\boxtimes

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 Yes 3. ID Number

1. Committee Full Name (and Fund if applicable)	2. Type of Report			3. ID Nu	imber
Allison Gant for School Board	3rd Quaer				
Start of Election Cycle: January 1,	2011]	Total this Reporting Period		Total this Election Cycle
4) Cash on Hand at Start		\$	630	\$	0
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	710.00	\$	710.00
6) Contributions from Individuals	(CRO-1210)	\$	11,535.00	\$	12,240.00
7) Contributions from Political Party Committees	(CRO-1220)	\$		\$	
8) Contributions from Other Political Committee	s (CRO-1230)	\$		\$	
9) Loan Proceeds	(CRO-1410)	\$		\$	
(0) Refunds/Reimbursements To the Committee	(CRO-1240)	\$		\$	
11) Other Receipt Sources					
11a) Interest on Bank Accounts	(CRO-1250)	\$		\$	
11b) Contributions from Not-for-Profit Organi	izations (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, 11	lb, 11c, 11d and 11e)	\$	12,295.00	\$	12,950.00
EXPENDITURES					
13) Disbursements	LET NATIONAL DESCRIPTION AND ANALYSIS OF STATE O				
13a) Operating Expenditures	(CRO-1310)	\$	9,751.30	\$	9,771.30
13b) Contributions to Candidates/Political Con	nmittees (CRO-1310)	\$		\$	
13c) Coordinated Party Expenditures	(CRO-1310)	\$		\$	
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$		\$	
15) Loan Repayments	(CRO-1420)	\$	0	\$	
16) Refunds/Reimbursements From the Committee	e <i>(CRO-1320)</i>	\$		\$	
17) In-Kind Contributions	(CRO-1510)	\$	300.00	\$	305.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c,	14, 15, 16 and 17)	\$	10,051.30	\$	10,076.30
19) Cash on Hand at End (Add lines 4 and 12 together, the	en subtract line 18)	\$	2,873.70	\$	2,873.70
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committe	es (CRO-1330)	\$			
21) Outstanding Loans (incl. ones from other camp	paigns) (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)	\$		\$	
27) 48-Hour Notice Reports Sum	(CRO-2200)	\$		\$	
		\$		\$	
28) Contributions to be Refunded	(CRO-1215)	Φ		Þ	

Aggregated Contributions from Individuals

Page

<u>1</u> of

Yes [

No

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

1. Committee Full Name (and Fund if applicable) 2. ID Number									
Allison Gant for School Board									
3. Co	ntributor Infor	mation	1						
a. Ame	end	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f	. Amount		
	Add Remove	1	paypal		8-6-14		\$ 50.00		
<u>H.</u> .	Add	\					0.00		
Ħ	Remove	- 1	cash		8-6-14	_	\$ 25.00		
	Add Remove	- 1	paypal		9-18-14	1	\$ 50.00		
	Add	1	check		8-18-14	1	\$ 30.00		
<u> </u>	Remove								
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	Add	1	check		9-3-14		\$ 50.00		
<u>H</u>	Remove Add						A 50.00		
=	Remove	1	check		9-3-14		\$ 50.00		
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	Add Remove	<u> </u>	check		9-3-14		\$ 50.00		
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	Add	- 1	paypal		10-1-14	4	\$ 25.00		
	Remove	<u> </u>	L., J. L.,						
	Add Remove	1	cash		9-3-14	1	\$ 50.00		
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4. T	otal only this	Page		L		\$	710.00		
5 Total of ALL CDO 1205 Pages									
			ummary Page CRO-1100)			\$	710.00		
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Yes | No

(Con	tribu	ition	s from	Indi	ividna	le

		n Individuals		Pg	1 of	11	∑ Yes	No No
				or contributions unde	er \$50 if form CRG			
1. Comm	ittee Full Name (and Fund if applical	ole)			2. ID Num	ber	
Allison G	ant for School Bo	ard						
3. Contri	butor Informatio	n		Add Ren	nove	,		
	ne, Mailing Address á	k Phone		b. Job Title/Profession	d. Comments			
	city, state, & zip)			Owner				
Tom Will				7	10 Ti 13			
_	el Hill Road			c. Employer's Name/Sp Hickory Farms	ecific Field			
Burningto	n, NC 27215			HICKORY Farms		e. Election St	ım to Date	
						\$	500.00	
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	city, state, & zip)			Owner				
Bob Char								
	entry Place			c. Employer's Name/Sp	ecific Field			
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	city, state, & zip)			Retired				
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	estdale Dr.			c. Employer's Name/Sp	ecific Field	į		
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0.70.1		1 P 5 P 4	1: 1- 14	Lind Description	j. Date (mm/dd/yy	<u>i </u>	k. Amount	<u> </u>
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	of ALL CRO					· e		11 535 00

