Amendment

Disclosure Report Cover

Use this form for general report and committee information, must be signed and submitted along with other detailed forms. Do not use this form to update information.

1. Committee In	formation				•			
a. Full Name								c. ID Number
IAN BALTUTI	S			-				
b. Mailing Addre	ess (include Cit	y, State and Zip	Code)					d. Date Filed
2516 S MAUR BURLINGTON								10/15/2013
DORLINGTON	1, INC 27213							e. Phone Number
								(919) 578-3393
2. Report Year	3. Period Star	t Date (mm/dd/y	y)	4. Period	End Dat	te (mm/dd/yy)	5. Treasur	er Full Name
2013	07	7/01/2013		,	09/24/2	013	IAN BALT	TUTIS
6. Type of Comm		One)	9. Тур	e of Report	(ch	neck only one	type of repo	ort from one category)
X Candidate Can	npaign 🔲 Par	ty	Munic	ipal		State/County		Referendum
☐ Joint Fundraise	er 🔲 PAG	C		Organizatio		Organizatio	onal	☐ Organizational
Referendum		al Expense Fund	X	Thirty-five	day	Quarterly		Pre-referendum
7. Type of Fund		e, check one)		Pre-primary	/	First		☐ Final
Booster Fund	l"			Pre-election	1	☐ Second		Supplemental Final
Building Fund				Pre-runoff		Third		☐ Annual
	lection Year Can- npaign Financing			Semi-annua Mid Ye	-	Fourth Semi-annua		Special
				Year E		☐ Mid Ye		10. Special Report Name
Other:				Final		Year E	nd	
8. Number of Fu	ındraisers this	Report		Special		☐ Final		
0					Special			
3. Account Information 3. Account Information								
a. Financial Institution Full Name a. Financial Institution Full Name								
WELLS FARG	0							
b. Purpose		c. Account Cod	e		b, Purp	ose		c. Account Code
CAMPAIGN			1				·	
		d. Period Begin	Balan	ce				d. Period Begin Balance
		S			-			s
CERTIFICATIO)N							<u></u>
I certify that t Chapter 163 o funds. I furth	he Committee of the NC Gener er certify that the same of Stringer	al Statutes and his report is co	that no	o funds are true and c	commin orrect a	ngled with pro	hibited or o	2A, 22B & 22D-22M of other non-disclosed ed by the NC State Board 10/15/2013 Date
FOR OFFICE U		, ,	-	-0				
Date Receiv	ed:	10/15/13	_	Emplo	yee: _	JG	<u>De</u>	livery Method Normal Mail
Date Postma	ırked:			Emplo	yee:		-	Registered Mail Hand Delivered
Date Scanne	ed:		_	Emplo	yee:	-	_ <u>\</u>	Electronically Filed
Date Data E	ntered:			Emplo	yee:		_ 🗆	Signer has not received nandatory training
	assistar	annot be used that treasurer, cus	stodian	of books i	nforma	tion, or accoun	nt informati	

