

AMENDMENT

## North Carolina

### State Board of Elections

506 N Harrington Street Raleigh, NC 27603

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

## **Certification of Threshold**

This Certification is used by Candidate and Party Committees only, to declare or withdraw the committee's intent to raise or spend under \$1,000 in the current election cycle.

FILED BY:	
Committee Name:	Committee To Elect Tony Rose For School Board
Treasurer Name:	Anthony Glenn Rose
Treasurer Address:	1706 Stratford Road
(include city, state, & zip)	Burlington, NC 27217
Treasurer Phone:	336-684-7835
election cycle under the proc until the end of the election of expenditures during this elec- of elections and file required	tee intends to neither receive nor expend more than \$1,000 during the current edures set forth in G.S. 163-278.10A. This certification will remain in effect cycle for this committee. If this committee exceeds \$1,000 in contributions or tion cycle, I understand that I must immediately notify the appropriate board campaign finance reports.  I ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE.
the next scheduled report for	tification to remain under the \$1,000 threshold. I will now be required to file all contributions and expenditures that have not been previously reported from lection cycle. I further agree to file all future reports required.
3/12/2010 Date Signed	Intus Signature Signature

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed. 03-12-10P04:04 RCVD

Disclo	sure	Report	Cover
DISCIU	75 ti t	Mchott	COVEL

03-12-10P04:04 RCVD

Disalasuus Da			03-12-	10P04:	04 F	RCAD	Amend	lment
Disclosure Re	<b>=</b>							Yes No
Ose this form for ger	neral report and committee it to update information	informat	ion, must be	e signed a	ind sub	mitted along with o	other de	tailed forms.
1. Committee Infor	<del></del>							
a. Full Name	mation	<del></del>					1 75	
	Tony Rose For School Box	urd.		<del></del>			c. ID	Number ID 47/00
Committee to Lice	. Tony Rose For School Box	11 (1						ID4ZC9
	ude City, State and Zip Code)						d. D:	ate Filed
1706 Stratford Road Burlington, NC 272								01/29/2010
Ì							e. Ph	ione Number
		_						336-684-7835
2. Report Year	3. Period Start Date (mm/c	ld/yy)	4. Period (mm/dd/yy)	End Date	e	5. Treasurer Ful	l Name	;
2010	03/12/2010		03/1	12/2010		Anthony G. Rose	;	
6. Type of Committ	ee (Check One)	9. Typ	e of Report	t (ch	eck on	ly one type of repor	t from e	one category)
Candidate Campa	ign Party	Municip	pal		State/Co			rendum
PAC	Referendum		Organizationa	l		Organizational		Organizational
Independent Expenditure Legal Expense Fu	Joint Fundraiser		Thirty-five day	y	(	Quarterly		Pre-referendum
7. Type of Fund	(if applicable, check one)		Pre-primary			First		Final
"Booster Fund"	(i) approadore, eneck oney	lH	Pre-election		片	Second	$\parallel$	Supplemental Final
Building Fund		ĺĦ	Pre-runoff		Ħ	Third	11	Annual
Ţ			Semi-annual		H	Fourth		Special
			Mid Year	г	<u></u> 5	Semi-annual		
Other:			Year End	i		Mid Year	10. 9	Special Report Name
			Final			Year End		<u> </u>
8. Number of Funda	aisers this Report		Special			inal Special		
11. Account Inform	ation			11 400		nformation		<del></del>
a. Financial Institution F						tution Full Name		
Randolph Bank	··· <u>·</u>					totton i un i tame		
b. Purpose	c. Account Code			b. Purpos	se		c. A	Account Code
Campaign	1					,		
	d. Period Begin Balance	··					d. I	Period Begin Balance
	\$ 0.00						\$	
CERTIFICATION	<u></u>	<del></del>		<u></u>				<del></del> ·
	mittee or Fund is in compli	ance wit	h all annlica	hla provi	cione o	of Article 22 A 22 D	e. วาก	) 12M of Chapter 162 of
the NC General Statu	tes and that no funds are co	mminole	n an appica ed with prob	ibited or	other n	on Article 22A, 22B	, ∝ ∠∠L · I fueth	9-22 WI OI Chapter 103 01
is complete, true and	correct and that I have been	trained	by the NC §	tate Boar	rd of E	lections.	. I lulli	ter certify that this report
Anthony G.			- /	motile.	n ~ 1	Vac	03/12/2	2010
	Printed Name of Signer			<del>11 </del>		ed Treasurer		Date
FOR OFFICE USE O	NLY			• • •				
Date Received:	3-12-2010	)	Employee:	_	JG	<u>5</u>		<u>ry Method</u> Normal Mail
Date Postmarked	:		Employee:	_				Registered Mail Hand Delivered
Date Scanned:			Employee:	_				Electronically Filed
Date Data Entere	ed:		Employee:	_		- 		Signer has not received mandatory training
DI 37								
Please Note: This	form cannot be used to am custodia		mittee infor ks informat				ess, trea	asurer, assistant treasurer,

CRO-1000

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes. NC State Board of Elections

 $\times$  $N_0$ 

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 Penert.