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

Amendment **Contributions from Individuals** \times Yes [Νo 11 of Pg Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used 2. ID Number 1. Committee Full Name (and Fund if applicable) Allison Gant for School Board 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Sys. Analysit Barbra Bond c. Employer's Name/Specific Field 910 Central Ave. LabCorp Burlington, NC 27215 e. Election Sum to Date 60.00 \$

f. Prior	g. Account Code	h. Form of Payment	i. In-K	and Description	j. Date (mm/dd/yyyy)		k. Amount	
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	city, state, & zip)			Owner				
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5348 S. N				c. Employer's Name/S Chandler Concret		4		
Burungto	n, NC 27215			Changler Concret	C	e. Election S	Sum to Date	
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	ie, Mailing Address é			b. Job Title/Profession		d. Commen	ts	
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Yes No

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Use this f	orm to report indi-	vidual contributions o	ver \$50	or contribu	itions unde	r \$50 if form CR(
1. Comm	ittee Full Name (and Fund if applical	ole)				2. ID Num	ber	
Allison G	ant for School Bo	ard			· ·				
3. Contri	butor Informatio	'n		Add [Rem	10Ve			
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Jennifer F	Ford			l					
310 Faith	Drive				r's Name/Sp	ecific Field			
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5. Total	of ALL CRO	-1210 Pages					\$		11,535.00
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of

Yes No

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/ An	tribi	itinns	tram	Individuals	
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Use this f	orm to report indi-	vidual contributions o	ver \$50	or contribu	tions unde	r \$50 if form CRO) 1205 is not	used	
1. Comm	ittee Full Name (and Fund if applical	ole)				2. ID Num	ber	
Allison G	ant for School Bo	ard							
3. Contri	butor Informatio	n		Add [] Rem	ove			
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	city, state, & zip)			Lawyer					
Dorn Pitti					1 N /O	te Pill			
1187 Loc	n, NC 27215			c. Employer Pittman I	's Name/Spe	cine Field			
Durmigio	H, NC 27213			FILUMAN L	awrum		e. Election Su	m to Date	
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112 Victo	ria Lane n, Gibsonville, NO				's Name/Spe Metal Fabr				
27215	n, Giosonvine, ixe	•		Diomers	Wictai i abi	TCGIOTS	e. Election Su	ım to Date	<u> </u>
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('Ani	rih	ution	s from	Indi	onhiv	le
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		and Fund if applical		or contar	outions take	0, 650 21 10122 011	2. ID Nun		
	ant for School Bo								
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5. Total	of ALL CRO	-1210 Pages					•		11 535 00

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

\$

11,535.00

Yes No

Contributions	from	Individuals	D _e
			Pa

		and Fund if applical		or contribution	ns unde	T WO II IOIII CICC	2. ID Num		
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	ant for School Bo					<u> </u>			
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(include city, state, & zip)				Retiered					
Ron Lee									
	nd Stone Court			c. Employer's	Name/Spe	ecific Field			
Gıbsonvil	le, NC 27249			N/A			e. Election S	um to Date	
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4. Total	only this Page	<u>e </u>				 .	\$		400.00
5. Total	of ALL CRO	-1210 Pages					\$		11,535.00
(This line	must he on line 6 of i	Detailed Summary Page C	RO-1100)					-

Contributions from Individuals

Pg 7 of 11 Yes \ \tag{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)

1. Comm	ittee Full Name (and Fund if applical	ole)			2. ID Number		
Allison G	ant for School Bo	pard						
3. Contri	butor Informatio	on		Add 🗌 Rer	nove			
a. Full Nan	ne, Mailing Address d	& Phone		b. Job Title/Profession		d. Comments		
	city, state, & zip)			Owner				
	E. Chandler Jr.					·		-
	eway Drive			c. Employer's Name/Sp Chandler Concrete		ļ		
Burningto	n, NC 27215			Changler Concrete		e. Election St	ım 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			9-10-1	4	\$	100.00
					<u> </u>		\$	
							\$	
3. Contri	butor Informatio	n		Add Rer	nove			
a. Full Nati	ne, Mailing Address &	& Phone		b. Job Title/Profession		d. Comments	3	
(include	city, state, & zip)			Owner				
Lydia Du								
	nial Meade			c. Employer's Name/Sp	ecific Field	_		
Suffolk, V	VA 23434			Duke Automotive		e. Election Si	um to Date	
						\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Kind Description	j. Date (mm/dd/yy	уу)	k. Amount	
	1	check			9-10-1	14	\$	100.00
							\$	
				5555			\$	
3. Contri	butor Informatio	on		Add Ren	nove			
a. Full Nam	ie, Mailing Address d	& Phone		b. Job Title/Profession		d. Comments	S	
	city, state, & zip)			Analyst				
Marla Wi				c. Employer's Name/Sp	iG. F:-13	-		
2615 Am	nerst Dr. n, Nc 27215			LabCorp	becine rieid	1		
Durmigio	ц, № 27213			Labcorp		e. Election S	um to Date	
						\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Kind Description	j. Date (mm/dd/yy	уу)	k. Amount	
	1	check			9-3-1	4	\$	100.00
							\$	
							\$	
4. Total	only this Pag	e				\$		300.00
5. Total	of ALL CRO	-1210 Pages				\$		11,535.00
(This line	e must be on line 6 of	Detailed Summary Page C	RO-1100	"				7= = =