Amendment

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 Re			D Number	
IAN BALTUTIS	2013 Thirty-	five-day		·	
Start of Election Cycle: January 1,		Total Reporting			al this on Cycle
4) Cash on Hand at Start		\$	0.00	S	0.00
RECEIPTS				_	
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	290.00	\$	290.00
6) Contributions from Individuals	(CRO-1210)	\$	3,696.44	\$	3,696.44
7) Contributions from Political Party Committees	(CRO-1220)	\$	0.00	\$	0.00
8) Contributions from Other Political Committees	(CRO-1230)	\$	0.00	s	0.00
9) Loan Proceeds	(CRO-1410)	\$	0.00	\$	0.00
0) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	0.00	\$	0.00
11) Other Receipt Sources					
11a) Interest on Bank Accounts	(CRO-1250)	\$	0.00	\$	0.00
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$	0.00	\$	0.00
11c) Outside Sources of Income	(CRO-1250)	\$	0.00	\$	0.00
11d) Legal Expense Fund - Other Sources	(CRO-1270)	s	0.00	\$	0.00
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	0.00	s	0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,	11d and 11e)	\$	3,986.44	\$	3,986.44
EXPENDITURES				*****	
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$	0.00	\$	0.00
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	0.00	\$	0.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$	0.00	\$	0.00
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	24.15	\$	24.15
15) Loan Repayments	(CRO-1420)	S	0.00	\$	0.00
16) Refunds/Reimbursements from the Committee	(CRO-1320)	S	95.33	s	95.33
17) In-Kind Contributions	(CRO-1510)	S	885.33	s	885.33
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15.	. 16 and 17)	\$	1,004.81	s	1,004.81
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18)	\$	2,981.63	\$	2,981.63
ADDITIONAL INFORMATION	(CDO 1220)		0.00	्रिक व पुर्विक में स्ट्राप्टी	<u>१९८५७३ हम् ५०</u>
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	0.00		
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	0.00		
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$	0.00		
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$	0.00	The second of th	
24) Account Transfers Within the Committee	(CRO-1720)	\$	0.00	\$5540K	
25) Administrative Support	(CRO-1710)	\$	0.00	\$	0.00
26) Forgiven Loans	(CRO-1440)	\$	0.00	\$	0.00
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$	0.00	\$	0.00
28) Contributions to be Refunded	(CRO-1215)	\$	0.00	\$	0.00

		outions from I	ndividuals Page From Individuals of \$	1 of 1 50 or less	Amendment No In No
		Fund if applicable)	· · ·		Number
IAN BALTU	TIS	17 Table 1 Tab			
3. Contribut	or Information		*****		
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
Add Remove	1	Credit Card		09/18/2013	S 20.00
☐ Add ☐ Remove	!	Cash		09/08/2013	S 20.00
☐ Add ☐ Remove	l	Check		09/09/2013	S 50.00
☐ Add ☐ Remove	1	Check		09/10/2013	S 50.00
Add Remove	1	Check		09/07/2013	S 50.00
☐ Add ☐ Remove	1	Credit Card		09/19/2013	S 50.00
☐ Add ☐ Remove	1	Check		09/13/2013	S 25.00
☐ Add ☐ Remove	1	Check		09/23/2013	S 25.00

CRO-1205

4. Total only this Page

5. Total of ALL CRO-1205 Pages

(This line must be on line 5 of Detailed Summary Page CRO-1100)

NC State Board of Elections

\$290.00 April 2007

S

\$290.00

		om Individuals			g <u>1</u> of <u>4</u>] No
		dividual contribution		ontributions u	nder \$50 if form CRO 1	-	The second secon	
	mittee Full Name ALTUTIS	(and Fund if applicab	le)			2	ID Number	
IMIN D	ALTOTIS							
100000000000000000000000000000000000000	ributor Informati			Add Re	emove			
	Name, Mailing Add			b. Job Title/P	rofession	d. (Comments	
	ude city, state, & z	ip)		PHARMACIS	ST			
	E HARRELL OTTINGHAM LN			c. Employer's	Name/Specific Field	1		
	NGTON, NC 2721	.5		EDGEWOOD PHARMACY				
						e. I	Election Sum to	o Date
						S		100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount	
	1	Check			09/08/2013		S	100.00
							S	
							S	
	ributor Informati			Add Re	emove			
	Name, Mailing Ado			b. Job Title/P	rofession	d. (Comments	
	ıde city, state, & z	ip)		FINANCE				
Karata Caratana da	MURRELL JR ERN AVE			c Fmployer's	Name/Specific Field			
200000000000000000000000000000000000000	EKN AVE ÆPORT, LA 7110:	5		SELF EMPLO				
				ODD D.A.	TLLD	e. I	Election Sum to	o Date
						s		100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	crintion	j. Date (mm/dd/yyyy)		k. Amount	
	1	Check			09/06/2013		S	100.00
						-	S	
							s	
3. Conti	ributor Informati	on		Add 🗆 Re	emove			
a. Full N	Name, Mailing Add	dress & Phone		b. Job Title/Pr	CONTRACTOR OF THE PROPERTY OF	d. (Comments	
***************************************	ide city, state, & z	ip)		DENTIST				
	OZWIAK			c Fmplover's	Name/Specific Field			
	RIDGEPORT DR GTON, KY 40502			RETIRED	Name/Specific Field			
15.57.2.2	3101,111			KLIKED		e. E	Election Sum to	o Date
						S		250.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount	
	1	Check			09/11/2013		s	250.00
							S	
							S	

