Disclosure R	eport Cover
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Amendment	
☐ Yes	No

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 Information											
a. Full Name						c. ID Number					
Ronnie Wall Camp	pain					ATYYRZ					
Ronnie Wall Campaign ATYYR Z b. Mailing Address (include City, State and Zip Code) d. Date Filed											
603 Edinburgh Ct	10/22/2013										
Burlington, NC 27215 e. Phone Number											
July 113	(376) 222.1892										
2. Report Year 3. Period Start	Date (mm/dd/y	y) 4. Period I	End Date	(mm/dd/yy)		r Full Name					
2013 9/25/7	2013	10/2	21/20	13	Randy	C. Day					
6. Type of Committee (Check C					type of repo	rt from one category)					
Candidate Campaign Part		Iunicipal		tate/County		Referendum					
	erendum	Organizationa		Organizat	ional	Organizational Pre-referendum					
☐ Independent Expenditure ☐ Join☐ Legal Expense Fund	t Fundraiser	☐ Thirty-five da☐ Pre-primary	у г	Quarterly First		Final					
Legal Expense Fund	li.	Pre-election	li li	Seco	nd	Supplemental Final					
7. Type of Fund (if applicable,		Pre-runoff	li	Third		Annual					
Booster Fund	-	Semi-annual	li	Four	th	Special					
Building Fund	lc lc	Mid Yea	r	Semi-annu	ual						
	Į.	Year End	i [Mid	Year	10. Special Report Name					
Other:		Final		Year	End						
8. Number of Fundraisers this	Report [Special	[Final							
			[Special							
11. Account Information			11. Acco	unt Inforn	nation						
a. Financial Institution Full Name			a. Financia	al Institution	Full Name						
American National Ban	K2 Trust										
b. Purpose	c. Account Code		b. Purpose	•		c. Account Code					
	1										
Campaign Expenses	d. Period Begin	d Begin Balance				d. Period Begin Balance					
Gerra Sign	\$ 3,801.				\$						
CERTIFICATION	+ 7100.										
I certify that the Committee or Fur	nd is in compliar	ice with all appl	icable prov	visions of Ar	ticle 22A, 22F	3 & 22D-22M of Chapter 163					
of the NC General Statutes and tha											
report is complete, true and correc											
0 2 5		(1)	7	1		12012-1					
Kandy C. Vay		- 1	and	(1)		10/22/2013					
Printed Name of Sign	er	Sig	nature of Ap	ppointed Trea	surer	Date					
FOR OFFICE USE ONLY				011							
Date Received:	1-23-13	Employ	yee:	JH		<u>ivery Method</u> Normal Mail					
Date Postmarked: Employee: Registered Mail											
Date Scanned:		Employ	vee:			Electronically Filed					
Date Data Entered:		Emplo				Signer has not received mandatory training					
Dlagge Notes miles	A la contraction de la contrac			manties and	h og the es						
Please Note: This form ca	nnot be used to treasurer, cust										
assistant You must amend											
Y ou must amend	me Statement (or Organization	I (CRO-2	100A-E) (0	make comm	nuce changes.					

CRO-1000

NC State Board of Elections

August 2008

Detailed SummaryUse this form to summarize all disclosure reporting forms and to total monetary information

Amendment
☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)	2. Type of	Report	3. ID Number
Rannie Wall Campaign	Pre- E	lection	ATYYRZ
Start of Election Cycle: January 1, 2013	-	Total this Reporting Perio	Total this d Election Cycle
4) Cash on Hand at Start		\$ 3,801.79	\$ 36.2.18
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 50.00	\$ 160.00
6) Contributions from Individuals	(CRO-1210)	\$ 4,100.00	\$ 13,475.00
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$ 100.00
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 Organizations	(CRO-1250)	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	\$
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add tines 5, 6, 7, 8, 9,10,11a,11b,11c.	lld and lle)	\$ 4,150.50	\$ 13,725.00
<u>EXPENDITURES</u>			
13) Disbursements			:
13a) Operating Expenditures	(CRO-1310)	\$ 4,147.84	\$ 10,283.83
13b) Contributions to Candidates/Political Committees	(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)	\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 13	5, 16 and 17)	\$ 4,147,84	\$ 10,283.83
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	otract line 18	\$ 3,803.95	\$ 3,803.95
ADDITIONAL INFORMATION		·	
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	
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)	\$	\$
	(CRO-2220)	\$	\$
28) Contributions to be Refunded	(CRO-1215)	\$	\$