1. Committee Full Name (and Fund if applicable)	2. Type of Report				
Committee To Elect Tony Rose For School Board	Organizational		ID4ZC9		
Start of Election Cycle: January 1,	2007	Total this Reporting Period	Total this Election Cycle		
4) Cash on Hand at Start		\$ 0	\$ 0		
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 250.00	\$ 250.00		
6) Contributions from Individuals	(CRO-1210)	\$ 936.41	\$ 936.41		
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		NOTE AND DESCRIPTION			
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0.01	\$ 0.01		
11b) Contributions from Not-for-Profit Organizat	ions <i>(CRO-1250)</i>	\$	\$		
11c) Outside Sources of Income	(CRO-1250)	\$ 0.11	\$ 0.11		
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, 1	lc, 11d and 11e)	\$ 1186.53	\$ 1186.53		
<b>EXPENDITURES</b>					
13) Disbursements		VALUE AND ALL AND			
13a) Operating Expenditures	(CRO-1310)	\$ 208.54	\$ 208.54		
13b) Contributions to Candidates/Political Comm	ittees (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)	\$ 16.41	\$ 16.41		
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14.	15, 16 and 17)	\$ 224.95	\$ 224.95		
19) Cash on Hand at End (Add lines 4 and 12 together, then su	btract line 18)	\$ 961.58	\$ 961.58		
ADDITIONAL INFORMATION	n partition de la california de la calif				
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$			
21) Outstanding Loans (incl. ones from other campaig	gns) <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)	\$	\$		

		n Individuals vidual contributions o	ver \$50	or contribution	Pg ns under	<u>1</u> of r \$50 if form CRO	<u>3_</u> O 1205 is no	Amendment Yes	⊠ No	
		and Fund if applical					2. ID Num			
Committe	e To Elect Tony F	Rose For School Boar	d				ID4ZC9			
3. Contri	butor Informatio	n		Add 🗌	Rem	ove				
	ie, Mailing Address &	2 Phone		b. Job Title/Pro			d. Comment	s		
	ity, state, & zip)			Asst. Dir of	IS&T					
-	Glenn Rose tford Road			e. Employer's N	Jama/Sna	cific Field				
	n, NC 27217		,	Elon Univers		cinc i icia				
Burmgio	,				-117		e. Election S	um to Date		
336-684-	7835		i				\$			
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description		j. Date (mm/dd/yy	yy)	k. Amount		
	1	Cash		01/29/			)10	\$	50.00	
		In-Kind	Dom	Domain Names 02/01/2			010	\$	8.74	
		In-Kind	Dom	omain Name 02/06/2			010	\$	7.67	
3. Contri	butor Informatio	n		Add 🗌	Rem	ove				
	ie, Mailing Address &	& Phone		b. Job Title/Profession			d. Comment	S		
	ity, state, & zip)			Asst. Dir of IS&T						
-	Glenn Rose tford Road			e. Employer's N	Name/Snc	cific Field				
	n, NC 27217			c. Employer's Name/Specific Field  Elon University						
24	.,				,		e. Election Sum to Date			
336-684-	7835					!	\$	186.41	1	
f. Prior	g. Account Code	h. Form of Payment	i, In-K	ind Description		j. Date (mm/dd/yy	yy)	k. Amount		
	1	Check				02/08/20	010	\$	20.00	
	1	Check			:	03/05/2	010	\$	100.00	
				<del></del>				\$		
3. Contri	butor Informatio	on		Add 🗌	Rem	ove	<del></del>			
	ie, Mailing Address &	& Phone		b. Job Title/Pro	ofession		d. Comment	is		
	eity, state, & zip)			Retired			<u> </u>			
Glenn Rose 1810 Wellington Road				a Employante Nama/Specific Etald			{			
	n, NC 27217			c. Employer's Name/Specific Field N/A			-			
Darmgto	u, 140 2 (21)			1			e. Election S	um to Date		

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

CRO-1210

336-584-9132

1

1

4. Total only this Page

5. Total of ALL CRO-1210 Pages

g. Account Code

f. Prior

h, Form of Payment

Cash

Check

i. In-Kind Description

50.00

100.00

336.41

936.41

\$

\$

\$

j. Date (mm/dd/yyyy)