CRO-1210

4. Total only this Page

5. Total of ALL CRO-1210 Pages

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

NC State Board of Elections

3,696.44 April 2007

450.00

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S

Contributions from Individuals

				Amendme	ent
Pg	2	of	4	X Yes	□ N₀

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Com	nittee Full Name		2. I	D Number					
IAN BA	LTUTIS	The state of the s							
3. Conti	ributor Informati	on		Add 🗆 Ren	nove				
a. Full 🕽	ame, Mailing Add	iress & Phone		b. Job Title/Pre		d. C	omments		
(inclu	de city, state, & z	ip)		BUSINESS					
IAN BA	LTUTIS			ADMINISTRATION					
	MAURY ARCH			c. Employer's Name/Specific Field					
	NGTON, NC 2721	5		Management of Companies and			e. Election Sum to Date		
(919) 57	78-3393			Enterprises		e. L	Tection Sum to Date		
						S	1,040.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount		
	1	Electronic Funds Tra			08/12/2013		S 250.00		
	1	In Kind	FLYER PRINTI	NG COSTS	09/03/2013		\$ 790.00		
	1	In Kind	BOE VOTER IN	IFO CD	08/06/2013		S 25.60		
3. Conti	ibutor Informati	on		Add 🔲 Ren	nove				
a. Full N	ame, Mailing Add	lress & Phone		b. Job Title/Pro	ofession	d. C	omments		
(include city, state, & zip)				SALES					
	ROOKS								
PO BOX		_			Name/Specific Field				
BURLI	BURLINGTON, NC 27216				YEED		Tection Sum to Date		
							rection Sum to Date		
						\$	1,100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount		
	1	Check			09/16/2013		\$ 1.100.00		
							S		
							S		
3. Conti	ibutor Informati	Otl		Add 🗆 Rer	nove				
a, Fuli N	ame, Mailing Add	lress & Phone		b. Job Title/Profession d. Comment			omments		
	de city, state, & z	ip)		LEGAL					
	T METHVIN			c Employer's	Name/Specific Field				
43 E BE	ON, TX 77007			RETIRED	- unicrope unic inclu				
110031	ON. 17. 17001			KLTIKLD		e. E	Tection Sum to Date		
						S	500.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount		
	1	Electronic Funds Tra			09/09/2013		S 500.00		
							S		
							S		
4. Total only this Page					S	2,665.60			
5. Tota	al of ALL CR	O-1210 Pages) CBO 1100			S	3,696.44		
(1 his l	ine mist be on line	<u> </u>	•						

Contributions from Individuals

				Amendme	ent
Pg	3	of	4	X Yes	□ N₀

Use this form to report individual contributions over S50 or contributions under S50 if form CRO 1205 is not used

