Disclosure Re							$\Box$	Yes No
Use this form for ge	neral report and committee	nformatio	on, must be	signed	and sub	mitted along with	other (	detailed forms.
1. Committee Info	to update information							
a. Full Name	THIALLON					····		ID Virinhau
Bob Ward for City	Council		·				- e.	ID Number 4D4NPQ
	lude City, State and Zip Code)						d.	Date Filed
2205 Woodridge Constitution, NC 272								01/11/12
							e.	Phone Number
								336-227-1954
2. Report Year	3. Period Start Date (mm/c	ld/yy)	4. Period 1 (mm/dd/yy)	End Da	te	5. Treasurer Fu		ne
2011	10/25/11		12/	31/11		Robert Marion \	Ward	
6. Type of Commit		9. Туре	of Report	(cı	heck on	ly one type of repo	rt fron	n one category)
Candidate Camp	· ·	Municipa			State/Co	ounty	Re	eferendum
PAC	Referendum	] 🗆 🤇	Organizational			Organizational		Organizational
Independent Expenditure Legal Expense F	Joint Fundraiser		l'hirty-five day	,	(	Quarterly		Pre-referendum
7. Type of Fund	(if applicable, check one)	п п	Pre-primary		П	First		] Final
"Booster Fund"		i 🗀	Pre-election			Second		Supplemental Final
Building Fund		П П	Pre-runoff			Third		Annuai
			Semi-annual			Fourth		Special
Other:			Mid Year Year End	Ì		Semi-annual Mid Year	16	) Canadal Danaut Name
Outer,			Final		H	Year End	10	). Special Report Name
8. Number of Fund	raisers this Report		Special		l i	Final		
	0					Special		
11. Account Inform	ation			11. Ac	count I	nformation		<del></del>
a. Financial Institution	Full Name			a. Finar	cial Insti	tution Full Name		
Sun Trust Bank			<del></del>					
b. Purpose	c. Account Code			b. Purp	ose			c. Account Code
Campaign Account	ı							
	d. Period Begin Balance						(	l. Period Begin Balance
	\$ 2,407.62							\$
CERTIFICATION						·		
the NC General State is complete, true and Robert Mar	Printed Name of Signer	mmingle	d with prohi	ibited or tate Boa	r other n ard of E Yaw	on-disclosed fund	s. I fiu	2D-22M of Chapter 163 of other certify that this report
FOR OFFICE USE O					1 /	^	Dali	vom Mothod
Date Received:	1-10-12	E	Employee:		<u> </u>	<u> </u>		<u>very Method</u> Normal Mail
Date Postmarked	d:	E	Employee:			<del></del>	\Z	Registered Mail Hand Delivered
Date Scanned:		F	Employee:		,	<del></del>		Electronically Filed Signer has not received
Date Data Enter	ed:	E	Employee:					mandatory training
Please Note: Thi	s form cannot be used to am custodia You must amend the Stater	n of book	s informati	on, or a	ccount i	nformation.		

Amendment

Amendment

No

**Detailed Summary**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 Semi-annual			3. ID Nu	
Bob Ward for City Council			4D4NQF	)	
Start of Election Cycle: January 1,	Year end <b>2008</b>		Total this		Total this
4) Cash on Hand at Start		S	Reporting Period 2,407.62	\$	Election Cycle .00
RECEIPTS		Ψ	2,407.02	ļΨ	.00
5) Aggregated Contributions from Individuals	(CRO-1205)	\$		\$	25.00
6) Contributions from Individuals	(CRO-1210)	\$	500.00	\$	13,000.60
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 Organizat	ions <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)	\$		\$	
<b>12) TOTAL RECEIPTS</b> (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 1	lc. 11d and 11e)	\$	500.00	\$	13,025.60
<u>EXPENDITURES</u>					
13) Disbursements					· · · · · · · · · · · · · · · · · · ·
13a) Operating Expenditures	(CRO-1310)	\$	2,012.30	\$	12,105.28
13b) Contributions to Candidates/Political Commi	ttees (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)	\$		\$	25.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14.		\$	2,012.30	\$	12,130.28
19) Cash on Hand at End (Add lines 4 and 12 together, then such	btract line 18)	\$	895.32	\$	895.32
ADDITIONAL INFORMATION	į				
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$			
21) Outstanding Loans (incl. ones from other campaig	ŕ	\$			
22) Debts and Obligations owed By the Committee	(CRO-1610)	<u>\$</u>			
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)	\$		\$	