Amendment **Contributions from Individuals** X Yes No οf Pg 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 Allison Gant for School Board Add 3. Contributor Information Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) **Textiles** John Gant 1004 Karen Woods c. Employer's Name/Specific Field Chapel Hill, NC 27516 Glen Raven e. Election Sum to Date 100.00 f. Prior j. Date (mm/dd/yyyy) k. Amount g. Account Code h. Form of Payment i. In-Kind Description \$ 100.00 9-3-14 1 check \$ \$ 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Retired Chan Chandler 2415 Saddleclub Way c. Employer's Name/Specific Field Burlington, NC 27215 N/A e. Election Sum to Date

	1	check				9-26-1	14	\$	100.00
								\$	
								\$	
3. Contri	ibutor Informatio	n		Add	Rem	iove	-		
a. Full Nan	ne, Mailing Address &	è Phone		b. Job Title/Pro	fession		d. Commen	ts	
(include	city, state, & zip)			Finance Adv	isor			-	
Brian Spa	angler								
3535 Star	nton Court			c. Employer's N	lame/Spe	cific Field			
Graham,	NC 27253			Edward Jone	s				
							e. Election S	Sum to Date	
							\$	250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description		j. Date (mm/dd/yy	уу)	k. Amount	
	1	check				9-19-1	.4	\$	250.00
								\$	
								\$	

i. In-Kind Description

f. Prior

g. Account Code

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)

h. Form of Payment

\$

\$

\$

450.00

11,535.00

j. Date (mm/dd/yyyy)

100.00

k. Amount

CRO-1210 NC State Board of Elections April 2007

Contributions from Individuals

Pg 9 of 11 Ses

No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used 2. ID Number 1. Committee Full Name (and Fund if applicable) Allison Gant for School Board 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Attorney Janie Sellars c. Employer's Name/Specific Field 3109 Amherst Ave Burlington, NC 27215 McGuire Woods, LLP e. Election Sum to Date 100.00 j. Date (mm/dd/yyyy) k. Amount f. Prior h. Form of Payment i. In-Kind Description g. Account Code \$ 100.00 9-21-14 1 check \$ \$ Add Remove 3. Contributor Information a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Physician Kristin Moffitt 1552 1552 York Place c. Employer's Name/Specific Field Burlington, NC 27215 **Burlington Pediatircs** e. Election Sum to Date 100.00 \$ j. Date (mm/dd/yyyy) k. Amount f. Prior g. Account Code h. Form of Payment i. In-Kind Description \$ 100.00 9-26-14 1 check \$ \$ Add Remove 3. Contributor Information b. Job Title/Profession a. Full Name, Mailing Address & Phone d. Comments Banker (include city, state, & zip) Jerry Bailey c. Employer's Name/Specific Field 3122 Bricewood Place Wells Fargo Burlington, NC 27215 e. Election Sum to Date 150.00 g. Account Code i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount f. Prior h. Form of Payment 150.00 \$ 10-1-14 1 check \$ \$ 350.00 \$ 4. Total only this Page 5. Total of ALL CRO-1210 Pages \$ 11,535.00

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

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Use this f	orm to report indi	vidual contributions o	over \$50	or contri	butions w	nder \$50 if form C	RO 1205 is no	ot used	
1. Comm	ittee Full Name (and Fund if applica	ble)				2. ID Nur	nber	
Allison G	ant for School Bo	ard		_					
3. Contri	butor Informatio	on .		Add	□ R	temove			
a. Full Naп	ne, Mailing Address &	& Phone		b. Job Ti	tle/Professi	OD.	d. Commen	ts	
	city, state, & zip)			Retired	l				
Sue Drape									
	wood Lane			c. Employ	yer's Name	Specific Field			
Burlingto	n, NC 27215						e Election 9	Sum to Date	
							\$	200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	 Kind Descrip	ption	j. Date (mm/dd		k. Amount	
	1	check				10-	9-14	\$	200.00
								\$	
								\$	
3. Contri	butor Informatio	on		Add	☐ P	lemove			
a. Full Nam	ıe, Mailing Address d	& Phone			tle/Professi	on	d. Commen	ts	
	city, state, & zip)			VP Opt	erations				
Patti Bate							_		
2204 Teal						Specific Field	\dashv		
Burlingto	n, NC 27215			Glen R	aven		a Flection	Sum to Date	
		 					\$	300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-R	Cind Descrip	ption	j. Date (mm/dd	/уууу)	k. Amount	
	1	in-kind	Func	draising e	v .	8-2	7-14 	\$	300.00
								\$	
								\$	
3. Contri	butor Informatio	on .		Add	☐ F	temove	<u></u> , .		
a. Full Nam	ie, Mailing Address &	& Phone		b. Job Ti	tle/Professi	on	d. Commen	its	
(include	city, state, & zip)								
				c. Employ	yer's Name	/Specific Field			
							e. Election	Sum to Date	
							\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-k	and Descrip	ption	j. Date (mm/dd		k. Amount	
	1		1				. **-	\$	
								\$	
			 	-				\$	
4. Total	only this Pag	e				·····	\$		500.00
5. Total	of ALL CRO	-1210 Pages					\$		11,535.00
		Detailed Summary Page C	CRO-1100	7)			پ ا		11,555.00

