Do not use this form to	eral report and committee i	nformat	ion, must be	signed	and sub	mitted along with o	ther detailed forms.		
1. Committee Inform									
a. Full Name	пацоц						c. ID Number		
Committee to Elect T	Com Manning						VD 47 ER		
b. Mailing Address (inclu	de City, State and Zip Code)				nivelje sa		d. Date Filed		
2035 Stuart Ct.							10/29/12		
Burlington, NC 2721	15								
							e. Phone Number		
				4			336-585-0361		
2. Report Year	3. Period Start Date (mm/c	ld/yy)	4. Period (mm/dd/yy)	End Da	te	5. Treasurer Full	Name		
2012	7/1/2012		10/2	20/2012		Thomas K. Mann	ing		
6. Type of Committe	e (Check One)	9. Typ	e of Report	(c	heck on	ly one type of repor	t from one category)		
Candidate Campai	gn Party	Munici	pal		State/C	County	Referendum		
PAC	Referendum		Organizational	l		Organizational	Organizational		
Independent Expenditure Legal Expense Fun	Joint Fundraiser		Thirty-five day	y		Quarterly	Pre-referendum		
7. Type of Fund	(if applicable, check one)	lп	Pre-primary		П	First	Final		
"Booster Fund"	10 11	lĦ	Pre-election		H	Second	Supplemental Final		
Building Fund			Pre-runoff		\boxtimes	Third	Annual		
		_	Semi-annual			Fourth	Special		
_			Mid Year	r		Semi-annual			
Other:			Year End	l		Mid Year	10. Special Report Name		
1982/1985/1985			Final			Year End			
8. Number of Fundra	aisers this Report		Special	12		Final			
	1					Special			
11. Account Informa						Information			
a. Financial Institution Fu	ıll Name			a. Fina	ncial Inst	itution Full Name			
Randolph Bank	1.1.10.1	1210/2121		1.0					
b. Purpose Campaign	c. Account Code	es glabra		b. Purp	ose		c. Account Code		
Account	1								
riccount	d. Period Begin Balance	2					d. Period Begin Balance		
	\$ 1233.25						\$		
CERTIFICATION									
I certify that the Com	mittee or Fund is in compli	ance wit	th all applica	ble pro	visions	of Article 22A, 22B	, & 22D-22M of Chapter 163 of		
							. I further certify that this report		
1970	correct and that I have been	trained	by the NC S	State Bo	ard of	Elections.	1-1-1		
Thomas K. M				Jul	X	-	10/29/12		
FOR OFFICE USE ON	Printed Name of Signer		Si	ignature o	1 Appoin	ted Treasurer	Date *		
	10-29-12				16		Delivery Method		
Date Received:	10 29-12		Employee:		00		Normal Mail		
Date Postmarked:	Date Postmarked: Employee: Registered Mail Hand Delivered								
Date Scanned:			Employee:				Electronically Filed		
Date Data Entered	d:		Employee:				Signer has not received mandatory training		
Please Note: This	form cannot be used to am	end con	mittee infor	mation	such as	the committee addr	ess, treasurer, assistant treasurer,		
11000 11113						information.	ous, trousurer, assistant treasurer,		
	You must amend the Stater						tee changes, p c v n		
		-	0	,		The state of the s	1 C 190 - 1 (V I I		

Amendment

Yes

 \boxtimes

No

Disclosure Report Cover

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

3. ID Number

1. Committee Full Name (and Fund if applicable)	2. Type of Report		3. ID Number
Committee to Elect Tom Manning	2012 Third Quarte	er	VD 47 ER
Start of Election Cycle: January 1,	2009	Total this Reporting Perio	Total this Election Cycle
4) Cash on Hand at Start		\$ 1233.25	\$ 218.92
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 1030.00	\$ 2305.00
6) Contributions from Individuals	(CRO-1210)	\$ 2850.00	\$ 17200.00
7) Contributions from Political Party Committees	(CRO-1220)	\$ 1485.42	\$ 2250.80
8) Contributions from Other Political Committees	(CRO-1230)	\$ 700.00	\$ 1450.00
9) Loan Proceeds	(CRO-1410)	\$	\$ 1000.00
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$	\$
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$.29	\$ 1.48
11b) Contributions from Not-for-Profit Organizati	ons (CRO-1250)	\$	\$
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, 11d and 11e)	\$ 6065.71	\$ 24207.28
<u>EXPENDITURES</u>			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 5456.27	\$ 22074.13
13b) Contributions to Candidates/Political Commit	ttees (CRO-1310)	\$ 250.00	\$ 494.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$
15) Loan Repayments	(CRO-1420)	\$	\$ 500.00
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	\$
17) In-Kind Contributions	(CRO-1510)	\$ 385.42	\$ 650.80
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1	5, 16 and 17)	\$ 6091.69	\$ 23218.93
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	stract line 18)	\$ 1207.27	\$ 1207.27
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaign	ns) <i>(CRO-1430)</i>	\$ 1000.00	
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)	\$	\$
		Contraction of the Contract of	THE RESERVE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER, THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.

Aggregated Contributions from Individuals

Page

of <u>2</u>

Amendment Yes

 \boxtimes

No

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

	mittee Full Na		d if applicable)		2. I	D Number		
	nittee to Elect To					VD 47 ER		
3. Con	tributor Inforn							
a. Amen		b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount		
<u> </u>	Add Remove	1	check		7/13/2012	\$ 25.00		
	Add	1	1		7/21/2012	£ 50.00		
	Remove	1	cash		7/31/2012	\$ 50.00		
	Add	1	check		8/20/2012	\$ 20.00		
	Remove	1	CHECK		0/20/2012	\$ 20.00		
	Add	1	check		8/20/2012	\$ 20.00		
<u> </u>	Remove		- Caroni					
\vdash	Add	- 1	check		8/20/2012	\$ 25.00		
+	Remove							
\vdash	Add Remove	- 1	check		8/20/2012	\$ 25.00		
Η	Add	-						
\dashv	Remove	- 1	check		8/20/2012	\$ 25.00		
H	Add	1						
Ħ	Remove	1	check		8/20/2012	\$ 30.00		
Ħ	Add	Ι.	1 1		0/20/2012	¢ 50.00		
	Remove	1	check		8/20/2012	\$ 50.00		
	Add	1	chack		8/20/2012	\$ 50.00		
	Remove		check 8/20		6/20/2012	\$ 50.00		
	Add	1	check		8/20/2012	\$ 25.00		
	Remove	1	- Check		0/20/2012			
H	Add Remove	- 1	check	8/20/2012	\$ 50.00			
	Add	1	shools		8/20/2012	\$ 25.00		
	Remove	1	check		8/20/2012	\$ 25.00		
	Add	1	cash		8/20/2012	\$ 50.00		
	Remove		Cush		0/20/2012	Ψ 20.00		
<u> </u>	Add Remove	1	cash		8/20/2012	\$ 50.00		
	Add							
H	Remove	1	cash		8/20/2012	\$ 50.00		
H	Add	1,			0/00/0010	e 50.00		
	Remove	1	cash		8/20/2012	\$ 50.00		
	Add	1	engh		8/20/2012	\$ 50.00		
	Remove	1	cash		0/20/2012	φ 50.00		
	Add	1	cash		8/20/2012	\$ 50.00		
	Remove	1	Cush		0/20/2012	Ψ 20.00		
	Add	1	cash		8/20/2012	\$ 50.00		
H	Remove							
+	Add Remove	1	cash		8/20/2012	\$ 50.00		
H	Add							
	Remove	1	cash		8/20/2012	\$ 20.00		
4. To	tal only this	Page			\$	840.00		
5. To	5. Total of ALL CRO-1205 Pages \$ 1030.00							
(This	line must be on line	5 of Detailed Su	ummary Page CRO-1100)		J	1050.00		