			ort NC Contributi	ons From Individuals of	· ———	Li Yes Li No			
	1. Committee Full Name (and Fund if applicable) 2. ID Number								
	Ronn		ATYYRZ						
3.	Contribu	itor Information	,)			· ·			
	mend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount			
	Add Remove	1	Check		10/01/2013	\$ 50.00			
	Add Remove					s			
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		f ALL CRO-	1205 Pages						
			etailed Summary Page (CRO-1100)	· \$	50.00			

CRO-1205

Amendment

		rom Individua ndividual contributio		Pg ontributions und	of 3		Amendment Ves No 205 is not used
		e (and Fund if app		one on the		_	D Number
	onnie Wall				,,	P	ITYVRZ
3. Cont	ributor Informa	ution -		Add 🔲 Rei	nove	•	
a. Full N	ame, Mailing Addre	ess & Phone		b, Job Title/Profes	ssion	d. C	Comments
(includ	le city, state, & zip)			Real Ex	1.1.		
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	10 Englem			c. Employer's Nai	nerspectite Field		
				Se H		e. E	lection Sum to Date
Bur	-lington, N.C	- 61415		0-11		\$	500.00
f. Prior	g. Account Code	h. Form of Payment	i, In-Kind Descrip	tion	j. Date (mm/dd/yyy	yy)	k. Amount
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3. Cont	ributor Informa	ıtion		Add 🔲 Rei	nove		
a. Full Na	ame, Mailing Addre	ess & Phone		b. Job Title/Profe	ssion	d. C	Comments
(includ	le city, state, & zip)			Business	Dures		
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30	156 Beaver	Wills Door		C. Employer's Name/Specific Field Quick Cosh Payn			
							lection Sum to Date
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							\$
3. Cont	ributor Informa	ıtion		Add Rei	nove		
a. Full Na	ame, Mailing Addre	ess & Phone		b. Job Title/Profe	ssion	d. C	Comments
	le city, state, & zip)			Business (1.00		
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	J. BX 208					1	
	rlington, N	/ 77711		Cutting C	arcd	e, E	lection Sum to Date
BL:	irlington, N	6 2146				\$	250.00
f, Prior	g. Account Code	h, Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yy	yy)	k. Amount
	i	Check			10/3/2013	3	\$ 250.00
							\$
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4. Tot	al only this P	age			-	\$	1,750.00
		RO-1210 Pages				-	4,100.50
		of Detailed Summary I	Page CRO-1100				4/100,00

Contributions from Individuals Pg Z of Z Mendment Ves No Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

OSE IIIIS	s tottit to report it	idividual contribution	אוצ מעפר שסט מו כי	ontroutions und	rei about tottii C.	IVO I	200 Is not used
1. Com	mittee Full Nam	e (and Fund if app	licable)			2. I	D Number
Ro	innie Wall	Campaign		ATYYRZ			
	ributor Informa			Add 🔲 Re	move		
a. Full Na	ame, Mailing Addre	ss & Phone		b. Job Title/Profe	ession	d. C	Comments
(includ	e city, state, & zip)			Business (Λ -		
Ch	narles Hurso	Y .			ノωァセイ me/Specific Field	+	
	143 Birber			11	Dan	<u> </u>	
_	on, NC 27			Hurseys	DOM	e. El	lection Sum to Date
	un, NC ZI	244					500.00
f, Prior	g. Account Code	h, Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yy	yy)	k. Amount
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3. Cont	ributor Informa	ition	· 🗆	Add 🔲 Re	emove		
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(includ	e city, state, & zip)			Z	^		
D.	. F NO) z		Business Dunes			
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50%	9 Truit D	rive					laction Sum to Date
Ela	ir, N.C. Z	7244					
	· ,))	1,000.00
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(includ	e city, state, & zip)			Brines ()		
W.	Clarke Lin	ndley		c. Employer's Na			
P.D	. Box 341			1 1 1	<i>c</i>). * \$		lanting Com to Date
12	Tinton, NC	77716		moder	Chemical	<u> </u>	lection Sum to Date
	(Ington) IVC						500.00
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	j	Chede			10/3/20	3	\$ 500.00
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4. Tota	al only this Pa	age				\$	Z,000.00
		O-1210 Pages				· c	
/This is		of Detailed Summary F	Page CRO-1100			ું કે	4,100.5D