01/29/2010

02/15/2010

150.00

\$

\$

\$

k. Amount

### **Contributions from Individuals**

						Amer	iament		
ndividuals		Pg	2	of	3_		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 Committee To Elect Tony Rose For School Board ID4ZC9 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Security Officer John M. Ferettino 2714 W. Front Street c. Employer's Name/Specific Field Burlington, NC 27215 Elon University e. Election Sum to Date 336-278-5555 100.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount 02/11/2010 S 100.00 1 Check  $\Box$ \$ \$ 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Retired Dexter Barbee 127 Meadowood Drive c. Employer's Name/Specific Field N/A Burlington, NC 27215 e, Election Sum to Date 336-584-1178 250.00 i. In-Kind Description j. Date (mm/dd/yyyy) g. Account Code h, Form of Payment k. Amount f. Prior \$ 1 Check 02/15/2010 250.00 \$ S 3. Contributor Information Add Remove b. Job Title/Profession a. Full Name, Mailing Address & Phone d. Comments Retired (include city, state, & zip) Daniel James 1660 Stratford Road e. Employer's Name/Specific Field N/A Burlington, NC 27217 e. Election Sum to Date 336-584-6865 \$ 100.00 i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount f. Prior g. Account Code h, Form of Payment S Check 02/20/2010 100.00 \$ S 4. Total only this Page \$ 450.00 5. Total of ALL CRO-1210 Pages \$ 936.41 (This line must be on line 6 of Detailed Summary Page CRO-1100)

		n Individuals vidual contributions o	ver \$50	or contrib	Pg outions unde	<u>3</u> of r \$50 if form CRC	<u>3</u> D 1205 is not	Amendment  Ves  used	⊠ No	
1. Comm	ittee Full Name (	and Fund if applicab	ole)		<del>.</del>		2. ID Num	ber		
Committe	e To Elect Tony R	Rose For School Board	d					ID4ZC9		
3. Contri	butor Informatio	n		Add	Rem	ove				
a. Full Nan	ie, Mailing Address &	Phone		b. Job Tit	le/Profession		d. Comments		-	
	eity, state, & zip)			Owner						
Tisha Ma										
4076 Pon					er's Name/Spe					
Burlingto	n, NC 27215		:	Sudden	Peformance		e. Election Su	um to Nato		
336-584-	5668						\$			
f. Prior	g. Account Code	h. Form of Payment	i, In-K	ind Descrip	tion	j. Date (mm/dd/yy)	vy)	k. Amount		
	I	Check		•		03/05/20		\$	150.00	
								\$		
							\$			
3. Contri	butor Informatio	n		Add	Rem	ove				
a. Full Nan	ie, Mailing Address &	Phone		b, Job Tit	le/Profession		d. Comments			
(include o	eity, state, & zip)									
							•			
				c. Employ	er's Name/Spe	eific Field				
							e. Election Su	ım to Date		
							\$			
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Descrip	tion	j. Date (mm/dd/yy	yy)	k. Amount		
								\$		
				·				\$		
			<u> </u>				<del></del>	\$	1	
	butor Informatio			Add	Rem	iove	r		<u></u>	
	ne, Mailing Address &	2 Phone		b. Job Tit	le/Profession		d. Comments			
(include o	city, state, & zip)			<u> </u> 						
				c. Employ	er's Name/Spe	ecific Field				
							E) 4 6	1 10 11		
							e. Election Su S	in to Date	,	
e n	cn: L C L D C Cn				Description j. Date (mm/dd/yyyy)					
f. Prior	g. Account Code	h. Form of Payment	i, 111-K	ind Descrip	nivii	J. Date (min/dd/yy	111			
								\$		