Aggregated Contributions from Individuals

Page

of

2

Amendment Yes

7

No

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

	ommittee Full N		d if applicable)			2. ID	Number		
Coı	nmittee to Elect T	om Manning					VD 47 ER		
3. C	ontributor Infor	mation							
a. Aı		b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy	y)	f. Amount		
H	Add Remove	1	check		8/22/20	12	\$ 40.00		
B	Add Remove	1	check		8/30/20	12	\$ 50.00		
	Add	1	check		9/25/20	12	\$ 50.00		
	Remove Add				_	-			
	Remove	1	check		9/25/20	12	\$ 50.00		
Η	Add	4					\$		
H	Remove								
	Add						\$		
Ц	Remove						Ψ		
H	Add Remove						\$		
Ħ	Add								
H	Remove	-					\$		
Ħ	Add								
Ħ	Remove	7					\$		
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井	Add				_				
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Ħ	Remove	7					\$		
	Add						Φ		
	Remove						\$		
	Add						\$		
	Remove						Φ		
	Add						\$		
井	Remove								
	Remove	-					\$		
4. 7	otal only this	Page				\$	190.00		
5. T	5. Total of ALL CRO-1205 Pages \$ 1030.00								
(TI	(This line must be on line 5 of Detailed Summary Page CRO-1100)								

1.	3°74						Amendment	
Contr	ributions fro	m Individuals		Pg	_1 of	7_	Yes	No No
Use this	form to report indi	vidual contributions of	over \$5	0 or contributions unde	er \$50 if form CR	O 1205 is no	t used	
1. Comn	nittee Full Name	and Fund if applica	ble)			2. ID Num	ber	
Committ	ee to Elect Tom M	lanning					VD 47 ER	
3. Contr	ibutor Informatio	on		Add Ren	nove			
a. Full Na	me, Mailing Address	& Phone		b. Job Title/Profession		d. Comments	3	
	city, state, & zip)			Attorney				
Pamela I	100							
	ndon Mill Ct.			c. Employer's Name/Sp				
Elon, NO				Wishart, Norris, He	enninger, PA	TI		
336-584-	-8013					e. Election Si	um to Date	
						\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/yy	уу)	k. Amount	
	1	check			7/3/20	12	\$	100.00
							\$	
							\$	
3. Contr	ibutor Informatio	on		Add Ren	nove			
a. Full Na	me, Mailing Address &	& Phone		b. Job Title/Profession		d. Comments	3	
	city, state, & zip)			self-employed				
John M.								
PO Box				c. Employer's Name/Sp				
336-376-	aw, NC 27340			Jordan Properties/re	eal estate	e. Election Si	to Doto	
330-370-	-3122					e. Election St	im to Date	
						\$	500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Description	j. Date (mm/dd/yy	yy)	k. Amount	
	1	check			7/17/20	12	\$	500.00
		3					\$	
							\$	
3. Contr	ibutor Informatio	on		Add Ren	nove			
a. Full Nar	ne, Mailing Address &	& Phone		b. Job Title/Profession		d. Comments	1	
	city, state, & zip)			President/Lithograp	hic printin			
	. Freeman							
and the second s	fwood Drive			c. Employer's Name/Spe				
336-263-	oro, NC 27410			Roto-Plate, Inc./prii	nting	e. Election Si	ım to Data	
330-203-	0230							
		F				\$	250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Description	j. Date (mm/dd/yy	yy)	k. Amount	
	1	check			8/1/20	12	\$	250.00
							\$	

4. Total only this Page \$ 850.00

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

\$ 2850.00

		m Individuals ividual contributions	over \$5	0 or contributions	Pg s unde		of <u>7</u>	Yes	⊠ N
Martin State of State		(and Fund if applica	THE R. P. LEWIS CO., LANSING	o or contribution.	3 unde	i \$50 ii ioiiii C	2. ID Nu		
	tee to Elect Tom N						2. 10 110	VD 47 ER	
	ributor Informati			Add	Ren	a a via			
	me, Mailing Address			b. Job Title/Profe		love	d. Comme	nto	
	e city, state, & zip)	CC I HOUC		President/Tex	Constitution of the second	emicals	u. Comme	iits	
Gary E.				1 resident rex	tile on	emedis			
2546 Ba				c. Employer's Na	me/Spe	ecific Field			
Elon, NO	C 27244			Unichem, Inc.					
336-578	-5476						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	
	1	check				8/7/2	2012	\$	100.00
								\$	
				-				\$	
3. Contr	ibutor Informati	on		Add	Rem	ove			
a. Full Na	me, Mailing Address	& Phone		b. Job Title/Profe	ession		d. Comme	nts	
(include	city, state, & zip)			Owner/Investr	ment f	ĭrm			
Richard	N. Fisher								
	irley Drive			c. Employer's Na	me/Spe	cific Field			
	on, NC 27215			Fisher Wealth	Mgm	t./investment			
336-532-	-4396						e. Election	Sum to Date	
							\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description		j. Date (mm/dd/	/yyyy)	k. Amount	
	1	check				8/20/	2012	\$	100.00
								\$	
				***************************************				\$	
3. Contr	ibutor Informati	on		Add	Rem	ove			
a. Full Nar	me, Mailing Address	& Phone		b. Job Title/Profe	ession		d. Commer	its	
	city, state, & zip)			self employed	/autho	r			
John S. F									
	khall Lane			c. Employer's Na	me/Spe	cific Field			
	NC 27302			none/writer					
919-304-	4314						e. Election	Sum to Date	
							\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-H	Kind Description		j. Date (mm/dd/	уууу)	k. Amount	
	1	check				8/20/	2012	\$	100.00
								\$	
								\$	
The Park of the Pa	l only this Pag						\$		300.00
5. Tota	l of ALL CRO	-1210 Pages					ď.		2050.00

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

2850.00

\$

Amendment

N 24					Amer	idment		
Contributions from Individuals	Pg	_3	of	7_		Yes	\boxtimes	No
Use this form to report individual contributions over \$50 or contributions	under	\$50 if form	n CRO	1205 is no	ot used			

1. Comm	ittee Full Name (ole)				2. ID Number				
Committe	ee to Elect Tom M							VD 47 ER		
3. Contri	ibutor Informatio	on		Add		Remo	ove			
a. Full Nam	ne, Mailing Address &	& Phone		b. Job T	Title/Prof	ession		d. Comments	S	
	city, state, & zip)			Chairr	man/tex	tile pri	nting			
	G. Sineath									
	ntry Club Drive			c. Employer's Name/Specific Field						
-	on, NC 27215			T.S. D	esigns,	Inc./te	xtiles			
336-227-	7332							e. Election Si	um to Date	
							\$	100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Lind Descri	iption		j. Date (mm/dd/yy	уу)	k. Amount	
	1	check					8/20/20)12	\$	100.00
									\$	
									\$	
3. Contri	ibutor Informatio	on		Add		Rem	ove			
a. Full Nam	ne, Mailing Address &	& Phone			Title/Prof	ession		d. Comments	s	
	city, state, & zip)			Retired	d					
William I										
113 Whitesell Drive				c. Employer's Name/Specific Field				-		
	Elon, NC 27244			na						
336-213-4	336-213-4112							e. Election Si	um to Date	
				7.			2	\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	n-Kind Description j. Date (mm/dd/yy			уу)	k. Amount		
	1	check					8/20/20)12	\$	100.00
									\$	
									\$	
3. Contri	butor Informatio	n		Add		Remo	ove			
a. Full Nam	ne, Mailing Address &	& Phone		b. Job T	itle/Prof	ession		d. Comments	s	
	city, state, & zip)			Sales 1	Manage	er/Com	puter softwar			
	Porthouse									
	en Place, Apt. E						cific Field	-		
	NC 27302			Vason	t Syster	ms, Inc	c./computers	FI 41 6		
919-568-8	8373							e. Election S	um to Date	
								\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Kind Descri	iption		j. Date (mm/dd/yy	уу)	k. Amount	
	1	check					8/20/20)12	\$	100.00
									\$	
									\$	
	only this Page							\$ 300.0		300.00
5. Total	of ALL CRO	-1210 Pages						\$		2850.00
(This line	must be on line 6 of	Detailed Summary Page C	RO-1100)						2000.00

