Disclosure Report Cover	Yes
Use this form for general report and committee information, must be signed and submitted along with a	other detailed forms

Amendment

Do not use this form	ı to upd	late information	<del></del>						
1. Committee Infor	matior	n							
a. Full Name								c. ID Number	
Committee to Elect	Lisa G	ordon Stella							
b. Mailing Address (inc	Inde Cit	v State and Zin Code)						d. Date Filed	
4325 Swarthmore R	<u>.</u>	/, State and Zip Code/							
Durham, NC 27707								07/07/2014	
								e. Phone Number	
								919-274-5719	
2. Report Year	3. Per	riod Start Date (mm/d	d/yy)	4. Period I	End Da	Date 5. Treasurer Full Name			
2014		04/20/2014			0/2014		Jane Helen Stella		
6. Type of Commit	tee (Ch	eck One)	9. Ty	pe of Report	(c)	heck o	only one type of report f	from one category)	
		Party	Munici				County	Referendum	
Candidate Campa PAC	Ī	Referendum		Organizational			Organizational	Organizational	
Independent Expenditure	[	Joint Fundraiser		Thirty-five day			Quarterly	Pre-referendum	
Legal Expense For Type of Fund		plicable, check one)		Pre-primary			F::4	Pin-1	
"Booster Fund"	(ij app	)licable, check one)		-			First	Final  Supplemental Final	
Building Fund			, <del>   </del>	Pre-election Pre-runoff			Second	Supplemental Final	
Dunuing Fund				Pre-runoii Semi-annual			Third Fourth	Annual Special	
				Mid Year	.		Semi-annual	Special	
Other:			ıП	Year End			Mid Year	10. Special Report Name	
			ī	Final			Year End	10. Openia Report Maine	
8. Number of Fund	raisers	s this Report	ıΠ	Special		×	Final		
				- P			Special	,	
11. Account Inform	0			<del></del>	11 A	<u> </u>			
a. Financial Institution							Information		
Fidelity Bank	Pull Nam	16			a. Finat	)CIAI ID:	stitution Full Name		
b. Purpose		c. Account Code			b. Purp			1	
For all		C. Account Cour			v. rurp	ose		c. Account Code	
campaign		01			i				
expenses.	ŀ	d. Period Begin Balance			i			d Davied Dagin Relance	
onponoos.	}	1 697 97						d. Period Begin Balance	
		\$ 1,097.97						\$	
CERTIFICATION									
I certify that the Con	nmittee	or Fund is in complication	ance wi	ith all applica	ble prov	visions	s of Article 22A, 22B, &	& 22D-22M of Chapter 163 of	
the NC General State	utes and	d that no funds are cor	mming	led with prohi	ibited or	r other	r non-disclosed funds. I	further certify that this report	
		et and that I have been	trainec	d by the NCS	tate Bo	ard of	Elections.	21/2/	
<u> Jar</u>	1e "	DIEILA		- A	De Ne		tetto	+/+/2014	
FOR OFFICE USE O		N-PERSO		//51	gnature of	f Appoi	inted Treasurer	Date /	
	MILI	HA.I Price.	• •					Nationamy Mathad	
Date Received:		JUL 0 7 2014		Employee:		-		Delivery Method Normal Mail	
Date Postmarke	d:	DURHAM BO	0E	Employee:		<del> </del>	<u> </u>	Registered Mail Hand Delivered	
Date Scanned:				Employee:				Electronically Filed Signer has not received	
Date Data Enter	ed:			Employee:				mandatory training	
Please Note: Thi	is form	cannot be used to ame	end cor	mmittee infor	mation	such a	s the committee addres	s, treasurer, assistant treasurer,	
	Vour						A-E) to make committee	1	
	LUun	nust amend the statem	ICIII OI	Organization	(CRO-	21007	1-E) to make committee	e changes.	