5. Total of ALL CRO-1210 Pages
(This line must be on line 6 of Detailed Summary Page CRO-1100)

\$ 936.41

NC State Board of Elections

4. Total only this Page

CRO-1210

\$

\$

150.00

April 2007

\$

# **Aggregated Contributions from Individuals**

Page

1 of

Amendment
Yes

No

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

			d if applicable)	<u></u>		2. 1D f	Number	
	ittee To Elect T		School Board				ID4ZC	:9
3. Cont	ributor Inforn		_					
a. Ameno		b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy	)	f. Amount	
	Add Remove	- 1	Check		02/19/20	10	\$ 50	.00
	Add Remove	- 1	Check		02/21/20	10	\$ 50	.00
	Add Remove	- 1	Check		02/26/20	10	\$ 50	.00
<u> </u>	Add Remove	- 1	Check		03/01/20	10	\$ 50	.00
	Add Remove	- 1	Check		03/09/20	10	\$ 25	.00
	Add Remove	1	Check		03/09/20	10	\$ 25	.00
	Add	-					\$	
	Remove Add						\$	
	Remove Add							
	Remove Add						<del></del>	
	Remove Add						\$	
	Remove						\$	
	Add Remove						\$	
	Add Remove						\$	
	Add Remove						\$	
	Add Remove						\$	
	Add						\$	
	Remove Add							
	Remove Add						<u> </u>	
	Remove Add						_	
	Remove Add				_		\$	
	Remove	-					\$ 	<del></del>
	Add Remove						\$	
	Add Remove						\$	
	al only this				-	\$	250.00	
	al of ALL C		ages mmary Page CRO-1100)			\$	250.00	

# **Other Receipt Sources**

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

1. Committee F	ull Name (and Fund if a	pplicable)			2. ID	Number		
Committee To E	Elect Tony Rose For Scho	ool Board				ID4ZC9		
2 Tune of Dogs	nt Course	(Plane was serents CRO 12	EO Comma	for analy turns of	f Paga	int Course		
3. Type of Recei	pt source	(Please use separate CRO-12  Contributions from Not-for-I				side Sources of Income		
4. Contributor 1	nformation	Add	Total Organi	Rem		state Sources of Income		
	ng Address & Phone		b Not-fo	r-Profit Federal II		d. Comments		
(include city, state			D. 1100-101			di Compens		
Randolph Bank	, <sub></sub>							
3239 S. Church	Street		c. Outsid	e Source Explanat	ion			
Burlington, NC	27215			-				
						e. Election Sum to Date		
336-229-5338						\$ 0.01		
f. Account Code	g. Form of Payment	h, In-Kind Description		i. Date (mm/dd/y	ууу)	j. Amount		
1	Credit			02/26/201	0	\$ 0.01		
						\$		
4. Contributor l	nformation	☐ Add		Rem	ove			
a. Full Name, Maili	ng Address & Phone		b. Not-fo	r-Profit Federal II	) #	d. Comments		
(include city, state	, & zip)							
			c. Outsid	e Source Explanat	ion			
						e, Election Sum to Date		
						\$		
f. Account Code	g. Form of Payment	h. In-Kind Description	<u> </u>	i. Date (mm/dd/y	vvv)	j. Amount		
i. Account Code	g. Form of Fayment	n. M-Kind Description		n Date (minuter)	3337			
						\$		
						\$		
4. Contributor l	Information	Add	······································	Rem	ove	· · · · · · · · · · · · · · · · · · ·		
a. Full Name, Maili	ng Address & Phone		b, Not-fo	r-Profit Federal II	) #	d. Comments		
(include city, state	e, & zip)							
			c. Outsid	e Source Explanat	ion ·			
						e. Election Sum to Date		
						\$		
f. Account Code	g. Form of Payment	h, In-Kind Description		i. Date (mm/dd/y	ww)	j. Amount		
i. Account Code	g. Total of Layment	ii, tu-kiid Description			3337			
				_		\$		
						\$		
5. Total only	this Page					\$ 0.01		
	LL CRO-1250 Page	S						
	ine 11a of Detailed Summary					\$ 0.12		
		Page CRO-1100 if Not-for-Profit Con	tribution)			ψ U,12		
		Page CRO-1100 if Outside Sources of						

**Other Receipt Sources** 

Amendment Pg  $\underline{1}$  of  $\underline{2}$   $\square$  Yes  $\boxtimes$  N