_11____ of

Yes No

Contri	butions	from	Indiv	enhi	le
			IHILIV	ини	•

Use this f	orm to report indi-	vidual contributions o	ver \$50	or contributions und	er \$50 if form CR	,		
1. Comm	ittee Full Name (2. ID Nun	nber					
Allison G	ant for School Bo	ard						
3. Contri	butor Informatio	n		Add 🗌 Rei	move			
a. Full Nan	ıe, Mailing Address &	Phone		b. Job Title/Profession		d. Comment	s	
	city, state, & zip)			Dance Instructor				
Allison G				TO 1 174 /G	.c. Fr.14			
	kory Avenue n, NC 27215			c. Employer's Name/Sp Burlington Academ				
Durmgo	II, NC 27213			of Dance and Arts	цу	e. Election S	um to Date	·
						\$	4025.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/yy	уу)	k. Amount	
	1	check			7-2-1	4	\$	2000.00
	1	check			7-21-	14	\$	900.00
] 1 check 7-:				7-31-	14	\$	1125.00
	butor Informatio			Add Re	move			<u> </u>
	ie, Mailing Address &	k Phone		b. Job Title/Profession		d. Comment	is	
	city, state, & zip)			Dance Instructor				
Allison G	ant kory Avenue			c. Employer's Name/Sp	pecific Field			
	n, NC 27215			Burlington Academ		1		
Daringio	2,110 21210			and Arts	_ ,	e. Election S	um to Date	
						\$	5925.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/yy	уу)	k. Amount	
	1	check			10-1-1	14	\$	1900.00
	1	check			08-07	-14	\$	900.00
					<u> </u>		\$	
3. Contri	butor Informatio	n		Add Rei	move	···		
	ie, Mailing Address &	k Phone		b. Job Title/Profession	d. Comment	is		
(include	city, state, & zip)							
				c. Employer's Name/Sp	pecific Field	-		
						e. Election S	ium to Date	
						\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/yy	уу)	k. Amount	
							\$	
							\$	
							\$	
4. Total	only this Page	e				\$		6825.00
5. Total	of ALL CRO	-1210 Pages				\$		11,535.00
(This lie	must ha an lina 6 of i	Detailed Summary Page C	RO-1100)		*		,

Amendment \boxtimes No Yes **Disbursements**Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political $\frac{1}{2}$

•		d party expenditures.	
'Ammittees	and coordinate	n nany expenditures.	

1 Committee Er	ill Name (and Fund	if applicable)		* -		2. ID Number
Allison Gant for	School Board					
3. Type of Disbu	rsement (Plans	e use senarate C	RO-1310 forms for	each tv	pe of Disbursen	ient.)
Operating Ex		Contributions to Can	didates/Political Commi	ttees	Co	ordinated Party Expenditures
4. Payee Inform		" []	Add		Remove	
	ng Address & Phone		b. Coordinated Com	nittee Na	me	d. Comments
(include city, state,						
Markell	st zip)					
718 East Davis S	Street		c. Level Registered (Specify)		
Burlington, NC			Federal		County:	
Durmigion, 140	2/215		State		Municipality:	e. Election Sum to Date
						\$ 2936.07
C. AA Code	g, Form of Payment	h. Purpose Code	i. Date (mm/dd/y)	zvv)	j. Amount	k. Required Remarks
f. Account Code	g, Form of Fayment			337	† -	campaign signs
1	debit card	Α	7 - 7-14		\$1769.38	and buttons
						campaign signs
1	debit card	A	7-16-14		\$106.92	
4. Payee Inform	ation		Add	To	Remove	
	ng Address & Phone		b. Coordinated Com	mittee N		d. Comments
(include city, state, Markell	<u>& zip)</u>		-			ļ.
718 East Davis	Stroot		c. Level Registered (Specify)		
			Federal		County:	
Burlington, No	21213		State	Ħ	Municipality:	e. Election Sum to Date
						# 0026.07
						\$ 2936.07
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/y	 yyy)	j. Amount	k. Required Remarks
i, Account Code	g. Form of Fayment				† ·	campaign signs
1	debit card	Α	7-30-14		\$203.50	
	<u> </u>				0000 50	campaign signs
1	debit card	A	9-10-14		\$203.50	
4. Payee Inform	nation	П	Add		Remove	
	ing Address & Phone	·	b. Coordinated Con	ımittee N		d. Comments
	-					
(include city, state, Markell	, & zip)					
718 East Davis	Street		c. Level Registered	(Specify)		7
Burlington, NC			Federal		County:	
Burnington, NC	. 21213		State	Ħ	Municipality:	e. Election Sum to Date
						\$ 2936.07
	- Form of Bounces	h. Purpose Code	i. Date (mm/dd/	(VVV	j. Amount	k. Required Remarks
f. Account Code	g. Form of Payment	in the pose code		((((campaign signs
1	debit card	A	9-16 - 14		\$652.77	
	 					