Amendment

☐ Yes

1

No No

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
The Committee to Elect Lisa Gordon Stella	Fin	9)	
Start of Election Cycle: January 1,	2011	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 1,697.97	\$ 100.00
RECEIPTS			······································
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 100.00	\$ 689.33
6) Contributions from Individuals	(CRO-1210)	\$ 325.00	\$ 3,918.58
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$	\$
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$	\$
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$
11b) Contributions from Not-for-Profit Organization		\$	\$
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, 11	c, IId and IIe)	\$ 425.00	\$ 4,607.91
<u>EXPENDITURES</u>			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 2,122.97	\$ 4,614.33
13b) Contributions to Candidates/Political Commit	tees (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)	\$ 0.00	\$ 93.58
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1.	5, 16 and 17)	\$ 2,122.97	\$ 4,707.91
19) Cash on Hand at End (Add lines 4 and 12 together, then sub-	tract line 18)	\$ 0.00	\$ 0.00
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaign	rs) <i>(CRO-1430)</i>	\$	
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)	\$	\$
CDO 1100	(CNO-1213)	Ψ	1-10

## **Aggregated Contributions from Individuals**

Page

<u>1</u> of

Yes

 $\boxtimes$ 

No

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

				l if applicable)			2. ID N	lumber	
The Committee to Elect Lisa Gordon Stella									
3.	Conti	ibutor Inform	ation						
a.	Amend		b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	)	f. Amount	
<u>V</u>		Add Remove	01	Check		04/21/20	14	\$ 50.00	
Σ	7	Add				<del> </del>			
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	]	Add						\$	
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Ī	]	Remove	1					\$	
		al only this l					\$	100.00	
5	. Tota	al of ALL C	RO-1205 P	ages			\$	100.00	
L	(This line must be on line 5 of Detailed Summary Page CRO-1100)								

Use this f	orm to report indi-	71 <b>444</b>	7701 950	or continuations and	• • • • • • • • • • • • • • • • • • •	0 1200 10 1100		
1. Comm	ittee Full Name (	and Fund if applical	ble)			2. ID Num	ber	
The Com	mittee to Elect Lis	a Gordon Stella						
3. Contri	butor Informatio	n	$\boxtimes$	Add 🗌 Ren	nove			
	e, Mailing Address &	Phone		b. Job Title/Profession		d. Comments	l	
(include city, state, & zip)				Property Manager		į		
Elizabeth Morey 6817 Huntingridge Road				c. Employer's Name/Sp	secific Field			
	ill, NC 27517			Self	eme i ica	-		
	,					e. Election Su	ım to Date	
						\$	250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/yy	уу)	k. Amount	
	01	CreditCard		·	04/21/2	014	\$	250.00
							\$	
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3. Contri	butor Informatio	on .		<del></del>	move			
l .	ie, Mailing Address &	& Phone		b. Job Title/Profession		d. Comments	3	
(include of Brian Au	city, state, & zip)			Attorney at Law				
5826 Wil				c. Employer's Name/Sp	pecific Field			
	NC 27712			Self				
						e. Election Sum to Date		
						\$	75.00	
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f. Prior	g. Account Code	b. Form of Payment Check	i. In-l	Kind Description	j. Date (mm/dd/yy	/yy)	T	75.00
f. Prior			i. In-l	Kind Description		/yy)	k. Amount	75.00
f. Prior			i. In-l	Kind Description		/yy)	k. Amount	75.00
		Check	i. In-l			/yy)	k. Amount \$	75.00
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3. Contri	01 ibutor Information	Check	i, In-l	Add □ Re	04/28/2 move	014	k. Amount  \$ \$	75.00
3. Contri	01 ibutor Informatione, Mailing Address o	Check	i. In-l	Add Rei	04/28/2 move	014	k. Amount  \$ \$	75.00
3. Contri	01 ibutor Informatione, Mailing Address o	Check	i. In-l	Add □ Re	04/28/2 move	014	k. Amount  \$ \$	75.00
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3. Contri	01 ibutor Informatione, Mailing Address o	Check	i, In-l	Add Rei	04/28/2 move	d. Comments	k. Amount  \$ \$ \$	75.00
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3. Contri	01 ibutor Informatione, Mailing Address of city, state, & zip)	Check On & Phone		Add Rei b. Job Title/Profession c. Employer's Name/S	move	d. Comments e. Election St	k. Amount  \$ \$ \$ \$ s	75.00
3. Contri	01 ibutor Informatione, Mailing Address of city, state, & zip)	Check On & Phone		Add Rei b. Job Title/Profession c. Employer's Name/S	move	d. Comments e. Election St	k. Amount  \$ \$ \$ \$  um to Date	75.00
3. Contri	01 ibutor Informatione, Mailing Address of city, state, & zip)	Check On & Phone		Add Rei b. Job Title/Profession c. Employer's Name/S	move	d. Comments  e. Election St  syyy)	k. Amount  \$ \$ \$ \$ s  um to Date  k. Amount  \$	
3. Contri a. Full Nan (include of	01 ibutor Informatione, Mailing Address of city, state, & zip)	Check On & Phone h. Form of Payment		Add Rei b. Job Title/Profession c. Employer's Name/S	move	d. Comments e. Election St	k. Amount  \$ \$ \$ \$ s  um to Date  k. Amount  \$	75.00