Amendment **Contributions from Individuals** \bowtie 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 Tom Manning **VD 47 ER** 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) retired William R. Baker 810 Colonial Drive c. Employer's Name/Specific Field Burlington, NC 27215 na e. Election Sum to Date 336-584-7436 100.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount 1 check 8/20/2012 \$ 100.00 \$ \$ Add 3. Contributor Information Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Sr. Vice President/Banking Thomas E. Smith 2506 Brandt Forest Ct. c. Employer's Name/Specific Field Gate City's Community Bk/ Greensboro, NC 27455 336-282-0638 Banking 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) 1 check 8/22/2012 \$ 100.00 \$ \$ Add Remove 3. Contributor Information a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments Principal/Architect (include city, state, & zip) Lucien M. Roughton c. Employer's Name/Specific Field 3516 Darwin Rd.

Durham,	NC 27707			RND Architects/A	Architecture			
919-493-	5996					e. Election St	um to Date	
						\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/yy	уу)	k. Amount	
	1	check			8/30/20	12	\$	100.00
							\$	
							\$	
4. Total	only this Page	e				\$		300.00
	of ALL CRO	-1210 Pages Detailed Summary Page C	CRO-1100,)		\$		2850.00

		m Individuals ividual contributions of	over \$50		Pg <u>5</u> of oder \$50 if form CF		Yes not used	⊠ N	
CONTRACTOR AND ADDRESS.		(and Fund if applica	THE RESERVE OF THE PERSON NAMED IN			2. ID Nu			
Committ	ee to Elect Tom M	fanning					VD 47 ER		
3. Contr	ibutor Information	on	П	Add R	Remove				
a. Full Nai	me, Mailing Address	& Phone		b. Job Title/Profession		d. Commer	nts		
	city, state, & zip)			President/auto de		ar comme			
	W. Westcott								
303 Rain				c. Employer's Name	Specific Field				
Gibsonvi	ille, NC 27249			Westcott Automo					
336-228-	-0141					e. Election Sum to Date			
						\$	100.00		
. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount		
	1	check			8/30/2	012	\$	100.00	
							\$		
							\$		
. Contr	ibutor Informatio	on		Add R	emove				
. Full Nar	ne, Mailing Address	& Phone		b. Job Title/Profession	on	d. Commer	ıts		
	city, state, & zip)			Investment Rep/i	nvestment sale				
	C. Fisher								
	ndsor Circle			c. Employer's Name/					
	27244			Fisher Wealth M	gmt./ investmen				
336-532-	4396					e. Election	Sum to Date		
						\$	100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount		
	1	check			8/30/2	012	\$	100.00	
							\$		
							\$		
	ibutor Informatio			Add R	emove				
	ne, Mailing Address &	& Phone		b. Job Title/Profession	on	d. Commer	nts		
	city, state, & zip)			writer/author					
	L. Wallace			20 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2					
	w Village Drive			c. Employer's Name/					
	NC 27253			self employed/wi	iter			12-12-12-1	
336-376-	3458					e. Election	Sum to Date		
						\$	125.00		
. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount		
	1	check			9/10/2	012	\$	125.00	
							\$		
							\$		
1. Total	only this Pag	e				\$		325.00	

5. Total of ALL CRO-1210 Pages

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

2850.00

\$

		m Individuals ividual contributions of	over \$50	0 or contribu	Pg tions unde	_6 or \$50 if form C		Amendment Yes ot used	t No
1. Comn	ittee Full Name	(and Fund if applica	ble)				2. ID Nur	nber	
Committ	ee to Elect Tom M	Manning						VD 47 ER	
3. Contr	ibutor Informati	on		Add [Rem	iove			
a. Full Nar	ne, Mailing Address	& Phone		b. Job Title/	Profession		d. Commen	ts	
	city, state, & zip)			President	Promotion	nal Products			
	. Forrester								
309 Trail				c. Employer					
	on, NC 27215			Markell P	rinting/pro	omo product			
336-516-	3484						e. Election S	Sum to Date	
							\$	75.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	on	j. Date (mm/dd/	уууу)	k. Amount	
	1	check				9/11/2	2012	\$	75.00
								\$	
								\$	
3. Contr	ibutor Informatio	on		Add [Rem	ove			
a. Full Nan	ne, Mailing Address	& Phone		b. Job Title/	Profession		d. Commen	ts	
	city, state, & zip)			Mkt. Pres	ident/bank	ing			
	. Reynolds								
SOURCE STORY OF THE STORY OF THE STORY	estdale Drive			c. Employer					
336-584-	on, NC 27215			VantageS	outh Bank	banking	a Flation (Sum to Date	
330-364-	4133						e. Election S	sum to Date	
							\$	500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Description	n	j. Date (mm/dd/y	уууу)	k. Amount	
	1	check				9/24	/12	\$	500.00
								\$	
								\$	
HARLES AND STREET	butor Information			Add [Rem	ove			
CONTRACTOR OF STREET	ne, Mailing Address	& Phone		b. Job Title/	Profession	MINI	d. Commen	ts	
	city, state, & zip)			Attorney					
	Longest, Jr.				1 1 10	10			
	stone Drive n, NC 27215			c. Employer Holt, Lon					
336-584-					_	/ Attorneys	e. Election S	Sum to Date	4771 356,5
330-304-	3312			und Wiosc	icy, i ddc	Attorneys		ATO WAS ARROS AND CONTROL OF THE STATE OF TH	
				1			\$	100.00	

4. Total only this Page \$ 675.00

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

i. In-Kind Description

f. Prior

g. Account Code

h. Form of Payment

check

j. Date (mm/dd/yyyy)

9/25/2012

100.00

k. Amount

\$

\$

		m Individuals	over \$5	Pg 0 or contributions un	-		Amendment Yes The second sec	No No
	The second secon	(and Fund if applica				2. ID Nu		
Commit	tee to Elect Tom M	Manning					VD 47 ER	
3. Conti	ributor Informati	on		Add Re	emove			
	me, Mailing Address e city, state, & zip)	& Phone		b. Job Title/Profession President/Map Di		d. Comme	nts	
Annabel 2300 Yo	lle C. Powell, Ph.D ork Rd.).		c. Employer's Name/S				
0.750	r g. Account Code h. Form of Payment check I check Intributor Information Name, Mailing Address & Phone lude city, state, & zip)		Omni Resources, Distributor of Ma		e. Election	Sum to Date		
				logic Materials		\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/y		k. Amount	
	1	check			10/9/2	012	\$	100.00
							\$	
							\$	
				Add Re	emove			
		& Phone		b. Job Title/Profession	1	d. Comme	nts	
				c. Employer's Name/S	pecific Field	-		
						e. Election	Sum to Date	
				,		\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/y	yyy)	k. Amount	
							\$	
							\$	
							\$	
	ibutor Informatio			Add Re	move			
	me, Mailing Address of city, state, & zip)	& Phone		b. Job Title/Profession		d. Commer	nts	
(include	city, state, & Zip)			1				
				c. Employer's Name/S	pecific Field			
						e. Election	Sum to Date	
						\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Description	j. Date (mm/dd/yy	ууу)	k. Amount	
							\$	
							\$	
							\$	
1 Tota	l only this Pag					•		100.00

