (G			_		
Charlotte, NC 2	9260	-	e.	Level Registered (Specify)			_		
Charlotte, NC 2	8200		느	Federal	Col	anty:			

waynesville, OH 45068		Federal	County:		
			State	Municipality:	e. Election Sum to Date
					\$ 150.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
002	PayPal	A	03/26/2014	\$150.00	Website coding
				\$	
4. Payee Inform	mation	X	Add	Remove	
a. Full Name, Mai	ling Address & Phone	b. Coordinated Committee N	Name	d. Comments	
(include city, state	, & zip)				
•	or Funding, LLC				
PO Box 60125			c. Level Registered (Specify)) 	
Charlotte, NC 28260			Federal	County:	
			State	Municipality:	e. Election Sum to Date
					\$ 1955.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	A	04/01/2014	\$1955.00	Billboards
				\$	
5. Total only th	ois Page				\$ 2,602.00
	L CRO-1310 Pages				
	n line 13a of Detailed Sun				\$ 12,036.28
	=		0 if Contrib to Candidates/Politi	,	12,030.20
			0 if Coordinated Party Expendit	tures)	
	les (List detailed ex				A STATE OF THE STA
A* - Media E - Salaries	B* - Printing F* - Equipment	C* - Fund G - Politic			ner Candidate
I - Postage	J - Penalties		ce Expenses		g Public Office Expenses on to Legal Expense Fund
O* - Other			-	Z - Donath	on to began papense I unu
4 /1 3	re detailed explanati	ion in required re	emarks field (k)		The state of the s
* Codes requi					

D. 1				Ame
Disbursements	Pg	4	of 5	П

	Am	endment	
5		Yes	No

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

	Full Name (and Fun	d if applicable)			2. ID Number		
Vote Jimmy Do			TO 1210 E. W. Co. and				
3. Type of Disbu			CRO-1310 forms for each tyndidates/Political Committees				
4. Payee Inform		Contributions to Can	Add Committees		ordinated Party Expenditures		
	ing Address & Phone	<u> </u>	b. Coordinated Committee Na	Remove	d. Comments		
(include city, state,	-	en de la serie de la companya de la Companya de la companya de la compa	b. Containance Commissions	INIC	G. Comments		
	coadcasting Comp.		1				
4601 Six Forks		!	c. Level Registered (Specify)		-		
Raleigh, NC 276		!	Federal	County:	†		
1	307	ı	State	Municipality:	e. Election Sum to Date		
i		ı		winnerparity.	***		
ı		ı			\$ 1,200.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
001					Radio ads		
001	Debit	A	04/17/2014	\$1,200.00	Tamaio was		
				\$			
4. Payee Inform			Add	Remove			
	ing Address & Phone	 .	b. Coordinated Committee Na		d. Comments		
(include city, state,							
The Meda Corpo		,		· · · · · · · · · · · · · · · · · · ·			
65 Town Mount		l	c. Level Registered (Specify)		1		
Asheville, NC 2	18804	l	Federal	County:			
1		I	State Municipality:		e. Election Sum to Date		
		ļ					
					\$ 2,500.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
001	WireTransfer	Α	04/18/2014	\$2,500.00	Mailers		
	***************************************	A	VT/10/2011	\$2,500.00			
, J	1	1		\$			
		<u> </u>					
4. Payee Inform			Add	Remove			
	ing Address & Phone	·· All ·	b. Coordinated Committee Na	ime -	d. Comments		
(include city, state, &			4	1			
Wells Fargo Ban		ļ					
2000 W Main St	t	,	c. Level Registered (Specify)				
Durham, NC			Federal	County:			
		J	State	Municipality:	e. Election Sum to Date		
			ı		\$ 30.00		
- · · · · · · · · · · · · · · · · · · ·		I Boomere Code					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
001	Direct Dep	0	04/18/2014	\$30.00	Wire Transfer		
	 	+		+	Fee		
	ı İ	1	!	\$			
5. Total only this	<u> </u>	<u> </u>					
	is Page . CRO-1310 Pages			185	\$ 3,730.00		
	line 13a of Detailed Sum	Paga CRO-1100	o 'S On antino Europeas)	2000	ĺ		
) if Operating Expenses)) if Contrib to Candidates/Politica		\$ 12,036.28		
) if Contrib to Candidates/Politica) if Coordinated Party Expenditui				
	es (List detailed exp			res)			
A* - Media	B* - Printing	<u>penaнure code in ()</u> C* - Fundi		P. To Anothe	2 "1"		
E - Salaries	B* - Printing F* - Equipment			D - To Another			
I - Postage	J - Penalties		e Expenses		Public Office Expenses to Legal Expense Fund		
O* - Other			-	Q - Donacion	to Legai Expense runu		
* Codes require	e detailed explanatio	on in required re	marks field (k)	Marie State	19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		