Amendment **Contributions from Individuals** 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 ATYYRZ Konnie Wall Campaign 3. Contributor Information □ Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Insurince Nat T. Harris e. Employer's Name/Specific Field 7241 Burlington Rd Whitself, NC 27377 Harris, Crown, Lang. e. Election Sum to Date Scotla Miller Inc. | \$ 250.00 j. Date (mm/dd/yyyy) k. Amount h. Form of Payment . Prior g. Account Code i. In-Kind Description 10/4/2013 \$ 250.00 Chede Add Remove 3. Contributor Information b. Job Title/Profession d. Comments a. Full Name, Mailing Address & Phone (include city, state, & zip) Dentist Roslyn M. Crisp 513 Meadows God Drive c. Employer's Name/Specific Field Rosalyn Crisp e. Election Sum to Date Burlington, NL 27215 2 Responded \$ 100.00 j. Date (mm/dd/yyyy) Prior g. Account Code h. Form of Payment i. In-Kind Description k. Amount 10/21/2013 \$ 100.00 Check \$ 3. Contributor Information Add Remove b. Job Title/Profession d. Comments . Full Name, Mailing Address & Phone (include city, state, & zip) c. Employer's Name/Specific Field e, Election Sum to Date j. Date (mm/dd/yyyy) k. Amount . Prior g. Account Code h, Form of Payment i. In-Kind Description \$ \$ \$ 350.00 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)

\$ 4,100 00

			_	Amenamen	•
Disbursements	Pg	of	<u> </u>	☐ Yes	No.
TT - This Committee Commit				محامدهان أعلام	diriant.

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political

committees and coordinated party expenditures

	ull Name (and Fund					2, ID	Number
	Wall Campaig					A-	TYYRZ .
3. Type of Disb	ursement <u>(<i>Please</i></u>	use separate Ch	<u>0-1310</u>	forms for e	ach type of Dis	bursement.)	
Operating Exp		tributions to Candida	ites/Politic			ordinated Party	Expenditures
4. Payce Inforn				Add 🔲	Remove	т	·
	failing Address & Ph	one		b, Coordinate	ed Committee Nam	d. Com	ments
(include city, state,		-					
The Tim	•			c. Level Regis	stered (Specify) County:		
P.O. 612				State		ality: e. Elect	ion Sum to Date
Burlingto	on, NC 2721	6					00 00
f. Account Code	g, Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required	Remarks
1991	Check	A	10%	3/2013	\$ 90 0.00	Newopa	per Advertising
					\$		
4. Payee Inforn	nation			Add 🔲	Remove		
a, Full Name, Mail	ing Address & Phone			b, Coordinate	ed Committee Nam	e d, Com	ments
(include city, sta-	te, & zip)						
The Sti	tch Palette			c Level Regi	stered (Specify)	_	
	thom Rd			Federal	County:		
				State		ality: e. Elect	ion Sum to Date
Burlingto	m, NC 27215					\$ 3	72.29
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required	
1242	Chrick	B	10/	16/2013	\$ 312.29	1-5h.	ris printed
					\$		
4. Payee Inforn	nation	^		Add	Remove		· · · · · · · · · · · · · · · · · · ·
a. Full Name, Mail (include city, sta	ing Address & Phone			b, Coordinate	ed Committee Nan	d. Com	ments
WBAG				c. Level Regi	stered (Specify)		
P.D. GX	2450			Federal	County:		
	tun, NL 27216			State	Municip		ion Sum to Date
Dorning	ion, IVC ZIZIE	·				\$ 12	26 00
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1043	Check	A	10	16/2013	\$ 126.00	Redio 1	Invertising
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5. Total only th	is Page		L.,		<u></u>	\$ i,	398.29
	CRO-1310 Pages						·
	line 13a of Detailed Sun	ımary Pave CRO-11	00 if Ope	rating Expense	es)		147.84
	line 13b of Detailed Sun					u) ; 5 ~1	,19 [.01
	line 13c of Detailed Sun						
7. Purpose C	odes (List detailed	expenditure cod	e in (h.)	above)			
A* - Media	B* - Printi			undraising		Another Ca	
E - Salaries	F* - Equip			litical Party			lic Office Expenses
I - Postage	J - Penalti	es	K* - O	ffice Expen	ises Q* - D	onation to	Legal Expense Fund
O* Other	o detailed armlement	ion in required :	omanlz	field (b)			
Codes requir	e detailed explanati	on in required i	Cittal K	deficient		_	December 2000