5. Total of ALL CRO-1210 Pages

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

2850.00

\$

Contributions from Political Party Committees

Use this form to r	eport contributions	from a	political	party
--------------------	---------------------	--------	-----------	-------

	Ill Name (and Fund if	applicable)					2. ID	Number		
Committee to Ele	ect Tom Manning							VD 47 E	R	
3. Contributor I	nformation] A	dd	Rei	nove				
a. Full Name, Mailin							b. Co	mments		
(include city, state										
608 N. O'Kelly A	y Republican Party									
Elon, NC 27244							c. Elec	ction Sum to Da	ate	
336-693-0563							\$	see below		
I. Account Code	e. Form of Payment	f. In-Kind Desc	cription			g. Date (mm/dd/yyy	y)	h. Amount	ıt	
1	check					7/19/20	012	\$ 500	.00	
1	check					9/28/2	012	\$ 500	.00	
								\$		
3. Contributor I	nformation] A	dd	Rer	nove				
. Full Name, Mailin	g Address & Phone						b. Cor	mments		
(include city, state								ection sum		
	y Republican Party (co	ontinued)					(CARCALTONIA	ides all		
508 N. O'Kelly A								and in kin		
Elon, NC 27244							c. Elec	ction Sum to Da	ate	
336-693-0563							\$	1385.42*		
l. Account Code	e. Form of Payment	f. In-Kind Desc				g. Date (mm/dd/yyy	y)	h. Amount		
na	In-Kind	Advertiseme Time News	voter gui	d		10/10/2	012	\$ 89.58		
na	In-Kind	Advertiseme Ala. News C	Gazette			10/3/2	012	2 \$ 229.17		
na	In-Kind	Promotional video for vo		gn		10/10/2	2012	\$ 66.0	67	
3. Contributor I	nformation] A	dd	Rer	nove				
. Full Name, Mailin							b. Cor	mments		
(include city, state										
[1] [1] [1] [2] [2] [2] [3] [4] [4] [4] [4] [4] [4] [4] [4] [4] [4	y Republican Women	of NC								
PO Box 1540							- FI	D		
Elon, NC 27244 336-269-0234							c. Elec	ction Sum to Da	ate	
JJU-207*0234							\$	100.00		
. Account Code	e. Form of Payment	f. In-Kind Desc	cription			g. Date (mm/dd/yyy	y)	h. Amount		
1	check					9/18/20	012	\$ 100	0.00	
								\$		
								\$		
4. Total only t	his Page						\$	1485.42		
. Total of AL	L CRO-1220 Pag	es					•	1495 42		
	on line 7 of Detailed Summ		00)				\$	1485.42		

a	Ill Name (and Fund if appl	icable)					2. ID	Number		
Committee to El	ect Tom Manning							VD 47 I	ER	
3. Contributor I	nformation		Add		Remove					
a. Full Name, Mailir	g Address & Phone		b. Type o	of Committee			d. Con	nments		
(include city, state	e, & zip)			Candidate	\boxtimes	PAC				
NC Home Build	ers Association			Referendun						
	ction Committee		c. Level I	Registered (Sp			1			
PO Box 99090				Federal		County:	1			
Raleigh, NC 27	524			State	H	Municipality:	e Flec	tion Sum to D	late	
800-662-7129	524			State		within cipanty.	C. Elec	tion Sum to D	att	
000-002-7129							\$	300.00		
f. Account Code	g. Form of Payment	h. In-Ki	ind Description	on	i. Da	te (mm/dd/yyyy)	j. Amount		
1	check					8/20/2012		\$ 300	0.00	
								6		
								\$		
								\$		
3. Contributor I			Add		Remove					
a. Full Name, Mailir			b. Type o	of Committee			d. Con	nments		
(include city, state				Candidate	\boxtimes	PAC				
North Carolina F	Realtors			Referendun	n					
Political Action	Committee		c. Level I	Registered (Sp	ecify)					
4511 Weybridge	Lane			Federal		County:	1			
Greensboro, NC			\square	State	\Box	Municipality:	e. Elec	tion Sum to D	ate	
800-443-9956								\$ 400.00		
f. Account Code	g. Form of Payment	h. In-Ki	ind Description i. Date (mm/dd/yyyy)				j. Amount			
accepted to the Wheel the Control of the Control									0.00	
1	check					9/14/2012		\$ 400	U.UU	
								\$		
								\$		
3. Contributor I	nformation		Add		Remove					
a. Full Name, Mailir				of Committee	remove		d. Cor	nments		
	큐마일 사람이 있는 것이 하셨습니다. 그는 이 그 것은			Candidate	П	PAC	u. con	imento		
(include city state	, et zip)		\dashv \vdash		ш	TAC				
(include city, state										
(include city, state			c I evel I	Referendum		Ing (priest 11"				
(include city, state			c. Level I	Registered (Sp		County				
(include city, state			c. Level I	Registered (Sp Federal		County:	e Fleo	tion Sum to D)ate	
(include city, state			c. Level I	Registered (Sp		County: Municipality:		ction Sum to D	Pate	
	g. Form of Poyment	h In.V:		Registered (Sp Federal State	pecify)	Municipality:	\$		Date	
(include city, state	g. Form of Payment	h. In-Ki	c. Level I	Registered (Sp Federal State	pecify)		\$	j. Amount	Date	
	g. Form of Payment	h. In-Ki		Registered (Sp Federal State	pecify)	Municipality:	\$		Date	
	g. Form of Payment	h. In-Ki		Registered (Sp Federal State	pecify)	Municipality:	\$	j. Amount	Date	
	g. Form of Payment	h. In-Ki		Registered (Sp Federal State	pecify)	Municipality:	\$	j. Amount	Date	
		h. In-Ki		Registered (Sp Federal State	pecify)	Municipality:	\$	j. Amount \$	Date	

Contributions from Other Political Committees

Amendment

Other Receipt Sources

Pg <u>1</u> 0

Amendment Yes

1

 \boxtimes

No

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

	ull Name (and Fund i	f applicable)			2. ID	Number
Committee to E		VD 47 ER				
3. Type of Recei	ipt Source	(Please use separate CRO-1)	250 forms	for each type o	f Rece	ipt Source.)
Interest		Contributions from Not-for-				side Sources of Income
4. Contributor	Information	☐ Add		Rem	ove	
a. Full Name, Maili	ng Address & Phone		b. Not-fo	r-Profit Federal II) #	d. Comments
(include city, stat	e, & zip)					interest on
Randolph Bank			1			checking acct.
3239 S. Church	St.		c. Outsid	e Source Explanat	ion	
Burlington, NC	27215					
336-229-5338						e. Election Sum to Date
						\$.17
f. Account Code	g. Form of Payment	h. In-Kind Description		i. Date (mm/dd/y	ууу)	j. Amount
1	_EFT			6/30/2012	2	\$.17
						\$
4. Contributor	Information	Add		Rem	ove	
a. Full Name, Maili	ng Address & Phone		b. Not-fo	r-Profit Federal II) #	d. Comments
(include city, stat	e, & zip)					
			c. Outsid	e Source Explana	ion	
				•		
						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		Rem	ove	
a. Full Name, Maili	ng Address & Phone		b. Not-fo	r-Profit Federal II) #	d. Comments
(include city, stat	e, & zip)					
			c. Outsid	e Source Explana	tion	
						e. Election Sum to Date
						\$
f. Account Code	g. Form of Payment	h. In-Kind Description		i. Date (mm/dd/y	/vvv)	j. Amount
Market and Cour	g. r. or m. or r ayment	ar in rand Description		Date (min/dd/)	3331	
						\$
						\$
5. Total only	this Page					\$.17
6. Total of Al	LL CRO-1250 Pag	ges				
(This line goes in	line 11a of Detailed Summe	ary Page CRO-1100 if Interest)				\$.17
(This line goes in	line 11b of Detailed Summe	ary Page CRO-1100 if Not-for-Profit Co	ntribution)			Ψ 111
		ary Page CRO-1100 if Outside Sources of				