1. Com	mittee Full Name	(and Fund if applicabl	e)			2. ID N	Tamber
IAN BA	LTUTIS	1.4 - 1 .644			, 44		Adalan sakar Amerika da kalan da da da da da da da da da
3. Cont	ributor Informati	00		Add 🔲 Res	move		
a. Full S	Same, Mailing Ado	iress & Phone		b. Job Title/Pr	ofession	d. Com	ments
(inclu	ide city, state, & z	ip)		DENTIST			
	DORNBLAZER				- /0		
	EDAR CROFT DR			c. Employer's Name/Specific Field DORNBLAZER DENTAL			
CHARL	OTTE, NC 28270			DORNBLAZE	R DENTAL	e. Elec	tion Sum to Date
		 -	T:-		,	S	100.00
		h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)	k.	Amount
	1	Credit Card			09/22/2013	S	100.00
						s	
						S	
3. Conti	ributor Informati	on		Add 🔲 Rea	move		
a. Full Name, Mailing Address & Phone			b. Job Title/Pr	ofession	d. Com	ments	
(inclu	de city, state, & z	ip)		CONSULTING)		
	KACZYK			F 1 1 1	Y		
	ALLEY OAK DR A. FL 33618			<u> </u>	Name/Specific Field		
IAMITA	K. P.L. 33016			ENTERGY		e. Elect	tion Sum to Date
						s	150.00
		17.					
	g. Account Code	h. Form of Payment Check	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)	k.	Amount
	l 	Check			09/23/2013	S	150.00
						S	
						S	
3. Contr	ibutor Informati	011		Add Ref	nove		-
	ame, Mailing Add			b. Job Title/Profession d. Comments			ments
	de city, state, & z	ip)		PURCHASING	i		
	WINTRINGHAM			c Employer's	Name/Specific Field		
	DGECREST AVE NGTON, NC 2721:	5		······	ER EQUIPMENT		
DONE	1010111110 2721	•		MFG	EREQUITMENT	e. Elect	tion Sum to Date
						s	150.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	cription	j. Date (mm/dd/yyyy)	k.	Amount
	1	Check			09/15/2013	s	150.00
						s	
						S	
4. Tota	al only this Pa	ge				S	400.00
	al of ALL CR	O-1210 Pages 6 of Detailed Summary P	age CRO-1100)			s	3,696.44
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v	UHLLIN	ULIVE	13 II UI	.11 111			uai	

				Amendme	ent
Pg	4	of	4	X Yes	□ N ₀

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

I. Com	nittee Full Name	(and Fund if applicab	le)			2. I	D Number	
IAN BA	LTUTIS				12 (1 (1 (1 (1 (1 (1 (1 (1 (1 (,
3. Contr	ibutor Informati	од		Add □ R	emove	L		
	ame, Mailing Add			b. Job Title/F		d. C	Comments	
(inclu	de city, state, & z	ip)		BUSINESS			***************************************	
IAN BA	LTUTIS			ADMINISTR				
2516 S I	MAURY ARCH			c. Employer'	s Name/Specific Field			
BURLI	NGTON, NC 2721	5		Management	of Companies and	<u> </u>		
(919) 57	'8- 3393			Enterprises		e. Election Sum to Date		
						s		1.040.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount	1
	1	In Kind	CANDIDATE F	ILING FEE	07/18/2013		S	20.00
	1	In Kind	POSTAGE AND NOTARY 07/18/2013			S	49.73	
							s	
3. Conti	ibutor Informati	Oži		Add □ R	emove			
a. Full N	ame, Mailing Add	iress & Phone		b. Job Title/P	rofession	d. C	Comments	
(inclu	de city, state, & z	ip)		PILOT				
MICHA	EL FUNK							
	ATLANTIC BLVI			·	s Name/Specific Field	1		
POMPA	NO BEACH, FL	33069		SILVER AIRWAYS			e. Election Sum to Date	
						e. r	Techon 2m	п то рате
						S		111.11
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount	í
	1	Electronic Funds Tra			09/05/2013		S	111.11
							s	
							S	
4. Tota	al only this Pa	ge				S		180.84
	al of ALL CR	O-1210 Pages 6 of Detailed Summary 1	Page CRO-1100\			S		3,696.44
CRO 1		•		and of Election		<u> </u>		April 2007