Contr	ibutions fro	m Individuals		Pg	g <u>1</u> of	1_	Yes	. No
		vidual contributions		or contributions und	der \$50 if form CR			
1. Comn	nittee Full Name	(and Fund if applica	ble)			2. ID Nu	mber	
Bob War	d for City Council						4D4NQP	
	ibutor Informatio				emove			
ľ	ne, Mailing Address	& Phone		b. Job Title/Profession	n .	d. Commer	nts	
<u> </u>	city, state, & zip) larion Ward			Retired				
	odridge Ct.			c. Employer's Name/S	Specific Field			
Burlingto	on, NC 27215							
336-227-	1054					e. Election	Sum to Date	
330-227-	1754					\$	13,195.86	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
	#1	Check			11/08	/11	\$	500.00
							\$	
							\$	
3. Contr	ibutor Informatio	on		Add Re	emove	<del>v- , </del>		
1	ne, Mailing Address &	& Phone		b. Job Title/Profession	1	d. Commer	nts	
(include	city, state, & zip)							
				c. Employer's Name/S	pecific Field	-		
					-			
						e. Election	Sum to Date	
						\$		
f. Prior	g. Account Code	b. Form of Payment	i. In-k	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
			<u> </u>				\$	
							\$	
							\$	
	butor Informatio			т	move			
1	ne, Mailing Address & city, state, & zip)	& Phone		b. Job Title/Profession	1	d. Commen	its	
(include	eny, state, & zip)			_				
				c. Employer's Name/S	pecific Field			
							Sum to Date	
f. Prior	g. Account Code	h. Form of Payment	i In-k	Kind Description	j. Date (mm/dd/y	\$	k. Amount	
	S	I or in oz i ayıncın		A POST APROPE	J. Date (minradity)	1231	\$	
							\$	
						<del></del>	\$	
4. Total	only this Page	e	1		<u> </u>	\$	1	500.00
	of ALL CRO		•••			•		500.00
ı						\$		500.00

Amendment

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

					Amendment	
Disbursements	Pg	<u>01</u>	of	4	Yes	No
Les this form to report amonditures from the annualty of females	_	4 . 11	٠	_ 1	11 4 7 122 1	

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)