						Amendment			
Disbursemo	ents		Pg	1 of	7	Yes	\boxtimes	No	
			ee for; operating expenses,	_		/political			
committees and	coordinated party ex	penditures.		2 111		785			
1. Committee F	ull Name (and Fun	d if applicable)			2	2. ID Number			
Committee to E	lect Tom Manning					VD 47	ER		
3. Type of Disbu	ursement (Plea	se use separate C	RO-1310 forms for each t	ype of Disburser	nent.)	nent.)			
Operating E	xpenses	Contributions to Car	ndidates/Political Committees	c	oordinated P	arty Expenditures	;		
4. Payee Inform	ation		Add	Remove					
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee N	ame	d. Comr	ments			
(include city, state,	& zip)								
Party City									
566 S. Stratford	Rd.		c. Level Registered (Specify)						
Winston-Salem,	NC 27103		Federal	County:					
336-725-1130			State	e. Electi	on Sum to Date				
				\$ 250	0.58				
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Requ	ired Remarks	Anadi		
1	D-1:4 C1	C	7/2/2012	\$250.59	party s	upplies			
1	Debit Card	С	7/2/2012	\$250.58	for fun	draiser			
				\$					
4. Payee Inform	ation		Add	Remove					
And in the production of the last	ng Address & Phone		b. Coordinated Committee N		d. Com	ments			
(include city, state,					and part of the second				
Food Lion Groc									
1545 NC Hwy 1			c. Level Registered (Specify)						
Mebane, NC 27			Federal	County:					
919-563-5511			State	Municipality:	e. Electi	ion Sum to Date			
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					6 10	1 75			
					\$ 10	1.75			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount		ired Remarks			
1	Debit Card	С	7/3/2012	\$59.74	Bevera				
	Deon cura		77572012	Ψ55.7 1		es for FR			
1	Debit Card	С	8/18/2012	\$42.01		ages for			
			20 (40,000 multipli 90 00 Metaloge 1 10)		Fundra	aiser			
4. Payee Inform			Add	Remove					
	ng Address & Phone		b. Coordinated Committee N	ame	d. Com	ments			
(include city, state,									
Thomas K. Mar	nning								
2035 Stuart Ct.	0.770.1.5		c. Level Registered (Specify)						
Burlington, NC	27215		Federal State	County: Municipality:	a Flasti	ion Sum to Date			
336-585-0361			State	wunicipality.					
						.02			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount		ired Remarks	30 7		
1	check	С	7/5/2012	\$30.57		purchased idraiser			
				\$	131 1411				
5. Total only th					\$	382.90			
	CRO-1310 Pages	amani Daga CDA 110	() if Operating Expenses)						
THE THE ONE IN	TOTAL LANGUE OF CHEROLOGICAL STREET	moury ruse CRU-110	o o onerome canemen						

\$ 5456.27 (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) A* - Media D - To Another Candidate C* - Fundraising B* - Printing E - Salaries F* - Equipment G - Political Party H* - Holding Public Office Expenses I - Postage J - Penalties K* - Office Expenses Q* - Donation to Legal Expense Fund * Codes require detailed explanation in required remarks field (k) CRO-1310 NC State Board of Elections December 2009

Disbursements Use this form to report expenditures from the committee for; operating committees and coordinated party expenditures.	Pg	2, contri	of butions to	-		Yes ical	\boxtimes	No
1. Committee Full Name (and Fund if applicable)					2. ID	Number	•	

	full Name (and Fun	d if applicable)				2. ID Number
	Elect Tom Manning					VD 47 ER
3. Type of Disb	ursement (Plea	ise use separate (CRO-1310 forms for eac	h type of Disburser	ment.)	
Operating E	Expenses	Contributions to Ca	indidates/Political Committees	C	oordinated	Party Expenditures
4. Payee Inform	nation		Add	Remove		
a. Full Name, Mail	ing Address & Phone		b. Coordinated Committee	e Name	d. Con	nments
(include city, state,	& zip)					
Office Depot						
1825 S. Church	St.		c. Level Registered (Specia	fy)		
Burlington, NC	27215		Federal	County:		
336-226-6122			State	Municipality:	e. Elec	tion Sum to Date
					\$ 9	3.67
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Req	uired Remarks
1	Dahit aand	C	7/14/2012	620.97	envel	ops, print
1	Debit card	С	7/14/2012	\$29.87		or FR lett
				\$		
				2		
4. Payee Inform	nation		Add	Remove		
CHARLES OF SECTION OF THE SECTION	ing Address & Phone		b. Coordinated Committee	e Name	d. Con	nments
(include city, state,						
US Postal Servi						
Burlington, NC	27215		c. Level Registered (Specia	fy)		
336-227-4293			Federal	County:		
200 227 1270			State Municipality:		e. Elec	tion Sum to Date
					\$ 2	12.90
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Req	uired Remarks
1	Debit card	С	7/18/2012	\$27.00	Stam	ps for aiser
•			0.11/0.010	****	stamp	
1	Debit card	С	9/4/2012	\$23.90		aiser app.
4. Payee Inforn	nation		Add	Remove		
	ing Address & Phone		b. Coordinated Committee	e Name	d. Cor	nments
(include city, state,						
Vista Print						
Lexington, MA			c. Level Registered (Speci	fy)		
781-652-6480			Federal	County:		
			State	Municipality:	e. Elec	ction Sum to Date
					\$ 6	3.71
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Red	uired Remarks
	200 21 10 10 10 10 10 10 10 10 10 10 10 10 10					ers-FR
1	Debit card	С	7/17/2012	\$63.71	188	sor rec.
					Fem	
				\$		
5. Total only th	is Page				\$	144.48
	CRO-1310 Pages					
(This line goes in	line 13a of Detailed Sur		00 if Operating Expenses) 00 if Contrib to Candidates/Po	litical Comm)	\$	5456.27
(This line goes in	line 13c of Detailed Sur	nmary Page CRO-110	00 if Coordinated Party Expen	ditures)		
	es (List detailed ex					
A* - Media	B* - Printing	C* - Fun		D - To Anot		
E - Salaries I - Postage O* - Other	F* - Equipment J - Penalties		ical Party ice Expenses			Office Expenses gal Expense Fund
	e detailed explanat	ion in required r	emarks field (k)			