Disburseme	ents
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	-		_	Amendmen	l
Pg	7	of		☐ Yes	□ No
• ,				11.1	

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

1. Committee F	ull Name (and Fund	l if applicable)				2. IL	Number
Ronnie Wall Campaign							TYYRZ
3. Type of Disb		use separate CR	<u>O-1310</u>	forms for e	ach type of Disb	<u>urseme</u> nt	.)
Operating Expe		tributions to Candida					ty Expenditures
4. Payee Inforn	nation				Remove		
a. Full Name, M	failing Address & Pho	one		b. Coordinate	ed Committee Name	d. Co	mments
(include city, state,				_	·		
U5P5			ŀ	c. I aval D '	stered (Specify)	\dashv	
0.0	aple Alvense		ŀ	c. Level Regis	County:	—	
			ŀ	State	Municipa	lity: e. Ele	ection Sum to Date
Durlington	, NC 27215		1				,341.21
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (1	nm/dd/yyyy)	j. Amount	k. Require	ed Remarks
1744	Chreck	I I			\$ 1,341.21		Mail Advising
- 17	- new		T	J: -UIJ	\$	J.,.cq	
4 Dam Y 6	notice			Δ44 🗖	Remove	<u> </u>	
4. Payee Inform			<u> </u>		Remove ed Committee Name	, ac	mments
a. Full Name, Maili (include city, stat	ing Address & Phone te, & zip)			oordinate	ca Commutee Name	a. Co	
				1		_	
The Alas	mance News			c. Level Regis	stered (Specify)		
P.O. Box	431			Federal	County:		
				State	Municipa	dity: e. Elc	ection Sum to Date
Graham,	NL 27253					, 	1408.34
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (ı		j. Amount	k. Require	ed Remarks
1045	Check.	Α	1011	18/2013	\$ 1,408.34	News	paper Advertising
	-				\$		
4. Payee Inforn	nation	·····		Add 🔲	Remove		
	ing Address & Phone			b. Coordinate	ed Committee Name	e d. Co	niments
(include city, stat				<u> </u>			_
	_			c. Level Regis	istered (Specify) County:		
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(This line goes in	i line 13a of Detailed Sun i line 13b of Detailed Sun	ımary Page CRO-11	OO if Con	trib to Candide	ates/Political Comm) \$	-T,1-1,64
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	odes (List detailed						
A* - Media	B* - Printi			undraising		Another C	
E - Salaries	F* - Equip		G - Po	litical Party	Н* - Н	olding Pu	ablic Office Expenses
I - Postage	J - Penalti			Office Expen			o Legal Expense Fund
O* Other				. · · · ·			
* Codes requir	re detailed explanati	<u>ion in required 1</u>	remarks	s field (k)			