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

1. Committee F	ull Name (and Fund if a	applicable)			2. ID Number		
Committee To F	Elect Tony Rose For Sch	ool Board				ID4ZC9	
3. Type of Rece	ipt Source	(Please use separate CRO-1)	250 forms	for each type of	Rece	ipt Source.)	
Interest	<del></del>	Contributions from Not-for-		<del>~</del>		side Sources of Income	
4. Contributor	Information .	Add		Remo	ove		
a. Full Name, Maili	ng Address & Phone		b. Not-fo	r-Profit Federal ID	#	d. Comments	
(include city, state	e, & zip)						
PayPal.com							
			c. Outsid	e Source Explanati	on		
						e. Election Sum to Date	
						\$ 0.11	
f. Account Code	g. Form of Payment	h. In-Kind Description	•	i. Date (mm/dd/y	ууу)	j. Amount	
1	Check Check	Bank Verify Bank Verify		02/03/2010	)	\$ 0.03	
				02/03/201	0	\$ 0.08	
4. Contributor	Information	Add		Remo	ove		
a. Full Name, Maili	ng Address & Phone		b. Not-fo	r-Profit Federal ID	#	d. Comments	
(include city, state	e, & zip)						
			<u> </u>				
			c. Outsid	e Source Explanati	on	•	
						e, Election Sum to Date	
						\$	
f. Account Code	g. Form of Payment	h. In-Kind Description		i. Date (mm/dd/y	ууу)	j. Amount	
						\$	
						\$	
4. Contributor	Information	☐ Add		Remo	ove		
a. Full Name, Maili	ng Address & Phone		b. Not-fo	r-Profit Federal ID	#	d. Comments	
(include city, state	e, & zip)		_				
			- O-45-id	e Source Explanati			
			e. Outsid	e source explanali	UII		
						e. Election Sum to Date	
						\$	
f. Account Code	g. Form of Payment	h. In-Kind Description		i. Date (mm/dd/y	ууу)	j. Amount	
						\$	
		:				\$	
5. Total only						\$ 0.11	
6. Total of Al	LL CRO-1250 Page	S					
_	line 11a of Detailed Summary					\$ 0.12	
	· ·	Page CRO-1100 if Not-for-Profit Con					
(This line goes in i	line 11c of Detailed Summary	Page CRO-1100 if Outside Sources of	f Income)	_	1	<u> </u>	

In-Kind Contributions						dment	67	
In-Kina Contributions	Pg	<u>1</u>	of	<u>1</u>		Yes	$\boxtimes$	No
Use this form to report non-monetary contributions, donations, goods or set	rvices p	rovided	to the o	ommit	tee or fi	und.		
Use CRO-1215 if In-Kind Contributions were or will be refunded within 7	days.							
1 Committee Full Name (and Fund if applicable)			1 2	: ID N	umber			

1. Committee Full Name (and Fund if applicable)				2. ID	Number
Committee To Elect Tony Rose For School Board					ID4ZC9
3. Contributor Information	emove				
a. Full Name, Mailing Address & Phone		of C	ontributor	c. Com	nments
(include city, state, & zip)		Indiv	ridual		
Anthony Glenn Rose	$\boxtimes$	Cand	lidate		
1706 Stratford Road	=	Party			
Burlington, NC 27217	=	PAC			
	=		rendum	d. Elec	tion Sum to Date
		Othe	r Receipt Source	\$	
e. Description			f. Date (mm/dd/yyy	(y)	g. Fair Market Amount
Purchase of Domain Names		}	02/01/2010	)	\$ 8.74
www.TonyRoseForSchoolBoard.com & .info					
Purchase of Domain Name www.TR4SB.com			02/06/2010	)	\$ 7.67
					\$
3. Contributor Information Add Re	emove		<u></u>		·
a. Full Name, Mailing Address & Phone		of C	ontributor	c. Con	iments
(include city, state, & zip)		Indiv	/idual		
		Cand	didate		
	=	Party			
	=	PAC	'		
	=		rendum	d. Elec	etion Sum to Date
		Othe	r Receipt Source	\$	
e. Description	-		f. Date (mm/dd/yyy	yy)	g. Fair Market Amount
					\$
					\$
					S
3. Contributor Information Add R	emove				
a. Full Name, Mailing Address & Phone			ontributor	c. Con	nments
(include city, state, & zip)	=		vidual		
	=		didate		
	1 1	Party			
				l	
		PAC		, 5	
		PAC Refe	erendum	d. Elec	ction Sum to Date
		PAC Refe		d. Elec	
c. Description		PAC Refe	erendum	\$	etion Sum to Date g. Fair Market Amount
c. Description		PAC Refe	erendum er Receipt Source	\$	
e. Description		PAC Refe	erendum er Receipt Source	\$	g. Fair Market Amount
c. Description		PAC Refe	erendum er Receipt Source	\$	g. Fair Market Amount \$
		PAC Refe	erendum er Receipt Source	\$	g. Fair Market Amount  \$ \$ \$
c. Description  4. Total only this Page 5. Total of ALL CRO-1510 Pages		PAC Refe	erendum er Receipt Source	\$	g. Fair Market Amount  \$