Disburseme	ants				Amendment
		from the committee	Pg ee for; operating expense	, -	7 Yes No
	coordinated party ex		ee for, operating expense	es, contributions to	candidate/political
THE RESERVE OF THE PERSON NAMED IN COLUMN 2 IS NOT THE OWNER.	ull Name (and Fun	NAME AND ADDRESS OF THE OWNER, TH			2. ID Number
	lect Tom Manning				VD 47 ER
3. Type of Disbu	ursement (Plea	se use separate C	RO-1310 forms for each	h type of Disbursen	nent.)
Operating E	xpenses	Contributions to Car	ndidates/Political Committees	C	oordinated Party Expenditures
4. Payee Inform	ation		Add	Remove	
	ng Address & Phone		b. Coordinated Committee	e Name	d. Comments
(include city, state,					
Van's Advertisin	ıg		I ID : 4 1/6 1/	C \	
3264 Van Dr. Burlington, NC	27215		c. Level Registered (Specif	County:	
336-226-7400	27213		State	Municipality:	e. Election Sum to Date
330-220-7400			State _		2
					\$ 311.72
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check	О	8/6/2012	\$311.72	Nail files for
					camp. promotion
				\$	
4. Payee Inform	ation	. 🗆	Add	Remove	
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee	e Name	d. Comments
(include city, state,	& zip)				
Meg Monroe Hi					
2402 Oakwood			c. Level Registered (Specif		
Burlington, NC	27215		Federal _	County:	
336-584-0944			State	Municipality:	e. Election Sum to Date
					\$ 200.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check	С	8/7/2012	\$200.00	Entertainment at fundraiser
					at iunuraisei
				\$	
4. Payee Inform	ation		Add] Remove	_
	ng Address & Phone		b. Coordinated Committee	e Name	d. Comments
(include city, state,	& zip)				
Zacks Hotdogs 201 W. Davis St	•		c. Level Registered (Specif	S-/\	
Burlington, NC			Federal Federal	County:	
336-226-4746	27213		State	Municipality:	e. Election Sum to Date
				-	\$ 29.68
f. Account Code	a Form of Dayment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	
1. Account Code	g. Form of Payment		i. Date (iiiii/dd/yyyy)		k. Required Remarks Chili for hot
1	check	С	8/21/2012	\$29.68	dogs at FR
				\$	
5. Total only thi	is Dogo				\$ 541.40
	CRO-1310 Pages				5 341.40
	CONTRACTOR OF STREET, STREET, CO.	nmary Page CRO-110	0 if Operating Expenses)		0.5456.05
(This line goes in	line 13b of Detailed Sun	nmary Page CRO-1100	0 if Contrib to Candidates/Po		\$ 5456.27
7. Purpose Code		penditure code in	(h.) above)	attures)	
A* - Media	B* - Printing	C* - Fund		D - To Anot	her Candidate
E - Salaries	F* - Equipment				g Public Office Expenses
I - Postage	J - Penalties	K* - Offic	ce Expenses	Q* - Donati	on to Legal Expense Fund
O* - Other					

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

Disburseme	ents		Pg	4 of 7	Amendment Yes No			
7.7		from the committee	ee for; operating expenses,					
	coordinated party ex		ee ror, operating expenses,					
CONTRACTOR OF THE PARTY OF THE	ull Name (and Fun	AND DESCRIPTION OF THE PERSON NAMED IN COLUMN 2 IS NOT THE OWNER.			2. ID Number			
	lect Tom Manning				VD 47 ER			
3. Type of Disbu	irsement (Plea	se use separate C	RO-1310 forms for each t	pe of Disburseme	ent.)			
Operating E			ndidates/Political Committees		rdinated Party Expenditures			
4. Payee Inform	ation		Add	Remove				
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee Na	ame	d. Comments			
(include city, state,	& zip)							
	notional Product							
206 Arbor Drive			c. Level Registered (Specify)					
Elon, NC 2724	4		Federal	County:				
336-266-1273			State	Municipality:	e. Election Sum to Date			
					\$ 269.56			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks			
1	check	О	8/21/2012	\$269.56	Promotional koozies for cam			
				\$				
4. Payee Inform	ation		Add	Remove				
	ng Address & Phone		b. Coordinated Committee Na		d. Comments			
(include city, state,								
Graham Cinema								
N. Main St.			c. Level Registered (Specify)					
Graham, NC 27	253		Federal	County:				
336-229-4225			State	Municipality:	e. Election Sum to Date			
					\$ 85.00			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks			
1	check	Α	8/30/2012	\$85.00	Movie screen			
1	CHECK	A	6/30/2012	\$65.00	advertisement			
				\$				
4. Payee Inform	ation		Add	Remove				
	ng Address & Phone		b. Coordinated Committee Na		d. Comments			
(include city, state,								
Walmart								
3141 Garden Ro	l.		c. Level Registered (Specify)					
Burlington, NC	27215		Federal	County:				
336-584-6400			State	Municipality:	e. Election Sum to Date			
					\$ 73.35			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks			
1	Debit Card	С	8/11/12	\$73.35	condiments,			
					supplies for FR			
				\$				
5. Total only thi					\$ 427.91			
	CRO-1310 Pages							
			0 if Operating Expenses)		\$ 5456.27			
			0 if Contrib to Candidates/Politic		and the second of the second o			
		PROPERTY AND DESCRIPTION OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO I	0 if Coordinated Party Expenditu	ires)				
7. Purpose Code		penditure code in		D To 441-	er Candidata			
A* - Media E - Salaries	B* - Printing F* - Equipment	C* - Fund G - Politic		D - To Anothe	Public Office Expenses			
I - Postage	J - Penalties		ce Expenses		n to Legal Expense Fund			
O* - Other								

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

			Pg ee for; operating expens	_	of <u>7</u> ns to candida	Amendment Yes ate/political	\boxtimes	No
1. Committee F	ull Name (and Fun	d if applicable)				2. ID Number		
Committee to E	lect Tom Manning					VD 47	ER	
3. Type of Disb		ise use separate C	RO-1310 forms for each	h type of Disbu	ursement.)			
Operating E		Contributions to Car	ndidates/Political Committees		Coordinate	d Party Expenditure	S	
4. Payee Inform	nation		Add	Remove				
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee	e Name	d. Co	omments		
(include city, state,								
Harris Teeter G								
2727 S. Church			c. Level Registered (Special	<u> </u>				
Burlington, NC	27215		Federal _	County:		. C . D .		
336-585-1444			State	Municipality	y: e. Ele	ection Sum to Date		
					\$ 8	89.20		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount		quired Remarks		
1	Debit card	С	8/17/2012	\$9.18	Letti	uce for FR		
				\$				
4. Payee Inform	nation		Add	Remove				
a. Full Name, Maili	ing Address & Phone		b. Coordinated Committee	e Name	d. Co	omments		
(include city, state, WBAG Radio 1745 Burch Brid Burlington, NC 336-226-1150	dge Rd.		c. Level Registered (Special Federal State	fy) County: Municipality	y: e. Ele	ection Sum to Date		
					\$ 6	630.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Re	quired Remarks		
1	check	A	9/19/2012	\$630.00	radio	o advert.		
				\$				
4. Payee Inform	nation		Add	Remove				
a. Full Name, Maili	ing Address & Phone		b. Coordinated Committee	e Name	d. Co	omments		
(include city, state, Curtis Media Bi 1109 Tower Dri Burlington, NC	roadcasting-WPCM ive		c. Level Registered (Speci	fy) County:				
336-584-0126			State	Municipality Municipality	y: e. Ele	ection Sum to Date		
					\$ 8	840.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Re	equired Remarks		
1	check	A	9/19/2012	\$840.00	radio	o advert.		
				\$				
5. Total only th	is Page				S	1479.18		