**Contributions from Individuals** 

Amendment

**Disbursements** 

Pg <u>1</u>

of 4

Amendment
Yes

No

 $\boxtimes$ 

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

	ull Name (and Fun							2. ID Number
The Committee	to Elect Lisa Gordon	n Stella	_					
3. Type of Disbu	ursement (Plea	ase use separate C	RO-	1310 forms for a	each ty	pe of Disbursem	ent.)	<u> </u>
Operating E		Contributions to Can		tes/Political Committ				ed Party Expenditures
4. Payee Inform	nation	×	Ad	ld		Remove		4
a. Full Name, Maili	ing Address & Phone		b. (	Coordinated Comm	ittee Na		d. Co	omments
(include city, state,								, , , , , , , , , , , , , , , , , , ,
Harris Teeter						;		
1125 West NC 5	54 Hwy	,	c. I	Level Registered (Sp	necify)		1	
Durham, NC 27	•	!		Federal	$\boxtimes$	County:	1	
919-403-0794	70.	ı	门	State	Ħ	Municipality:	e. Ele	ection Sum to Date
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l		!				I	\$ 7	73.24
f. Account Code	g. Form of Payment	h. Purpose Code	Ti	i. Date (mm/dd/yyy	y)	j. Amount	k. Re	equired Remarks
01	CreditCard	0	$\Box$	04/06/0014		ACC (0		d for meet/
01	CreditCaru	0		04/26/2014	_!	\$56.68		et mtg.
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<u></u> !					. !	\$		
4. Payee Inform	ation	$\boxtimes$	Ad	id		Remove	J	
	ing Address & Phone		b. (	Coordinated Commi	ittee Na		d. Co	omments
(include city, state,	<del>-</del>							
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paperlesspost@			c. L	Level Registered (Sp	ecify)		1	
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			$\perp$					
4. Payee Inform	ation		Add			Remove		
a. Full Name, Mailir	ng Address & Phone		b. C	Coordinated Commi	ittee Na	me	d. Co	mments
(include city, state,	& zip)		Ī					
Costco			I			!	İ	
1510 North Poin	nte Dr	I	c. Level Registered (Specify)				l	
Durham, NC 27	705	1		Federal	Ø	County:	1	
				State	$\Box$	Municipality:	e. Ele	ection Sum to Date
		1	<u> </u>			***************************************	1	
			i				\$ 3	324.84
f. Account Code	g. Form of Payment	h. Purpose Code	$\prod$ i	i. Date (mm/dd/yyyy	y)	j. Amount	k. Re	quired Remarks
01	Cook		T	06/06/0014				d/drink for
01	Cash	О	'	06/06/2014	)	\$263.16	i	nk-you party
		ĺ						in you party
						\$	l	
5. Total only thi						•	\$	324.84
	CRO-1310 Pages							
	line 13a of Detailed Sumi		-				4	2 122 07
	line 13b of Detailed Sumi						\$	2,122.97
(This line goes in l	line 13c of Detailed Sumi	mary Page CRO-1100	if Cod	ordinated Party Exp				
	es (List detailed exp	penditure code in (	h.) a	above)	*****************			
A* - Media	B* - Printing	C* - Fund			<del></del>	D - To Anothe	r Cand	lidate
E - Salaries	F* - Equipment							Office Expenses
I - Postage	J - Penalties	K* - Office	e Ex	penses				egal Expense Fund
O* - Other	1-4-9-dmlomo#	• •						
* Codes require	e detailed explanati	on in required re	mar	/ks field (k)				