Aggregated	Non-Media	Expenditures
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			Am			
Page _	1	_ ofl	\mathbf{x}	Yes		No

		on inc non-media				
1		d Fund if applicable)		2000年 · 1000年	2. ID Number	name in the second
IAN BALT	UTIS					
3. Payee In	formation				•	
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
☐ Add ☐ Remove	1	Draft	0	09/22/2013	S 5.83	PAYMENT PROCESSING -
☐ Add ☐ Remove	1	Draft	О	09/09/2013	S 14.80	PAYMENT PROCESSING FEE -
Add Remove	1	Drafi	0	09/05/2013	S 3.52	PAYMENT PROCESSING FEE -
4. Total o	nly this Page				s	24.15
	f ALL CRO-1 must be on line 14 o	S	24.15			
6. Purpos	e Codes (List o	detailed expenditu	re code in (d) a	ibove)		
E - Salar	ries F *	- Printing - Equipment			To Another Ca - Holding Pub	ndidate lic Office Expenses
I - Posta O* - Ot	ge J- her	Penalties	K* - Office	Expenses Q*	- Donations to	Legal Expense Fund
* Codes	s require detai	<u>led explanation i</u>	n required rei	narks field (g)		
CRO-1315 NC State Board of Elections						December 200

December 2009

D C 1 /D	. ,		T 41 6		•				Amendme	nt
Refunds/Re								<u> </u>	X Yes	☐ No
Use this form to re				g co	ntnbutions	retui	med to the contact	_		
1. Committee Full IAN BALTUTIS	Name	and Fund if ap	plicable)	*******	MA. 1947. A.A. ST. A. ST.			Z. L	D Number	
2 Davids Tabanas	<u> </u>		П		Add \square	n .		L		
3. Payee Information a. Full Name, Mailing Address & Phone					Add L d. Type of C		move	a C	omments	
(include city, sta	_				Candidat		PAC	-	3 - Voter info (CD from
IAN BALTUTIS	110,000	<u> </u>			☐ Referend		☐ Party		iance BoE	_D nom
2516 S MAURY A	RCH				e. Level Reg	iste	red (Specify)	h. Original Receipt Date		
BURLINGTON, NO		i			☐ Federal	Federal County: 08/06/2013			2013	
(919) 578-3393					State Municipality:					
								i. 0	riginal Rec	eipt Amount
								S 25.60		
b. Job Title/Profess	sion	cremment in the mount	Name/Specific Fiel	ld	f. Purpose Code			j. Election Sum to Date		
BUSINESS ADMINISTRATION		Management of Co. Enterprises	mpanies and		P			S 1.040.00		
k. Account Code	1 Form	of Payment	m. Required Ren	nar	re		n. Date (mm/dd/y			,
A. Account Code	Check	orra, ment	VOTER INFO CD FR				n. Date (mm/dwy			
1	Cileck		VOTER INFO CD FR	ONI	1 BOE		09/12/2013	S		25.60
3. Payee Informati		,			Add 🗆	Re	move			
a. Full Name, Mail	_			į	d. Type of C			g. C	. Comments	
(include city, sta	ite, & zi	p)			☐ Candidat	-	□ PAC	candi	idate filing fee	7/18/2013
IAN BALTUTIS					☐ Referend		Party	1 0 1 1 1 1 1 1 1		
2516 S MAURY AI				i	e. Level Keg	gistei	red (Specify) County:	h. Original Receipt Date		
BURLINGTON, NO	C 27215				State Municipality.			07/18/2013		
(919) 578-3393								i. Original Receipt Amount		
								S		20.00
b. Job Title/Profess	eion .	c Employer's	Name/Specific Fiel	ld	f. Purpose Code			j. Election Sum to Date		
BUSINESS		Management of Co						-		
ADMINISTRATION		Enterprises	,		P			S		1.040.00
k. Account Code	l. Form	of Payment	m. Required Ren	nar	ks		n. Date (mm/dd/y	yyy)	o. Amount	
1	Check		CANDIDATE FILING	5 FEI	E		09/13/2013		s	20.00
3. Payee Informati	ion		<u> </u>		Add \square	Re	move			
a. Full Name, Mail		ress & Phone			d. Type of C			g. C	omments	
(include city, sta	_				☐ Candidat		☐ PAC	UPS Store - Notary & Mailing		
IAN BALTUTIS						·			g 7/18/2013	
2516 S MAURY ARCH					e. Level Registered (Specify)			h. Original Receipt Date		
BURLINGTON, NO	C 272 15				Federal		County.	07/18/2013		
(919) 578-3393				State		☐ Municipality:	. 0	minimal Po	noint layount	
									Highnal Kee	eipt Amount
I T.I T.I. (D. E.)					f. Purpose Code			S 49.73 j. Election Sum to Date		
b. Job Title/Profession c. Employer's Name/Specific Field			ıa				J. E	ection Sun	1 to Date	
BUSINESS Management of Companies and Enterprises		nipanies and		P		S		1,040.00		
k. Account Code	l. Form	of Payment	m. Required Ren	nar	ks		n. Date (mm/dd/y	yyy)	o. Amount	
1 Check POSTAGE AND NOTARY			09/12/2013				s	49.73		
4. Total only this l	Page					•		S	1	95.33
5. Total of ALL Cl			mmary Page CRO-1	110/				s		95.33
							 -	1		
L - Returned to			sement code in (f				N - Exceed	1011	'antibusia-	Limit
P* - Reimburse			Overpayment for Other	હ્લ	VICE		IV - EXT.GG(aca €	onnounon	LIHIII
			n required rema	rks	field (m)					