		1			\$	
		1				\$ 2936.07
5. Total only the						
o. Total of AL	L CRO-1310 Pages n line 13a of Detailed Su	mmary Page CRO-11	100 if Operating Expens	es)	* *.	075120
(This the goes t	n line 13a of Detailed Su n line 13b of Detailed Su	mmary Page CRO-11	100 if Contrib to Candia	ates/Polit	ical Comm)	\$ 9751.30
(This line goes I	n une 130 of Detailed Su n line 13c of Detailed Su	mmary Page CRO-11	00 if Coordinated Parts	Expendi	tures)	
	des (List detailed e			<u>.</u>	The State of the S	
A* - Media	B* - Printing	C* - Fi	ndraising	:		other Candidate
A* - Media E - Salaries	ъ" - Frinting F* - Equipmen		tical Party		H* - Hold	ing Public Office Expenses
I - Postage	J - Penalties		fice Expenses		Q* - Dona	tion to Legal Expense Fund
O* - Other			ter a region del propose del 18		** ********	The state of the s
* Codes requi	ire detailed explana	tion in required	remarks field (k)		- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

Amendment Disbursements \times Yes Pg

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)		11.5	2. ID Number
Allison Gant for					
3. Type of Disbi		se use separate C	CRO-1310 forms for ea	ch type of Disburser	ment.)
Operating E			ndidates/Political Committee		Coordinated Party Expenditures
4. Payee Inform			Add [Remove '	
V	ng Address & Phone		b. Coordinated Committ		d. Comments
(include city, state,	-				
Weebly			L		_
San Francisco, (CA		c. Level Registered (Spec	cify)	_
ĺ			Federal	County:	
			State [Municipality:	e. Election Sum to Date
					\$ 39.95
			1		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	debit card	A	7-11-14	\$39.95	Website
		1			
				\$	
4 D== *-	l	L	LbA	Damaria	
4. Payee Inform		<u>. L.</u>	Add b. Coordinated Committ	Remove	d. Comments
	ing Address & Phone		v. Coordinated Commit	i i anit	-1 comments
(include city, state, Times News	ex zip)		1		
707 S Main Stre	∍ e t		c. Level Registered (Spec	cify)	-
Burlington, NC			Federal	County:	
Durington, NC	21217		State	Municipality:	e. Election Sum to Date
					· · · · · · · · · · · · · · · · · · ·
					\$ 1912.84
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)) j. Amount	k. Required Remarks
		Δ	7-23-14	\$496.83	Campaign ads
1	debit card	A	/-23-14	Φ470.03	
1	debit card	A	9-10-14	\$198.00	campaign ads
	<u></u>				
4. Payee Inform			Add b. Coordinated Commit	Remove	d. Comments
1	ing Address & Phone		o. Coordinated Commit	WE : YAIME	a comments
(include city, state,	& zip)		4		Í
Times News 707 S Main Str	≏et		c. Level Registered (Spe	cify)	_
Burlington, NC			Federal	County:	_
Julington, NC	. 21213		State	Municipality:	e. Election Sum to Date
				<u> </u>	
					\$ 1912.84
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	debit card	A	9-23-14	\$1218.01	campaign ads
	ucon caru			Ψ1210.01	
				\$	
	<u> </u>	<u></u>			1050 50
5. Total only th					\$ 1952.79
	CRO-1310 Pages		00 teom		
			00 if Operating Expenses) 00 if Contrib to Candidates/	Political Commi	\$ 9751.30
			00 if Contrib to Candidates/ 00 if Coordinated Party Exp		
				enauures)	
7. Purpose Cod A* - Media	les (List detailed ex B* - Printing		i (h.) above) idraising		other Candidate
A* - Media E - Salaries	B* - Printing F* - Equipment		ical Party		ing Public Office Expenses
I - Postage	J - Penalties		ice Expenses		tion to Legal Expense Fund
O* - Other					
* Codes requi	re detailed explanat	tion in required r	remarks field (k)		