					Amename	ent	
Disbursements	Pg	<u>5</u>	of	5	☐ Ye	es 🗌	No
Use this form to report expenditures from the committee for; operating ex	cpenses.	contrib	outions to	can	didate/political		

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

1. Committee Full Name (and Fund if applicable)						
Vote Jimmy Do		so uso soparata C	DΛ	1310 forms for each t	one of Dichurcan	ont)
			TRO-1310 forms for each type of Disbursement indidates/Political Committees Coo			ordinated Party Expenditures
4. Payee Inform				dd 📗	Remove	
a. Full Name, Mailing Address & Phone			b. Coordinated Committee Name			d. Comments
(include city, state, & zip)						
Chapelboro WCHL						
88 Vilcom Center Dr				Level Registered (Specify)		
Suite 130				Federal County:		
Chapel Hill, NC 27514				State	Municipality:	e. Election Sum to Date
						\$ 812.00
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Debit	A		04/18/2014	\$812.00	Radio Ads
					\$	
		F.Z.				
4. Payee Inform			 	dd 🔲	Remove	
a. Full Name, Mailing Address & Phone				b. Coordinated Committee Name		d. Comments
(include city, state,	& zip)					
PayPal				a Laval Dagistared (Specify)		
2211 North First Street San Jose, CA 95131			c. Level Registered (Specify) Federal County:			·
402-935-2050	71.51		╏┝	State	Municipality:	e. Election Sum to Date
402-733-2030			_		iviumeipanty.	\$ 16.55
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				<u> </u>	,	Donation fee
002	Electronic	О		03/22/2014	\$1.75	2.9% + \$0.30
000	F1			0.4/1.0/0.01.4	01400	Donation fee
002	Electronic	О		04/13/2014	\$14.80	2.9% + \$0.30
4. Payee Information				dd 🔲	Remove	The State of the S
a. Full Name, Mailing Address & Phone				b. Coordinated Committee Name		d. Comments
(include city, state,	& zip)	*. *				
-						
				c. Level Registered (Specify)		
			╽┝	_ Federal	County:	
				_ State	Municipality:	e. Election Sum to Date
						\$
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
					\$	
					\$	
5. Total only thi	s Page				1	\$ 828.55
6. Total of ALL CRO-1310 Pages						1
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)						\$ 12.036.28
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						\$ 12,036.28
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	es (List detailed ex		A			
A* - Media E - Salaries	B* - Printing F* - Equipment	C* - Fund G - Politic			D - To Anothe	r Candidate Public Office Expenses
I - Postage J - Penalties K* - Office				,		rublic Office Expenses 1 to Legal Expense Fund
O* - Other				•	2 20114101	- 12 — 38ar Sapense I unu
* Codes require	e detailed explanati	on in required re	ma	ırks field (k)	100	Secretary and the second second



Kimberly Westbrook-Strach Deputy Director – Campaign Reporting Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173 Fax: (919) 715-8047

Contribution from a Business Account Statement

This Statement allows a committee to accept a check from a business account where the contributor declares that they have no personal checking account and that the funds are their own personal funds.

I, <u>Alan North</u> am the individual making the contribution of \$ 1,000.00 to the <u>Vote Jimmy</u> Doster Committee.

The account from which the funds are drawn is in the name of Norlinx INC.

Check if the contribution is a draft from a paycheck.

I do not have a personal checking account, in my name, from which this contribution could be made <u>or</u> this contribution is made as a result of a draft from personal funds. If the contribution is a draft, please include a written statement from the employer. This statement should be a signed agreement by the contributor that the funds drafted were derived from the personal salary of the contributor.

The funds from which this contribution is derived are my own personal funds and not that of any other individual or "business entity". For purposes of this **Statement**, the term "business entity" will include any "corporation, business entity, labor union, professional association, or insurance company".

I further understand that by signing this **Statement** I am declaring all of the above information is true and accurate. Signing this **Statement** with any portion <u>not</u> being true could result in a Class 2 Misdemeanor.

Signature of Contributor

Note to the treasurer: Please attach a photocopy of the check submitted with this Statement. Maintain this information in your records to be made available upon request.

NORLINX INC 5100 Unicon Dr Ste 110 Wake Forest, NC 27587-5051

April 23, 2014

To Whom It May Concern:

This statement serves as a signed confirmation that the \$1,000.00 contributed to the *Vote Jimmy Doster* Committee on or around 03/17/14 were drafted and derived from the personal salary of Alan North.

This statement accompanies CRO-6300.

Alan North Owner

Norlinx, INC