I. Committee F	full Name (and Fun	d if applicable)					2. ID Number
Bob Ward for C	City Council						4D4NQP
3. Type of Disb	ursement (Plea	ase use separate C	RO-1310	forms for	each t	vne of Disburser	
Operating E		Contributions to Car					oordinated Party Expenditures
4. Payee Inform	aation		Add			Remove	
a. Full Name, Maili	b. Coordi	inated Comm	iittee Na		d. Comments		
(include city, state,	<del>-</del>		-				
Alamance News			7				
114 West Elm S	St.	c. Level R	Registered (S <sub>1</sub>	pecify)		7	
Graham, NC 27	/253			ederal		County:	7
			St	tate	$\boxtimes$	Municipality:	e. Election Sum to Date
336-228-7851				<del></del> .			2 100 70
							\$ 402.78
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	: (mm/dd/yyy	/y)	j. Amount	k. Required Remarks
#1	Check #1039				·	0 (5 13	Thank you ad
#1	Cneck #1039	Α	11/1;	5/11		\$ 67.13	
						\$	
4. Payee Inform	nation		Add			Remove	
	ing Address & Phone		b. Coordi	nated Comm	ittee Na		d. Comments
(include city, state,	_						<del></del>
Western Charco			1				
142 B Graham-l	Hopedale Rd.		c. Level R	Registered (Sp	pecify)		7
Burlington, NC	•		<u> </u>	ederal	П	County:	7
, c			∏ St	ate	$\boxtimes$	Municipality:	e. Election Sum to Date
			<u> </u>				
							\$ 250.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	mm/dd/yyy	v)	j. Amount	k. Required Remarks
					**		Election Night
#1	Check #1037	0	11/09	<del>9</del> /11		\$250.00	Reception
						<u> </u>	The contract of the contract o
						\$	
4. Payee Inform	nation		Add			Remove	
	ing Address & Phone			nated Comm	ittee Na		d. Comments
(include city, state,	_		-				
Westbrook Stud			†				
1236 S. Church			c. Level R	tegistered (Sp	necify)		┥
Burlington, NC			Federal County:				-
5	<b>-</b> / <del>-</del>		」 <b>二</b>	ate	$\boxtimes$	Municipality:	e. Election Sum to Date
336-226-6474			<u> </u>		_لحجا	Transcopies Control	
<del></del>							\$ 339.95
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyy	v)	i. Amount	k. Required Remarks
					-		Supporter
#1	Check #1040	0	11/25	5/11		\$ 172.94	Photos
					-		1 110:03
						S	
5. Total only thi	is Page	1				J	\$ 490.07
	CRO-1310 Pages					-	Ф 470.07
	line 13a of Detailed Sum	marv Page CRO-110	n if Operatin	g Expenses)			
	line 13b of Detailed Sum				/Politica	al Comm)	\$ 2,012.30
	line 13c of Detailed Sum						
	es (List detailed exp						
A* - Media	B* - Printing	C* - Fund	<u> </u>	<del>'</del>		D - To Anot	her Candidate
E - Salaries	F* - Equipment						g Public Office Expenses
I - Postage	J - Penalties	K* - Offic	ce Expense:	S			on to Legal Expense Fund
O* - Other							
- * Codes require	e detailed explanati	on in required re	≥marks fie	भेते (k)			

committees and	report expenditures coordinated party ex	penditures.	Pg ee for; operating expense	2 of s, contributions to	
	ull Name (and Fun	d if applicable)			2. ID Number
Bob Ward for C	<u> </u>				4D4NQP
3. Type of Disbu		<u>ise use separate C</u>	RO-1310 forms for each	type of Disburse	ment.)
Operating E	<u> </u>	Contributions to Car	ndidates/Political Committees		oordinated Party Expenditures
4. Payee Inform	ation		Add	Remove	
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee	Name	d. Comments
(include city, state,	& zip)				
Office Depot					
1825 S. Church	St.		c. Level Registered (Specify	)	
Burlington, NC	27215		Federal	County:	
			State 🖂	Municipality:	c. Election Sum to Date
336-226-6122					\$ 449.15
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
Д1	Ch 1. #1020	IZ.		677.00	Office
#1	Check #1029	K	11/02/11	\$77.90	Supplies
				\$	
4. Payee Inform	ation	<u> </u>	Add $\square$	Remove	· — · · · · · · · · · · · · · · · · · ·
a. Full Name, Maili			b. Coordinated Committee	Name	d. Comments
(include city, state,					
Oriental Trading					
SunTrust Check			c. Level Registered (Specify	<u> </u>	
2405 S.Church S	Street		Federal	County:	
Burlington, NC	27215		State	Municipality:	e. Election Sum to Date
_				<u></u>	\$ 57.99
336-229-3000	E	h. Purpose Code	1.5	<del></del>	
f. Account Code	g. Form of Payment	n. Purpose Coue	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
#1	Checkcard	0	10/27/11	\$ 57.99	Campaign Hats
				\$	
4. Payee Inform	ation		Add	Remove	·
a, Full Name, Mailir	ng Address & Phone		b. Coordinated Committee	Name	d. Comments
(include city, state, o	& zip)				
SunTrust Bank					
2405 S. Church					
Burlington, NC	27215		c. Level Registered (Specify	)	
			Federal	County:	
			State 🔀	Municipality:	e. Election Sum to Date
336-229-3000					\$ 36.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
ш		0		<u> </u>	Checking Mntce
#1	Bank Stateme	0	12/31/11	\$10.00	Fee
				s	
5. Total only thi	s Page				\$ 145.89