 \boxtimes

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

	ill Name (and Fund	l if applicable)		<u> </u>	2. ID Number
Allison Gant for			D. 7444 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	is in a minute	nent.)
3. Type of Disbu			RO-1310 forms for each		
Operating Ex	 	Contributions to Can	didates/Political Committee		ordinated Party Expenditures
4. Payee Inform			Add	Remove	La Communita
a. Full Name, Mailin	-		b. Coordinated Committe	ee Name	d. Comments
(include city, state, é					
Williams Athleti			ļ		-
1307 S Church S			c. Level Registered (Spec		-
Burlington, NC 2	27215		Federal	County:	a Plantian Court - Bart
			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	debit check	Α	7-29-14	\$250.00	program ad
•					
				\$	
4. Payee Inform	ation		Add	Remove	
	ng Address & Phone		b. Coordinated Committ	tee Name	d. Comments
(include city, state,	•				1
United States Po					_
405 Maple Stree			c. Level Registered (Spec	cify)	_
Burlington, NC			Federal	County:	
<u> </u>			State	Municipality:	e. Election Sum to Date
					\$ 49.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	debit card	I	8-5-14	\$49.00	postage
1	-			\$	
4. Payee Inform	ation		Add	Remove	
	ng Address & Phone		b. Coordinated Commit	tee Name	d. Comments
(include city, state,			1		
Office Depot		_			4
1811 S Church			c. Level Registered (Spe		-
Burlington, NC	27215		Federal	County:	
			State	Municipality:	e. Election Sum to Date
					\$ 93.74
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy	j. Amount	k. Required Remarks
I	debit card	К	8-5-14	\$63.46	office supplies
1	debit card	K	8-27-14	\$30.28	office supplies
5. Total only th	is Page				\$ 392.74
	CRO-1310 Pages				
(This line goes in	line 13a of Detailed Sun		00 if Operating Expenses)		\$ 9751.30
(This line goes in	line 13b of Detailed Sun	nmary Page CRO-110	00 if Contrib to Candidates/.		φ 9131.30
			00 if Coordinated Party Exp		
	les (List detailed ex			1	
A* - Media	B* - Printing	C* - Fun	draising		ther Candidate
E - Salaries I - Postage	F* - Equipment J - Penalties		ical Party ice Expenses		ng Public Office Expenses ion to Legal Expense Fund
O* - Other * Codes requir	re detailed explanat	ion in required r	emarks field (k)	<u> </u>	

Amendment Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures. Yes No

1. Committee Fr	ıll Name (and Fund	l if applicable)			<u> </u>	2. ID Number
Allison Gant for						
3. Type of Disbu		se use senarate C	RO	-1310 forms for each t	ype of Disbursem	ent.)
Operating Ex				ntes/Political Committees	Со	ordinated Party Expenditures
4. Payee Inform				dd 🔲	Remove	
	ng Address & Phone	· <u>L-J</u>	_	Coordinated Committee N		d. Comments
(include city, state,	-					
International Mi			1			
1143 St Marks C			c.	Level Registered (Specify)		1
Burlington, NC			F	Federal	County:	1
Builington, NC	2/213		\ =	State	Municipality:	e. Election Sum to Date
			۲		<u></u>	A 467.10
						\$ 467.18
f. Account Code	g. Form of Payment	h. Purpose Code	1-	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1, Account Cour			-			print
1	debit card	В		8-6-14	\$467.18	materials
		-	-			
					\$	
4. Payee Inform	ation		A	dd 🗍	Remove	
	ng Address & Phone	<u> </u>	_	. Coordinated Committee N		d. Comments
-	-		ļ			
(include city, state, Forty West Gril			1			
2701 Ramada R			-	Level Registered (Specify)		1
Burlington 2721	-		H	Federal	County:	-
Buttington 2721	13		╽┝	State	Municipality:	e. Election Sum to Date
			┝			
						\$ 12.02
f. Account Code	g. Form of Payment	h. Purpose Code	-l	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1. Account Code	g. Form of Layment					republican
1	debit card	0		8-11-14	\$12.02	womens meeting
]	ļ				\$	
4. Payee Inform	1 ation		- Δ	\dd _	Remove	
	ing Address & Phone			. Coordinated Committee		d. Comments
· '	•		F			
(include city, state, Mebane Enterp			\dashv			
106 N 4 th Street			-	. Level Registered (Specify)		7
Mebane, NC 27			+	Federal	County:	_
Wiedane, NC 27	JU2			State	Municipality:	e. Election Sum to Date
1			1			
						\$ 124.38
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1. Account Code	g. roim or rayment					
1	debit card	Α		8-18-14	\$124.38	
					\$	
5 Total only 4h	ie Pone				!	\$ 603.58
5. Total only th	CRO-1310 Pages				·	
	a line 13a of Detailed Su	mmary Page CRO-11	00 is	(Operating Expenses)		0751.00
(This line goes if	i ane 13a of Delatica Su. i line 13h of Detoiled Su	mmary Page CRO-11	00 it	Contrib to Candidates/Poli	tical Comm)	\$ 9751.30
(This line goes in	i une 130 oj Delanea Su. 1 lino 13c af Dotailod Su.	mmarv Page CRO-11	00 it	Coordinated Party Expende	itures)	
	les (List detailed ex					
A* - Media	B* - Printing	C* - Fu	<u>. v.c.</u> adrs	aising	D - To Anot	ther Candidate
A* - Media E - Salaries	F* - Equipmen				H* - Holdir	ng Public Office Expenses
I - Postage	J - Penalties			Expenses	Q* - Donat	ion to Legal Expense Fund
O* - Other						and the second s
* Codes requi	re detailed explana	tion in required	rem	narks field (k)	<u> </u>	