					Amendment	
Disbursements	Pg	1	of	<u>5</u>	Yes	$\succeq$
					17.1 . 1 17.7 1	

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

1. Committee F	2. ID Number								
Committee To E	ID4ZC9								
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)									
Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures									
4. Payee Inform				dd	Remove				
	ng Address & Phone			. Coordinated Committee Na	<del></del>	d. Comments			
(include city, state,	-		<u> </u>		<del></del> ~				
Board of Election			1						
115 S. Maple St			-	Level Registered (Specify)		1			
Graham, NC 27			-	Federal Specify	County:	1			
Granani, NC 27.	4.J.J		-	State	County: Municipality:	e. Election Sum to Date			
226 570 6755			1	a state	атальнранцу:	er erection pain to pate			
336-570-6755			İ			\$ 5.00			
61	~ F er	h. Purpose Code	Щ,	1 Data ( 131)	I Amorri	ly Daguirad Damarks			
f. Account Code	g. Form of Payment	n. r ur pose Code	$\dashv$	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks			
1	Check	0		02/08/2010	\$5.00	Filing Fee			
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	<u> </u>			<u> </u>	<u> </u>				
4. Payee Inform			$\overline{}$	.dd	Remove	1.0			
1	ng Address & Phone		b.	. Coordinated Committee Na	ame	d. Comments			
(include city, state,	& zip)		_						
PayPal.com	<del></del>	_				4			
			Lc.	Level Registered (Specify)		_			
			Ī	Federal 🔀	County:				
				State	Municipality:	e. Election Sum to Date			
						\$ 0.88			
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k, Required Remarks			
count Code						PayPal Fee			
i	Check	0		02/08/2010	\$0.88	,			
-		ļ		<del></del>	+				
					\$				
4 Davies I-f	etion			\dd \	Remove				
4. Payee Inform			_	. Coordinated Committee N	•	d. Comments			
	ng Address & Phone		to	. Coordinated Committee N		ar comments			
(include city, state,		-	-						
VistaPrinting.co	חות		$\vdash$	Land Barbara 170		-			
			C.	Level Registered (Specify)	-				
			<u> </u>	Federal 🖂	County:	- Place S			
1			$\perp$	State	Municipality:	e. Election Sum to Date			
						\$ 7.71			
f. Account Code	g. Form of Payment	h, Purpose Code	•	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks			
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1	Check Card	В		02/26/2010	\$7.71	Pen, Magnet			
		<del>                                     </del>		_					
				1	\$				
5. Total only th	is Page	l	—	<u> </u>		\$ 13.59			
			—			1			
6. Total of ALL CRO-1310 Pages  (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)									
				Operating Expenses) Contrib to Candidates/Politic	al Comm	\$ 208.54			
	· ·			Contrib to Canataates/Politic Coordinated Party Expenditu					
	es (List detailed ex	penditure code in C* - Fun			D - To Anoth	per Candidate			
A* - Media	B* - Printing F* - Equipment					ner Candidate g Public Office Expenses			
E - Salaries I - Postage	F* - Equipment J - Penalties			Party Expenses		on to Legal Expense Fund			
O* - Other	o - renatues	K - OII.			√ Donactic	— gar wapende r and			
	1 4 . *1 2 2 .	ion in require <u>d r</u>	·om	arks field (k)					

Disbursements	Pg	2	of 5
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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 Num

1. Committee F		2. ID Number							
Committee To I		ID4ZC9							
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)									
Operating E		d Party Expenditures							
4. Payee Inform	ation		Α	vqq 🔲	Remove				
a. Full Name, Maili	ng Address & Phone		b.	. Coordinated Committee N	ame	d. Co	niments		
(include city, state,	& zip)								
Harland Clark C	Check Orders		_			ļ			
			c.	Level Registered (Specify)					
			[	Federal 🔯	County:				
			$\coprod$	State	Municipality:	e. Ele	ction Sum to Date		
						\$ 2	26.75		
f. Account Code	g. Form of Payment	h. Purpose Code	L.,	i. Date (mm/dd/yyyy)	j. Amount	lı Re	quired Remarks		
i. Account Code		,		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			ck Fee		
1	Debit	0		02/10/2010	\$26.75		ok 1 00		
					s				
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4. Payee Inform				Add	Remove	1,0	4-		
	ng Address & Phone		b.	. Coordinated Committee N	ame	d, Ca	mments		
(include city, state,	& zip)		1						
Facebook.com			$\vdash$	- 15 1 10 10		-			
			c.	Level Registered (Specify)		1			
				Federal 🖂	County:		4 C 4 D 4		
			닏	State	Municipality:	e. Ele	ection Sum to Date		
						\$ :	24.94		
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Re	quired Remarks		
1	Check Card	0		02/11/2010	\$6.00	Onli	ne Ads		
1	Check Card	0		02/17/2010	\$6.00	Onli	ne Ads		
4. Payee Inform	lation		Add Remove			-			
	ng Address & Phone		b. Coordinated Committee Name			d. Co	omments		
(include city, state,	*								
Facebook.com			1						
			c. Level Registered (Specify)			]			
			Federal County:						
				State	Municipality:	e. Ele	ection Sum to Date		
						\$	24,94		
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Re	quired Remarks		
1	Check Card	0		02/23/2010	\$6.00	Onli	ne Ads		
2	Check Card	0		03/01/2010	\$5.94	Onli	ne Ads		
5. Total only th	is Page			<del></del>	_	\$	50.69		
	CRO-1310 Pages					1			
	line 13a of Detailed Sun		   e	208 54					
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)  \$ 208.54									
(This line goes in	line 13c of Detailed Sun	mary Page CRO-1100	) if	Coordinated Party Expenditu	ires)	<u> </u>			
7. Purpose Cod	es (List detailed ex								
A* - Media	B* - Printing	C* - Fun			D - To Anoth				
E - Salaries	F* - Equipment						c Office Expenses		
I - Postage O* - Other	J - Penalties	K* - Offi	ce I	Lxpenses	Q" - Donatio	n to L	egal Expense Fund		
	e detailed explanat	ion in required r	em	arks field (k)					
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Disbursements	