In-Kind Contributions Use this form to report non-monetary contributions, donation Use CRO-1215 if In-Kind Contributions were or will be			vices provided to	the con	Amendi Ves nmittee or	□ No		
1. Committee Full Name (and Fund if applicable)	2. ID Number							
IAN BALTUTIS	***************************************		1 Mar. 2 May 1 a May 2 per 1 a a a a a a a a a a a a a a a a a a					
3. Contributor Information	Add	d 🗆 Rer	move	L				
a. Full Name, Mailing Address & Phone		ype of Con	tributor	c. Com	ments			
(include city, state, & zip)		Individual						
IAN BALTUTIS		Candidate						
2516 S MAURY ARCH		Party						
BURLINGTON, NC 27215		PAC						
(919) 578-3393	_	Referendum Other Receipt Source		d. Election Sum to Date				
		Other Recei	ipt Source	s	1.040.00			
e. Description			f. Date (mm/dd	/ <u>yyyy)</u>	g. Fair N	Iarket Amount		
FLYER PRINTING COSTS			09/03/201	3	S	790.00		
BOE VOTER INFO CD .			08/06/201	3	s	25.60		
CANDIDATE FILING FEE			07/18/201	3	s	20.00		
3. Contributor Information	Ado	d 🗌 Rer	move					
a. Full Name, Mailing Address & Phone	b. T	ype of Con	tributor	c, Com	ments			
(include city, state, & zip)		Individual						
IAN BALTUTIS		Candidate						
2516 S MAURY ARCH		Party						
BURLINGTON, NC 27215		□ PAC						
(919) 578-3393	1—	Referendum	=	d. Election Sum to Date		to Date		
		Other Recei	pt Source	S		1,040.00		
e. Description			f. Date (mm/dd	/yyyy)	g. Fair \	Iarket Amount		
POSTAGE AND NOTARY			07/18/201	3	s	49.73		
					s			
					s			
4. Total only this Page			<u> </u>	S	<u> </u>	885.33		
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CR	RO-11	00)		S		885.33		

NC State Board of Elections

CRO-1510