**Disbursements** 

Pg <u>2</u>

of 4

Yes

Amendment

ľ

 $\boxtimes$ 

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)  2. ID Number							
	to Elect Lisa Gordon							
3. Type of Disbu	ursement (Plea	ise use separate C	RO-13	10 forms for	each t	vpe of Disbursen	ient.)	
Operating Ex		Contributions to Can						ed Party Expenditures
4. Payee Inform		$\boxtimes$	Add			Remove		
<del></del>	ing Address & Phone			ordinated Comm	ittee Na		d. Ce	omments
(include city, state,	•						+	
Harris Teeter	ос дру		1					
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	34 Hwy		C. L.C.				4	
Durham, NC			出	Federal	$\boxtimes$	County:	<u></u>	_
919-403-0794			Ш	State	<u> </u>	Municipality:	e. Ele	ection Sum to Date
					· 		\$ 1	100.22
f. Account Code	g. Form of Payment	h. Purpose Code	i. I	Date (mm/dd/yyy	/ <b>y</b> )	j. Amount		equired Remarks
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	CreditCard	0	V	3/06/2014		\$26.98	1	party
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ı İ					1	\$		
4. Payee Inform	ation		Add		П	Remove		
	ing Address & Phone		<del></del>	ordinated Commi	ittee Nr		Td. Cc	omments
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(include city, state, a Harris Teeter	& zipj		1					
		į	<u> </u>	3.60			4	
1125 West NC 5	54 Hwy	į	c. Leve	el Registered (Sp			1	
Durham, NC		į		Federal	$\boxtimes$	County:		
919-403-0794		į		State		Municipality:	e. Ele	ection Sum to Date
I		I					\$ 1	143.69
f. Account Code	g. Form of Payment	h. Purpose Code	i. r	Date (mm/dd/yyy	/v)	j. Amount	k. Re	quired Remarks
		-			<i>"</i>			nk for Thank
01	CreditCard	0	06	6/06/2014	ľ	\$43.47	1	
		<del></del>	-				you	party
	1	1			,	\$		
4. Payee Inform	42		Add		—	<u></u>	<del></del>	
	<del></del>	<u> </u>	b. Coordinated Committee Name			Remove	1 - 0-	
•	ing Address & Phone	ļ	b. Coo	rdinated Commi	ittee Na	ıme	d. Co	omments
(include city, state, &	<u>&amp; zip)</u>		1					
Durham ABC		ļ						
Location 014		ļ	c. Leve	c. Level Registered (Specify)				
		•		Federal	X	County:	1	
		Ī		State	$\Box$	Municipality:	e. Ele	ection Sum to Date
		•			ш	1714111-1-1		
		The second					ļ ·	48.04
f. Account Code	g. Form of Payment	h. Purpose Code	i. D	Date (mm/dd/yyyy	<u>y)</u>	j. Amount		quired Remarks
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	1	1			J	\$		
5. Total only this	is Page		<del></del>			1	\$	118.49
	CRO-1310 Pages						Ψ-	110.77
	line 13a of Detailed Sumi	mary Page CRO-1100	if Opera	otina Evnenses)				
	line 13b of Detailed Sumi				m <sub>alitics</sub>	* C	\$	2,122.97
	line 13c of Detailed Sumi							•
					enauur	es)		
	es (List detailed exp				<u></u>			
A* - Media	B* - Printing	C* - Fund	_	,		D - To Anothe		
E - Salaries	F* - Equipment					H* - Holding	, Public	: Office Expenses
I - Postage	J - Penalties	K* - Offic	e Exper	nses		Q* - Donatio	n to Le	egal Expense Fund
O* - Other	T 4 41 Townshound	• • • • •	•					
* Codes require	e detailed explanati	on in required re	marks	i field (k)				1