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

1. Committee F	2. ID Number									
Committee To E		ID4ZC9								
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)										
Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures										
4. Payee Inform	·		-	dd	Remove					
	ng Address & Phone		_	Coordinated Committee N		d. Co	mments			
	_		F.	555 amarea Committee IV						
(include city, state, Facebook.com	ex zip)		-							
racebook.com			<u> </u>	Level Berleton 1 (Co. 15.)						
			c.	Level Registered (Specify)	Country					
			<u> </u>	Federal 🖂	County:	. 51				
			止	State	Municipality:	e. Ele	ection Sum to Date			
						\$ 2	24.94			
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Re	quired Remarks			
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1	Check Card	0		03/07/2010	\$1.00	ŀ				
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4. Payee Inform			$\overline{}$	.dd 🔲	Remove	. ~				
-	ng Address & Phone		b.	. Coordinated Committee N	ame	d. Co	omments			
(include city, state,										
Elon Print Servi			$\vdash$							
406 W. Haggard	l Ave		c.	Level Registered (Specify)						
Elon, NC 27244				Federal 🔀	County:					
				State	Municipality:	e. Ele	ection Sum to Date			
336-278-5582						\$	114.00			
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Re	quired Remarks			
_		B			\$20.00		ers Printing			
1	Check	В		02/11/2010	\$20.00					
1	Check	В		02/15/2010	\$40.00	Flye	ers Printing			
					<u> </u>		<del>-</del>			
4. Payee Inform			Add Remove							
ĺ	ng Address & Phone		b	. Coordinated Committee N	ame	a. Co	omments			
(include city, state,			4							
Elon Print Servi			<u></u>							
406 W. Haggard			c. Level Registered (Specify)							
Elon, NC 27244	ļ		Federal County:							
				State	Municipality:	ę. Ele	ection Sum to Date			
336-278-5582						\$	114.00			
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Re	quired Remarks			
1	Check	В		02/16/2010	\$20.00		ect Mailers			
1	Check	В		02/22/2010	\$10.00	Bus	iness Cards			
5 Total ank th	ь Рада	L		<u> </u>		\$	91.00			
5. Total only thi	CRO-1310 Pages					Ψ	71.00			
	i CRO-1310 Pages line 13a of Detailed Sum	mary Daga CDO 110	n is i	Onerating Evneuses	1					
				Operaung Expenses) Contrib to Candidates/Politic	al Commi	\$	208.54			
			_	Coordinated Party Expenditu	i esj	<u> </u>				
	es (List detailed ex				D		didata			
A* - Media	B* - Printing	C* - Fun			D - To Anothe		didate c Office Expenses			
E - Salaries	F* - Equipment J - Penalties	G - Politi K* - Offi					c Office Expenses egal Expense Fund			
I - Postage O* - Other	o - renames	v All	Le I	zahenses	๔ - บอแลเเอเ	. O L	egar napense i unu			
	e detailed explanat	ion in required r	em	arks field (k)						

Die	bursements	
$\mathbf{v}_{13}$	Duiscinchis	

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ements				Pg	<u>4</u>	of <u>5</u>	Yes	$\boxtimes$	No
	 _	_	_						