## (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 B\* - Printing C\* - Fundraising E - Salaries F\* - Equipment G - Political Party I - Postage

6. Total of ALL CRO-1310 Pages

O\* - Other

J - Penalties K\* - Office Expenses

\$ (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)

2,012.30

D - To Another Candidate

H\* - Holding Public Office Expenses Q\* - Donation to Legal Expense Fund

(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)

				Amenament	
Disbursements	Pg	<u>3</u>	of <u>4</u>	Yes	N
Is this form to report amonditures from the committee for an areating	*******	aantnik	sutiona to condid	ata/political	

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	d if applicable)					2. ID Number
Bob Ward for C	City Council						4D4NQP
3. Type of Disb	ursement (Plea	ise use separate C	RO	0-1310 forms fo	r each t	ype of Disburse	ment.)
Operating E	xpenses	Contributions to Ca	ndid	lates/Political Comn	ittees		Coordinated Party Expenditures
4. Payee Inform	nation		Α	\dd		Remove	
a. Full Name, Maili	ing Address & Phone		b	. Coordinated Com	mittee Na	ame	d. Comments
(include city, state,	_						
The Times-New			1				
707 S. Main St.			C.	. Level Registered (	Specify)		
Burlington, NC	27215			Federal		County:	
Durington, No	27215		1	State		Municipality:	e. Election Sum to Date
			⊦∟	State		Withterpatity.	C. Election Sum to Date
336-227-0131							\$ 2,424.18
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/y	ууу)	j. Amount	k. Required Remarks
#1	Check #1038	Α		11/10/11		\$ 129.22	Thank you Ad
	Check # 1050	71		11710711		9127.22	
						\$	
4. Payee Inform	nation		A	l Add		Remove	<u></u>
	ng Address & Phone	····	_	. Coordinated Com	mittee Na		d. Comments
(include city, state,	•						
Walmart	<u></u>		1				
3141 Garden Ro	<del>1</del>		C	. Level Registered (	Specify)		
Burlington, NC			1	Federal		County:	
Burnington, 100	27213			State	$\boxtimes$	Municipality:	e. Election Sum to Date
336-584-6400			<u> </u>			withherpatity.	e. Election Sum to Date
330-364-0400							\$ 122.53
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/y	ууу)	j. Amount	k. Required Remarks
#1	Check #1030	0		11/02/11		\$ 77.72	Supplies for
							Poll Volunteers
#1	Check #1036	0		11/07/11		\$44.81	Supplies for Poll Volunteers
4. Payee Inform	Lation	<del>'</del> П	Α	.dd		Remove	1 on volumeers
· · · · · · · · · · · · · · · · · · ·	ng Address & Phone			. Coordinated Com	mittee Na		d. Comments
(include city, state,	_						
It's Party Time	ж 2лр)		1				
2322 S. Church	St		-	. Level Registered (	Specify)		
Burlington, NC			Federal County:			County:	
Durington, NC	21213		1 =	State	$\boxtimes$	Municipality:	e. Election Sum to Date
336-538-6864						······································	\$ 48.04
f topourt Cada	a CommacD	h. Purpose Code	<u>L.</u>	i Data (		T : 4 :	
f. Account Code	g. Form of Payment	a. r ut post Cour		i. Date (mm/dd/y	555)	j. Amount	k. Required Remarks  Election Night
#1	Check #1035	0		11/07/11		\$48.04	Reception Night
						6	Reception
						\$	
5. Total only th							\$ 299.79
6. Total of ALL	CRO-1310 Pages						
(This line goes in	line 13a of Detailed Sun	nnary Page CRO-110	10 if	Operating Expense.	5)		\$ 2,012.30
(This line goes in	line 13b of Detailed Sun	nmary Page CRO-110	10 if	Contrib to Candida	tes/Politic	al Comm)	ψ ± <sub>i</sub> U12.3U
(This line goes in	line 13c of Detailed Sun	mary Page CRO-110	0 if	Coordinated Party i	Expenditu	res)	
	es (List detailed ex						
A* - Media	B* - Printing	C* - Fun	dra	ising			her Candidate
E - Salaries	F* - Equipment						ng Public Office Expenses
I - Postage	J - Penalties	K* - Offi	ce F	Expenses		Q* - Donat	ion to Legal Expense Fund
O* - Other	- 4-4-9-4 (			anto Cald (IA			
– Coaes requir	e detailed explanat	ion in required r	ema	arks Heia (K)			