\$ 5456.27 (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) A* - Media C* - Fundraising D - To Another Candidate. B* - Printing E - Salaries G - Political Party F* - Equipment H* - Holding 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 (k)

6. Total of ALL CRO-1310 Pages

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

	ents report expenditures coordinated party ex		mitte	e for; operating exp	Pg benses,	6 contribution	of <u>7</u> s to candida	Amendment Ves ate/political		No
	ull Name (and Fun	d if applicab	le)					2. ID Number		
***************************************	Elect Tom Manning							VD 47	ER	
3. Type of Disb				RO-1310 forms for		ype of Disbu	rsement.)			
Operating E		Contributions	to Can	didates/Political Commi	ttees		Coordinate	d Party Expenditures		
4. Payee Inform	nation			Add		Remove				
a. Full Name, Mail	ing Address & Phone			b. Coordinated Comr	nittee N	ame	d. Co	omments		
(include city, state,										
	nty Sertoma Club		-							
PO Box 1358	27216		-	c. Level Registered (S	pecify)					
Burlington, NC	2/216			Federal County:						
336-222-5020			-	State		Municipality	e. Ele	ection Sum to Date		
							\$ 4	40.00		
f. Account Code	g. Form of Payment	h. Purpose Co	de	i. Date (mm/dd/yy	уу)	j. Amount	k. Re	quired Remarks		
1	check	0		9/20/2012		\$40.00		ation to		
							char	charity		
						\$				
4. Payee Inform	nation			Add		Remove				
	ing Address & Phone			b. Coordinated Comp	nittee N	ame	d. Co	omments		
(include city, state,										
Mebane Enterpr	rise									
106 N. Fourth S	5.7.5			c. Level Registered (S	pecify)					
Mebane, NC 2'	7302			Federal		County:				
919-563-3555				State		Municipality	e. Ele	ection Sum to Date		
							\$ 8	823.50		
f. Account Code	g. Form of Payment	h. Purpose Co	de	i. Date (mm/dd/yy	уу)	j. Amount	k. Re	quired Remarks		
1	check	A		9/24/2012		\$823.50	New	spaper		
•	Check	1		7/24/2012		\$625.50	adve	ertising		
						\$				
4. Payee Inform	nation			Add		Remove				
a. Full Name, Maili	ng Address & Phone			b. Coordinated Comm	nittee Na	ame	d. Co	mments		
(include city, state,										
TCS Event Ren			-							
3158 Lear Drive				c. Level Registered (S	pecify)					
Burlington, NC	27215			Federal	님	County:				
336-437-0534			-	State		Municipality:	e. Ele	ection Sum to Date		
							\$ 3	576.90		
f. Account Code	g. Form of Payment	h. Purpose Co	de	i. Date (mm/dd/yy	yy)	j. Amount		quired Remarks		
1	check	С		9/26/2012		\$576.90		les/Chairs		
				7,20,2012		ψ570.70	for f	undraiser		
						\$				

5. Total only this Page

6. Total of ALL CRO-1310 Pages

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

\$

1440.40

					Amei	dment		
Disbursements	Pg	7	of	7		Yes	\boxtimes	ľ
TI 41: C 4 C		4 1		1.	1-4-1-14	1		

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
	Elect Tom Manning			Monte de la constante de la co				VD 47 ER
3. Type of Disb		ise use separate C				The same of the sa		
Operating T	NAME OF TAXABLE PARTY OF TAXABLE PARTY.	Contributions to Ca	ndidates/	Political Commit	itees		ordinate	d Party Expenditures
4. Payee Inform	nation		Add		Ш	Remove		
a. Full Name, Mail	ing Address & Phone		b. Co	ordinated Comn	nittee N	ame	d. Co	mments
(include city, state,	& zip)							
Alamance New	S							
PO Box 431			c. Lev	vel Registered (S	pecify)			
Graham, NC 2	7253		Federal C			County.		
336-228-7851				State		Municipality:	e. Ele	ction Sum to Date
							\$ 3	95.00
f. Account Code	g. Form of Payment	h. Purpose Code	i.]	Date (mm/dd/yy	yy)	j. Amount	-	quired Remarks
1	check	A	9	/28/2012		\$395.00	1	spaper
		19578		\$1000 C # \$1000 C C C C C C C C C C C C C C C C C C			adve	rtising
						\$		
4. Payee Inform	nation		Add			Remove		
a. Full Name, Mail	ing Address & Phone		b. Co	ordinated Comn	nittee N	ame	d. Co	mments
(include city, state,	& zip)							
Burlington Tim	es-News							
707 S. Main St.			c. Lev	vel Registered (S	pecify)			
Burlington, NC	27215			Federal		County:		
336-227-0131				State		Municipality:	e. Ele	ction Sum to Date
							\$ 6	545.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. 1	Date (mm/dd/yy	yy)	j. Amount	-	quired Remarks
1	check	A	1	0/4/2012		\$645.00	1	spaper rtising
						\$		
4. Payee Inform	nation		Add		П	Remove		
	ing Address & Phone		_	ordinated Comn	nittee N		d. Co	mments
(include city, state,								
(merade eny, state,	CC Zip)							
			c. Lev	vel Registered (S	pecify)			
				Federal	П	County:	1	
				State	П	Municipality:	e. Ele	ction Sum to Date
						P	\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. 1	Date (mm/dd/yy	yy)	j. Amount	k. Re	quired Remarks
						\$		
						\$		
5 Total In (1	in Dame]	•	1040.00
5. Total only th							\$	1040.00
	CRO-1310 Pages		0.25.0-	nating F				
	line 13a of Detailed Sun					\$	5456.27	
			I if Contrib to Candidates/Political Comm) If Coordinated Party Expenditures)					
	AND DESCRIPTION OF THE PARTY OF	ALIEN PRINCIPAL	-	and the same beautiful to the same of	xpenditi	ures)		
	es (List detailed ex					D 77 4 1	C	
A*-Media B*-Printing C*-Fun E - Salaries F*-Equipment G-Politi						D - To Anoth		office Expenses
1 - Postage J - Penalties K*-Offi								gal Expense Fund
O* - Other	o - i chances	K - OIII	ec Expe	ciises		Q - Donath	on to LA	ear expense rana
COST AND RESIDENCE AND RESIDENCE STATE OF A SECURIOR STATE OF THE	e detailed explanat	ion in required r	emark	s field (k)				

	report expenditures		Pg ee for; operating expenses,	1 of 1 contributions to c	
THE RESIDENCE AND ADDRESS OF THE PERSON NAMED IN	coordinated party ex	The second secon			la IDN I
	ull Name (and Fundlect Tom Manning	d if applicable)			2. ID Number VD 47 ER
3. Type of Disb		usa usa sanawata C	DO 1210 forms for each to	una of Dichuscom	
Operating E		The second secon	RO-1310 forms for each tyndidates/Political Committees		ordinated Party Expenditures
4. Payee Inform			Add	Remove	2ponunus
	ng Address & Phone		b. Coordinated Committee Na		d. Comments
(include city, state,	& zip)		,		
1506 Hillsborou			c. Level Registered (Specify)		
Raleigh, NC 27			Federal	County:	
919-828-6423			⊠ State □	Municipality:	e. Election Sum to Date
					\$ 250.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check	G	7/20/2012	\$250.00	
				\$	
4. Payee Inform	nation		Add	Remove	
a. Full Name, Maili	ing Address & Phone		b. Coordinated Committee Na	ame	d. Comments
			c. Level Registered (Specify) Federal State	County: Municipality:	e. Election Sum to Date
64 (61	E CD	h. Purpose Code		1.	\$
f. Account Code	g. Form of Payment	n. i ui pose code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
4. Payee Inform	nation		Add	Remove	
THE RESERVE THE PROPERTY OF THE PARTY OF THE	ing Address & Phone		b. Coordinated Committee Na		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
				\$	
				\$	
5. Total only th	is Page				\$ 250.00
(This line goes in (This line goes in	line 13b of Detailed Sun	nmary Page CRO-110	0 if Operating Expenses) 0 if Contrib to Candidates/Politic 0 if Coordinated Party Expendita		\$ 250.00
	es (List detailed ex				
A* - Media E - Salaries	B* - Printing F* - Equipment	C* - Fund G - Politic		D - To Anoth H* - Holding	er Candidate Public Office Expenses