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

committees and coordinated party expenditures.

	ıll Name (and Func					2. ID Number		
Allison Gant for	School Board							
3. Type of Disbu	rsement <i>(Plea</i> :	se use separate C	RO	-1310 forms for each t	pe of Disbursem	<u>ent.)</u>		
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4. Payee Inform	ation		Α	dd 📗	Remove	AMORPH BOOK TO THE		
	ng Address & Phone		b.	Coordinated Committee Na	ıme	d. Comments		
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Fairway Outdoo								
1920 West Lee	Street		c.	Level Registered (Specify)				
Greensboro, NC	27401		Federal County:					
				State	Municipality:	e. Election Sum to Date		
						\$ 1267.50		
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1	debit card	A		8-18-14	\$1267.50	Billboard		
					 			
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Boosters	ce trigii aciiooi		-	Level Registered (Specify)		†		
Eastern Alaman	as High School		1	Federal	County:	-		
	-		╽╞	State	Municipality:	e. Election Sum to Date		
4040 Mebane Rodgers Road			┝		Trunte panty.			
Mebane, NC 27302						\$ 150.00		
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l '	ing Address & Phone		٣	- Coor amateu Committee N	unic .			
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Western Alama			-	. Level Registered (Specify)		1		
Western Alamance High School				Federal Federal	County:	-		
1731 N NC 87	1		State Municipality:			e, Election Sum to Date		
Elon, NC 2724	ŧ		-	State				
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					\ \$			
<u> </u>	<u> </u>	1		L.,		\$ 1567.50		
5. Total only th			- 7	<u> </u>		φ 1307.30		
6. Total of ALL	CRO-1310 Pages	Daga CDO 11	nn i	(Angeoting Evaguege)				
(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) \$ 9751.30								
(This time goes if	i une 130 of Detailed Sui i ling 13c of Datailed Sw	mmary ruge CRO-11 mmary Paga CRO-11.	ov i) On H	Contro to Candidates/Folds Coordinated Party Expendit	ures)			
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A* - Media	B* - Printing	C* - Fur			D - To Anot	her Candidate		
E - Salaries	F* - Equipment			H* - Holdin	g Public Office Expenses			
I - Postage	J - Penalties			Expenses		on to Legal Expense Fund		
O* - Other				المراجع المتعادية		and the second of the second o		
* Codes requi	re detailed explana	tion in required	ren	ıarks field (k)	<u> 1 </u>			