Disbursem	ents		Pg	4 of	Amendment 4 Yes No
Use this form to	report expenditures		ee for; operating expenses	-	
	coordinated party ex			<u>.</u>	1
	Full Name (and Fun	d if applicable)			2. ID Number
Bob Ward for C	<del></del>		mn 1310 p p t	CD'.1	4D4NQP
3. Type of Disb Operating E			RO-1310 forms for each		
Operating E  4. Payee Inforn		Contributions to Can	Add Committees		oordinated Party Expenditures
	пацоп ling Address & Phone		b. Coordinated Committee 1	Remove Name	d. Comments
a. Fun Name, Main (include city, state,	-	ļ	b. Coordinated Committee	Name	u. Comments
· · · · · · · · · · · · · · · · · · ·	essional Supplies				
805 Parker St	>20101101 Oct 1	<b>,</b>	c. Level Registered (Specify)	<u> </u>	<b>-</b>
Graham, NC 27	1253	}	Federal	County:	
,	200	ļ	State	Municipality:	e. Election Sum to Date
336-228-0950				<u> </u>	\$ 3,193.57
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
#1	Check #1028	В	10/27/11	\$784.05	Palm Cards/
			10/4/11	3701.00	Signs & Frames
#1	Check #1031	В	11/05/11	\$ 57.65	Palm Cards
4. Payee Inform			Add	Remove	
	ing Address & Phone	ļ	b. Coordinated Committee ?	Name	d. Comments
(include city, state,	& zip)				
The Signman		ļ			
2738 Birch Lan		ļ	c. Level Registered (Specify)		_
Burlington, NC	27215		Federal	County:	
			State 🗵	Municipality:	e. Election Sum to Date
	<del>,</del>				\$ 234.85
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
#1	Check #1034	В	11/07/11	\$234.85	Stickers for
		ļ <del>-</del>	11,0,,	02000	Banners
				S	
4. Payee Inform	nation		Add	Remove	
	ing Address & Phone		b. Coordinated Committee ?		d. Comments
(include city, state,	-				
			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
				S	
				s	
5 T-4-1145	i- D				t 1076.55
5. Total only thi	CRO-1310 Pages				\$ 1,076.55
o. Total of ALE	CRO-1310 Fages				

(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)

(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)
---	-----------	------	--------

B\* - Printing C\* - Fundraising A\* - Media

E - Salaries F\* - Equipment I - Postage J - Penalties

G - Political Party K\* - Office Expenses D - To Another Candidate

H\* - Holding Public Office Expenses Q\* - Donation to Legal Expense Fund

\$

2,012.30

O\* - Other

\* Codes require detailed explanation in required remarks field (k)