**Disbursements** 

<u>3</u>

Yes

Amendment

 $\boxtimes$ 

No

of <u>4</u> 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 Number
	to Elect Lisa Gordon					
3. Type of Disbu			CRO-1310 forms for			
Operating Ex			ndidates/Political Comm	ittees		Coordinated Party Expenditures
4. Payee Inform	ation	$\boxtimes$	Add		Remove	
a. Full Name, Maili	ing Address & Phone		b. Coordinated Com	mittee N	ame	d. Comments
(include city, state,						
Guglhupf Baker	-					
2706 Durham C	hapel Hill Blvd		c. Level Registered (	Specify)		
Durham, NC	•		Federal	$\boxtimes$	County:	7
919-401-2600			State		Municipality:	e. Election Sum to Date
				<del></del>	<u> </u>	\$ 184.90
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/y	ууу)	j. Amount	k. Required Remarks
01	CreditCard	0	06/07/2014		\$184.90	Food for Thank
01	Clouica		00/07/201.		Ф107.20	you party
					\$	
	<u>[</u>	<u> </u>				
4. Payee Inform		$\boxtimes$	Add		Remove	
a. Full Name, Mailir	ing Address & Phone		b. Coordinated Com	mittee Nr	ame	d. Comments
(include city, state,						
The Original Q						
2510 University	Drive		c. Level Registered (	Specify)		7
Durham, NC 27			Federal		County:	7
919-402-4227			State		Municipality:	e. Election Sum to Date
						\$ 347.66
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/y)		j. Amount	k. Required Remarks
				/33)	1.	Food for Thank
01	CreditCard	0	06/07/2014		\$347.66	
						you party
	!				\$	
4. Payee Inform	estion		Add		Remove	
	ng Address & Phone	<u>K-3</u>	b. Coordinated Com	ittee N		d. Comments
Ť	•		D. Coordinated Com-	Mittee	ame	d. Comments
(include city, state, d			4			
_	ing & Tax Service	I		- :0.		_
1224 Bushy Coo		I	c. Level Registered (			_
Efland, NC 2724	43	I	Federal	$\boxtimes$	County:	
919-304-6364		I	State		Municipality:	e. Election Sum to Date
· ·····						\$ 225.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yy	ууу)	j. Amount	k. Required Remarks
01	Check	О	6/20/2014	<del></del> -	6225 00	Tax preparation
V1	CHECK		0/20/2017		\$225.00	for non-profit
	,				\$	
	<u> </u>	<u>L</u>			<b>_</b>	
5. Total only thi						\$ 757.56
6. Total of ALL	CRO-1310 Pages			_		
	line 13a of Detailed Sum	-	/	•		<u>ቀ</u>
(This line goes in l	line 13b of Detailed Sum	mary Page CRO-1100	) if Contrib to Candidat	es/Politica	al Comm)	\$ 2,122.97
	line 13c of Detailed Sumi				•	
	es (List detailed exp	penditure code in	(h.) above)			
A* - Media	B* - Printing	C* - Fund	<del></del>		D - To Anot	ther Candidate
E - Salaries	F* - Equipment					ng Public Office Expenses
I - Postage	J - Penalties		ce Expenses			ion to Legal Expense Fund
O* - Other			•		_	
* Codes require	e detailed explanati	on in required re	marks field (k)			l