Amendment Yes

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures. 2 ID Number

	ill Name (and Fund	l it applicable)			Z. ID INUMBER		
Allison gant for	School Board	· · · · · · · · · · · · · · · · · · ·	DO 1210 Com "Comment &	a of Dishussau	ant) 12 3 5 5 5 5 7 3 3 5 5 5 5 5		
3. Type of Disbu	rsement <i>(Pleas</i>	se use separate C	RU-1310 forms for each t	<u>ype of Dispursem</u>	ent.) ordinated Party Expenditures		
Operating Ex	kpenses	Contributions to Can	didates/Political Committees		ordinated Party Experiorations		
4. Payee Inform			Add	Remove	d. Comments		
a. Full Name, Mailii	ng Address & Phone		b. Coordinated Committee N	ame	d. Comments		
(include city, state,	& zip)						
DLX*PS Print			170 170 170		1		
2861 Mandela P			c. Level Registered (Specify)	Country	1		
Oakland, CA 94	608		Federal	County:	e. Election Sum to Date		
			State	Municipality:	e. Election Sum to Date		
					\$ 75.61		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	debit card	В	9-10-14	\$75.61	bumper stickers		
				\$			
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a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee N	kame	u. Comments		
(include city, state,							
Alamance News					-{		
114 W Elm Stre	eet		c. Level Registered (Specify)		-		
Graham, NC272	253		Federal	County:	e. Election Sum to Date		
			State	Municipality:	e. Election Sum to Date		
					\$ 789.48		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	debit card	М	9-18-14	\$250.00	camaign ad		
	deoit card			1000.40	campaign ad		
1	debit card	M	10-3-14	\$539.48			
4. Payee Inform	nation		Add	Remove	d. Comments		
a. Full Name, Mail	ing Address & Phone		b. Coordinated Committee I	мапи	u. Comments		
(include city, state,	, <u>& zip)</u>		4				
WBAG			100 100 100	<u> </u>	_		
1745 Burch Br	-		c. Level Registered (Specify		_		
Burlington, NC	27217		Federal	County:	e. Election Sum to Date		
			State	Municipality:	e. Election Sum to Date		
					\$ 432.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	check	М	9-30-14	\$432.00	radio ad		
	<u> </u>	 		s			
					\$ 1297.09		
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(This line goes i	n line 13a of Detailed Su	mmary Page CRO-11	100 if Operating Expenses)	itical Cassus)	\$ 9751.30		
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A* - Media	B* - Printing	C* - Fu	ndraising	D - To And	ther Candidate		
E - Salaries	F* - Equipmen	ıt G - Poli	tical Party		ng Public Office Expenses		
I - Postage	J - Penalties	K* - Of	fice Expenses	Q* - Dona	tion to Legal Expense Fund		
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									Amen	dment		
Disbursements				Pg	7		of <u>7</u>			Yes	\boxtimes	No
•						ممانين عان	a to con	didat	a/naliti	cal		

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

	ill Name (and Fund	if applicable)			2. ID Number					
Allison gant for		<u> </u>	 	77	ant)					
3. Type of Disbu		se use separate Ci	RO-1310 forms for each ty	pe of Disbursen	ien <u>is)</u>					
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a. Full Name, Mailir	-		b. Coordinated Committee Na	<u>me</u>	d. Comments					
(include city, state, d										
Curtis Media Gr			c. Level Registered (Specify)		1					
1109 Tower Driv			Federal Federal	County:						
Burlington, NC	2/213		State	Municipality:	e. Election Sum to Date					
			June		\$ 997.50					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks					
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1	debit card	A	10-17-14	\$997.50						
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4. Payee Inform	l nation	<u> </u>	Add	Remove	The same same state of the same					
	ng Address & Phone		b. Coordinated Committee Na	ıme	d. Comments					
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Pay Pal		· —			_					
•			c. Level Registered (Specify)							
			Federal	County:	District Court to Bata					
			State	Municipality:	e. Election Sum to Date					
					\$ 4.03					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks					
1	auto w/d	С	8-6-14	\$1.50	service charge					
1	auto w/d	С	8-9-14	\$1.50	service charge					
4. Payee Inform	nation		Add	Remove						
	ing Address & Phone		b. Coordinated Committee N	ame	d. Comments					
(include city, state,	-									
Pay Pal										
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(1 his tine goes in	7. Purpose Codes (List detailed expenditure code in (h.) above)									
	B* - Printing	C* - Fin	ndraising	D - To And	other Candidate					
A* - Media E - Salaries	F* - Equipmen		tical Party	H* - Holdi	ing Public Office Expenses					
I - Postage O* - Other	J - Penalties	K* - Of	fice Expenses	Q* - Dona	tion to Legal Expense Fund					
* Codes requi	re detailed explana	ition in required	remarks field (k)							

In-Kind Contributions	P	g <u>I</u> of	1	Yes No	
Use this form to report non-monetary contributions, donations, g	goods or service	es provided to the	comm	ittee or fund.	
Use CRO-1215 if In-Kind Contributions were or will be refunde 1. Committee Full Name (and Fund if applicable)	d within 7 day	<u>. </u>	2. ID	Number	
Allison Gant for School Board					
3. Contributor Information	Remove				
a. Full Name, Mailing Address & Phone	b. Type of Co		c. Com	ments	
(include city, state, & zip)	Indiv				
Patti Bates 2204 Teal Court	Party	i i			
Burlington, NC 2715	PAC				
Durington, No 2715	Refer	rendum	d. Elec	tion Sum to Date	
	Other	r Receipt Source	\$ 300.00		
D		f. Date (mm/dd/yyy	v)	g. Fair Market Amount	
e. Description Fundraiser event - food and beverage			*/		
rundiaiser event a rood and beverage		8-27-14		\$ 300.00	
				\$	
				\$	
3. Contributor Information Add	Remove	\ .			
a. Full Name, Mailing Address & Phone	b. Type of C	ontributor	c. Comments		
(include city, state, & zip)	Indiv	vidual			
	1 🖃	didate			
	Party				
	PAC	rendum	d. Election Sum to Date		
		er Receipt Source	d. Election Sum to Date		
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3. Contributor Information Add	Remove	44 4			
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4. Total only this Page			\$	300.00	

5. Total of ALL CRO-1510 Pages

300.00

Amendment