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

1. Committee Fi	ull Name (and Func	d if applicable)					2. ID Number	
Committee To E		ID4ZC9						
3. Type of Disbu								
				<i>1–1310 forms for each t</i> ates/Political Committees			d Party Expenditures	
	<u> </u>	Contributions to Car				rumate	d rany expenditures	
4. Payee Inform				.dd 📋	Remove		· · · · · · · · · · · · · · · · · · ·	
	ng Address & Phone		b.	Coordinated Committee Na	ame	a. Co	omments	
(include city, state,			1					
Elon Print Servi								
406 W. Haggard			c.	Level Registered (Specify)				
Elon, NC 27244			C	Federal 🔀	County:			
				State	Municipality:	e. Ele	ection Sum to Date	
336-278-5582						\$	114.00	
						Þ	114.00	
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Re	quired Remarks	
	OL I	D.		02/07/0010	621.00	Busi	iness Cards	
1	Check	В		03/05/2010	\$24.00	Flye	rs	
					S			
4. Payee Inform	ation			.dd $\square$	Remove			
			т	Coordinated Committee Na		d. Co	omments	
	ng Address & Phone		<u>.</u>	Coordinated Committee 14				
(include city, state,	& zip)		-					
Office Max	. 1 // 4		_	I I D 1-1 I (C 15.)				
3121 Garden Ro			e.	Level Registered (Specify)	0			
Burlington, NC	27215		<u> </u>	Federal 🖂	County:			
				State	Municipality:	e. Ele	ection Sum to Date	
336-538-0999						\$	13.99	
f. Account Code	g. Form of Payment	h. Purpose Code		i, Date (mm/dd/yyyy)	j. Amount	k. Re	equired Remarks	
		_			212.00	Nan	ne Badge	
1	Check	В		02/12/2010	\$13.99			
			_					
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4. Payee Inform	ation			.dd $\square$	Remove			
			b. Coordinated Committee Name				omments	
	ng Address & Phone		Ь.	Coordinated Committee N	anic	u. Cc		
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Walmart	•		-					
3141 Garden Ro			Ç.	Level Registered (Specify)	_			
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336-584-6400						\$	6.47	
		Y ====!-T	$\perp$	,				
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount		equired Remarks	
1	Check Card	В		02/13/2010	\$2.16	Tha	nk You Cards	
i	Check Card	Ь		02/13/2010	32.10		<u> </u>	
	01 1 0 1	D		02/21/2010	\$4.31	Tha	nk You Cards	
1	Check Card	В		02/21/2010	34.31			
5. Total only thi	s Page				<u>-</u> i	\$	44.46	
	CRO-1310 Pages	1.2						
	line 13a of Detailed Sum	mary Page CRO-1100	o if e	Operating Expenses)			-00-1	
				Contrib to Candidates/Politic	al Comm)	\$	208.54	
•	-			Coordinated Party Expenditu				
	es (List detailed ex			<del></del>	<u> </u>			
A* - Media	B* - Printing	C* - Fund			D - To Anothe	er Can	didate	
A* - Media E - Salaries	B* - Printing F* - Equipment						c Office Expenses	
I - Postage	J - Penalties	K* - Offi					egal Expense Fund	
O* - Other	o - i chanics	K - OIII	1		Z Donation		-0	
	e detailed explanat	ion in required r	em	arks field (k)				

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Disbursements	Pg	<u>5</u>	of	<u>5</u>	Yes

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

1. Committee F	ull Name (and Fund	d if applicable)				2. ID Number	
Committee To Elect Tony Rose For School Board ID4ZC9							
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
Operating E				ates/Political Committees		ordinated Party Expenditures	
4. Payee Inform				vdd 🔲	Remove		
						d. Comments	
	b. Coordinated Committee Name		ame	u. Comments			
(include city, state,							
U.S. Post Office					.,		
105 S. Willliam	105 S. Williamson Ave. c. Level Registered (Specify		Level Registered (Specify)				
Elon, NC 27244	n, NC 27244 Federal County:		County:				
				State	Municipality:	e. Election Sum to Date	
					· · · · · · · · · · · · · · · · · · ·	\$ 8.80	
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
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4 Danie Inform				11	<u></u>		
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a. Full Name, Maili	ng Address & Phone		b.	. Coordinated Committee N	lame	d. Comments	
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			c.	Level Registered (Specify)			
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., recount Cour	B. s. or in or a nyment	<u>-</u>			S	-4	
					\$		
5. Total only th	is Page					\$ 8.80	
6. Total of ALL CRO-1310 Pages							
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)							
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)  \$ 208.54						\$ 208.54	
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)							
7. Purpose Codes (List detailed expenditure code in (h.) above)							
A* - Media			D - To Anoth				
				g Public Office Expenses			
I - Postage J - Penalties K* - Office Expenses Q* - Donation to Legal Expense Fund							
O* - Other  * Codes require detailed explanation in required remarks field (b)							
* Codes require detailed explanation in required remarks field (k)							

No