Pg 4 of

Amendment Yes

 $\boxtimes$ 

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 Fun				2. ID Number				
The Committee	to Elect Lisa Gordon	n Stella							
3. Type of Disbu	3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)								
Operating E	xpenses	Contributions to Car	didates/Political Committees	□ c	oordinated Party Expenditures				
4. Payee Inform	ation	$\boxtimes$	Add	Remove					
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee	Name	d. Comments				
(include city, state,	-								
PayPal	<u></u>								
www.paypal.com	m		c. Level Registered (Specif	v)	7				
			Federal X		7				
			State	Municipality:	e. Election Sum to Date				
				i wantoipunty.	C Diction Sum to Date				
					\$ 101.39				
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks				
I Account Code	g. Torm of Layment		L Date (min/dd/yyy)	J. Amount	PayPal Fees				
01	Cash	0	Q2 Total	\$10.70	rayrai rees				
				\$	1				
A Davisa Inform	ation		Add						
4. Payee Inform		<u>\</u>		Remove					
-	ng Address & Phone		b. Coordinated Committee	Name	d. Comments				
(include city, state,									
Thomas Mentor	•	;							
Academy	y		c. Level Registered (Specif						
PO Box 15835			Federal 🗵	-	:				
Durham, NC 27	704	İ	State	Municipality:	e. Election Sum to Date				
800-380-1726					\$ 911.38				
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks				
0.1	C1 1				Donation to non				
01	Check	О	06/23/2014	\$911.38	profit				
				\$					
4. Payee Inform	ation	П	Add	Remove					
	ng Address & Phone		b. Coordinated Committee		d. Comments				
(include city, state,	9								
(include city) state,	E. P. J								
			c. Level Registered (Specif	u)	<del>- </del>				
			Federal Federal	County:	<del>-</del>				
			State	•	- Flores Contact				
			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	<del> </del>				\$ 922.08				
6. Total of ALL	CRO-1310 Pages								
(This line goes in l	line 13a of Detailed Sum	mary Page CRO-1100	if Operating Expenses)		\$ 2,122.97				
(This line goes in l	ine 13b of Detailed Sum	mary Page CRO-1100	if Contrib to Candidates/Poli	tical Comm)	\$ 2,122.97				
(This line goes in l	ine 13c of Detailed Sum	mary Page CRO-1100	if Coordinated Party Expend	itures)					
7. Purpose Code	es (List detailed exp	penditure code in (	h.) above)						
A* - Media	B* - Printing	C* - Fund		D - To Anoth	ner Candidate				
E - Salaries	F* - Equipment				g Public Office Expenses				
I - Postage	J - Penalties	K* - Offic	e Expenses	Q* - Donatio	on to Legal Expense Fund				
O* - Other	a datailad! ''		4. <b>6</b> 11.05						
- Codes require	e detailed explanati	on in required re	marks field (k)						

## IN-PERSON

JUL 0 7 2014

## DURHAM BOE

North Carolina
State Board of Elections

441 N Harrington Street Raleigh, NC 27603

Kim Westbrook Strach Executive Director

FILED BY:

Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173 Fax: (919) 715-8047

## **Certification to Close Committee**

This Certification is used to express the intent to close the committee after all funds have been properly disbursed.

Committee Name:	Committee to Elect Lisa Gordon Stella	
Treasurer Name:	Jane Stella	
Treasurer Address:	115 Diamond Head Drive	
(include city, state, & zip)	Durham, NC 27705	
_		
Treasurer Phone:	303-378-6940	

I certify that the above mentioned Committee intends to close and cease existence. Upon signing this certification, I declare that all funds have been distributed and reported (if required). In addition, no contributions will be accepted or disbursements made after the "Final Report" is filed or this form is signed. If the Committee at any future time intends to accept or spend funds in support or opposition of any candidate or ballot issue, a new political committee must be formed and registered with the Board of Elections before such activities may commence.

Committees that have filed under the \$1,000 threshold will only be required to sign this Certification. No "Final Report" will be required for committees meeting this criterion. Any Committee that did not file under the \$1,000 threshold must submit a "Final Report" with this Certification. This report must have a zero balance with no outstanding loans or debts.

Signature

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.