I - Postage

O* - Other

J - Penalties

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

K* - Office Expenses

Q* - Donation to Legal Expense Fund

Outstanding Loans

				Amei	ıdment		
Pg	1	of	1		Yes	\boxtimes	No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Na	2. ID Number						
Committee to Elect To	VD 47 ER						
3. Lender Informatio	n 🗌 Ad	ld		Remove			
a. Full Name, Mailing Add		b. Job Title/Profession			d. Comments		
(include city, state, & zip)	business banker					
Tom Manning							
2035 Stuart Ct.	-	E 1	1. N /6	C - E!-14	e. Start Date (mm/dd/yyyy)		
Burlington, NC 2721: 336-585-0361)		yer's Name/Specif ph Bank	nc Field	10/1/10		
330-363-0301			ercial Banking		f. End Date (mm/dd/yyyy)		
		Commi	ciciai Danking				
					3/15/13		
g. Rate	h. Security Pledged	i. Original Loan Amount			j. Remaining Loan Balance		
0 %	none		\$ 1000		\$ 1000		
0 %			\$ 1000		100 L 1000 L 1000 L 1000 L		
k. Full Name of Lending In	stitution				I. Loan Number		
none							
				1 5			
3. Lender Informatio				Remove			
a. Full Name, Mailing Add		b. Job Ti	tle/Profession		d. Comments		
(include city, state, & zij	0)	-					
					e. Start Date (mm/dd/yyyy)		
		c. Emplo	yer's Name/Speci	fic Field	c. Start Date (mm/da/yyyy)		
		C. Emplo	yer s rumerspeer				
					f. End Date (mm/dd/yyyy)		
g. Rate	h. Security Pledged		i. Original Loan	Amount	j. Remaining Loan Balance		
%		\$			\$		
k. Full Name of Lending I	nstitution				1. Loan Number		
3. Lender Informatio	n 🗌 Ad	ld		Remove			
a. Full Name, Mailing Add		b. Job Ti	itle/Profession		d. Comments		
(include city, state, & zi	p)						
					e. Start Date (mm/dd/yyyy)		
		c. Emplo	yer's Name/Speci	fic Field	-		
					f. End Date (mm/dd/yyyy)		
					1. End Date (mm/dd/yyyy)		
g. Rate	h. Security Pledged		i. Original Loar	1 Amount	j. Remaining Loan Balance		
%			\$		\$		
k. Full Name of Lending I	1. Loan Number						
4 Total only this Dag	0				\$ 1000		
4. Total only this Pag							
5. Total of ALL CRO-1430 Pages (This line must be on line 21 of Detailed Summary Page CRO-1100)					\$ 1000		

In-Kind Contributions Pg 1 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	
Committee to Elect Tom Manning				VD 47 ER	
3. Contributor Information Add R	Remove				
a. Full Name, Mailing Address & Phone	b. Type of (Contributor	c. Com	iments	
(include city, state, & zip)		vidual	. 5011		
Alamance County Republican Party		didate			
608 N. O'Kelly Ave.	Part		*in kind total		
Elon, NC 27244	PAC	i .	only		
336-693-0563		Referendum		ction Sum to Date	
	Oth	er Receipt Source	\$	385.42*	
e. Description		f. Date (mm/dd/yyy	vy)	g. Fair Market Amount	
Advertisement in the Burlington Times News voter		10/10/2012	,	\$ 89.58	
guide to support Republican candidates		10/10/2012		- 07.00	
Advertisement in the Alamance News Gazette to		10/3/2012		\$ 229.17	
support Republican candidates		- 5,5,2012			
Promotional video to support Republican candidates		10/10/2012	2	\$ 66.67	
to be used as a voter application prior to voting]	0.655.55		
	Remove	Contaile	0.0	ımente	
a. Full Name, Mailing Address & Phone	b. Type of C	Contributor	c. Con	nments	
(include city, state, & zip)	↓ □	ividual ididate	1		
	Can				
	Par	•			
		erendum	d. Elec	ction Sum to Date	
		er Receipt Source			
	1 4 3.11	c teecipt Source	-		
		c. recorpt source	\$		
e. Description		f. Date (mm/dd/yyy		g. Fair Market Amount	
e. Description				g. Fair Market Amount	
e. Description					
e. Description				\$	
	Remove			\$ \$	
	Remove b. Type of (f. Date (mm/dd/yyy	yy)	\$ \$	
3. Contributor Information Add R	Remove b. Type of c	f. Date (mm/dd/yyy	yy)	\$ \$ \$	
3. Contributor Information Add R a. Full Name, Mailing Address & Phone	Remove b. Type of o	f. Date (mm/dd/yyy	yy)	\$ \$ \$	
3. Contributor Information Add R a. Full Name, Mailing Address & Phone	Remove b. Type of control lind Car	f. Date (mm/dd/yyy	yy)	\$ \$ \$	
3. Contributor Information Add R a. Full Name, Mailing Address & Phone	Remove b. Type of Car Car Par	f. Date (mm/dd/yyy	c. Con	\$ \$ s	
3. Contributor Information Add R a. Full Name, Mailing Address & Phone	Remove b. Type of 0 Car Par PA	f. Date (mm/dd/yyy	c. Con	\$ \$ \$	
3. Contributor Information Add R a. Full Name, Mailing Address & Phone	Remove b. Type of 0 Car Par PA	f. Date (mm/dd/yyy	c. Con	\$ \$ s	
3. Contributor Information Add R a. Full Name, Mailing Address & Phone	Remove b. Type of 0 Car Par PA	f. Date (mm/dd/yyy	c. Con	\$ \$ s	
3. Contributor Information Add R a. Full Name, Mailing Address & Phone (include city, state, & zip)	Remove b. Type of 0 Car Par PA	f. Date (mm/dd/yyy	c. Con	\$ \$ shape of the state of the s	
3. Contributor Information Add R a. Full Name, Mailing Address & Phone (include city, state, & zip)	Remove b. Type of 0 Car Par PA	f. Date (mm/dd/yyy	c. Con	\$ s nments ction Sum to Date g. Fair Market Amount	
3. Contributor Information Add R a. Full Name, Mailing Address & Phone (include city, state, & zip)	Remove b. Type of 0 Car Par PA	f. Date (mm/dd/yyy	c. Con	\$ s s mments ction Sum to Date g. Fair Market Amount \$	
3. Contributor Information Add R a. Full Name, Mailing Address & Phone (include city, state, & zip) e. Description	Remove b. Type of 0 Car Par PA	f. Date (mm/dd/yyy	c. Con	\$ \$ shape sh	
3. Contributor Information Add R a. Full Name, Mailing Address & Phone (include city, state, & zip)	Remove b. Type of 0 Car Par PA	f. Date (mm/dd/yyy	c. Con d. Elec	\$ s s mments ction Sum to Date g. Fair Market Amount \$ \$ \$	