Disclosure Rep							Yes No
Use this form for gene	ral report and committee i	nformatio	on, must be s	signed ar	nd subi	mitted along with ot	ner detailed forms.
Do not use this form to		PURSUE NEWSTERN	G858/1858/1859			The North Control of the Control	
1. Committee Inform a. Full Name	ation						c. ID Number
Allison Gant for Scho	ol Board						C. ID Number
b. Mailing Address (includ	le City, State and Zip Code)						d. Date Filed
2306 Hickory Ave. B	urlington, NC 27215						10-27-14
							e. Phone Number
							336-538-4730
2. Report Year 3	. Period Start Date (mm/d	d/yy)	(mm/dd/yy)			5. Treasurer Full	Name
2014	7-1-14			18-14		Carrie Theall	
6. Type of Committee	CALL STATE OF THE PARTY OF THE		of Report			y one type of report	
Candidate Campaig PAC	=	Municipa		CALL PROPERTY AND ADDRESS OF THE PARTY AND ADD	State/Co		Referendum
Independent	Referendum	=	Organizational		_	Organizational	Organizational
Expenditure Legal Expense Fund	Joint Fundraiser		Thirty-five day		(	Quarterly	Pre-referendum
OCEAN MEDICAL PROPERTY AND A PROPERTY OF THE P	(if applicable, check one)		Pre-primary			First	Final
"Booster Fund"			Pre-election			Second	Supplemental Final
Building Fund			Pre-runoff Semi-annual		$\boxtimes$	Third Fourth	Annual Special
			Mid Year	'	∟ S	Semi-annual	Брески
Other:			Year End			Mid Year	10. Special Report Name
		F	Final			Year End	
8. Number of Fundra	isers this Report		Special		F	inal	
	1				S	pecial	
11. Account Informat	NUMBER OF STREET STREET, STREE				A STATE OF THE PARTY AND	nformation	
a. Financial Institution Ful	I Name			a. Financ	ial Insti	tution Full Name	
Wells Fargo b. Purpose	c. Account Code			b. Purpos	70		c. Account Code
Campaign	C. Account Code			D. Ful pos	se		c. Account Code
account and	1						
reciept	d. Period Begin Balance						d. Period Begin Balance
expenditures	\$ 630.00						\$
CERTIFICATION		4. 管理 腊					
I certify that the Comm the NC General Statute is complete, true and co		mmingle	d with prohi	bited or	other n	ion-disclosed funds.	& 22D-22M of Chapter 163 of I further certify that this report
Carrie Theall	Printed Name of Signer		<u>Ca</u>	matura of	Annoint	ed Treasurer	10-27-14 Date
FOR OFFICE USE ON			SIE	mature of A	трроши	CG TTCGSUICI	Date
Date Received:	10-28-14	F	Employee:	_	J	G_	Delivery Method Normal Mail
Date Postmarked:		F	Employee:	_		<u> </u>	Registered Mail  Hand Delivered
Date Scanned:	-	F	Employee:	-			Electronically Filed Signer has not received
Date Data Entered		F	Employee:	_			mandatory training
Please Note: This			mittee information				ss, treasurer, assistant treasurer,
Υ	ou must amend the Stater	nent of O	rganization	(CRO-2	100A-l	E) to make committe	ee changes.

Amendment

Amendment Yes

No

 $\boxtimes$ 

**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		3. ID Number			
Allison Gant for School Board	3 <sup>rd</sup> Quarter					
		Total this	Total this			
Start of Election Cycle: January 1,	2014	Reporting Period	1			
4) Cash on Hand at Start		\$ 655.00	\$ 2824.23			
RECEIPIS						
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 610.00	\$ 665.00			
6) Contributions from Individuals	(CRO-1210)	\$ 10,785.00	\$ 11,385.00			
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0	\$ 0			
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0	\$ 0			
9) Loan Proceeds	(CRO-1410)	\$ 0	\$ 0			
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$ 0	\$ 0			
11) Other Receipt Sources		]				
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0	\$			
11b) Contributions from Not-for-Profit Organizati	ions <i>(CRO-1250)</i>	\$ 0	\$			
11c) Outside Sources of Income	(CRO-1250)	\$ 0	\$			
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$ 0	\$			
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$ 0	\$			
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11	lc, 11d and 11e)	\$ 11,395.00	\$ 12050.00			
EXPENDITURES						
13) Disbursements						
13a) Operating Expenditures	(CRO-1310)	\$ 11,001.20	\$ 11,006.20			
13b) Contributions to Candidates/Political Commit	ttees (CRO-1310)	\$ 0	\$ 0			
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0	\$ 0			
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 0	\$ 0			
15) Loan Repayments	(CRO-1420)	\$ 0	\$ 0			
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$ 0	\$ 0			
17) In-Kind Contributions	(CRO-1510)	\$ 0	\$ 0			
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1	15, 16 and 17)	\$ 11,001.20	\$ 11,006.20			
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	htract line 18)	\$ 1048.80	\$ 3868.03			
ADDITIONAL INKORMATION						
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0				
21) Outstanding Loans (incl. ones from other campaig	ns) <i>(CRO-1430)</i>	\$ 0				
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$ 0				
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$ 0				
24) Account Transfers Within the Committee	(CRO-1720)	\$ 0	1			
25) Administrative Support	(CRO-1710)	\$ 0	\$ 0			
26) Forgiven Loans	(CRO-1440)	\$ 0	\$ 0			
27) 48-Hour Notice Reports Sum	(CRO-2200)	\$ 0	\$ 0			
28) Contributions to be Refunded	(CRO-1215)	\$ 0	\$ 0			

## **Aggregated Contributions from Individuals**

Page

<u>1</u> of

Amendment Yes

No

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

	Committee Full N		d if applicable)			2. ID	Number	
A	Ilison Gant for Sch	ool Board						
3.	Contributor Infor	mation						
	Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyy)	y)	f. Amount	
	Add	_ l	paypal		8-6-14		\$ 50.00	
$\underline{\square}$	Remove	<u> </u>	раурат		8-0-1-	T	\$ 50.00	
뷰	Add	- 1	cash		8-6-14	1	\$ 25.00	
붐	Remove Add							
卄	Remove	<del> </del> 1	paypal		9-18-1	4	\$ 50.00	
盲	Add	1	1 1		0.10.1			
	Remove	1	check		8-18-1	4	\$ 30.00	
	Add	1					\$	
$\Box$	Remove	'					9	
뷰	Add	<u> </u>	check		9-3-14	1	\$ 50.00	
<u> </u>	Remove	<del></del>						
븜	Add Remove	<u> </u>	check	}	9-3-14	1	\$ 50.00	
퓜	Add	<del></del>			<del></del>			
Ħ	Remove	<del>-</del> 1	check		9-3-14	1	\$ 50.00	
	Add	1	check		9-3-14	1	\$ 30.00	
	Remove	1	CHECK		9-3-12	<del> </del>	\$ 30.00	
Щ	Add	_ 1	check		9-3-14	1	\$ 30.00	
片	Remove							
片	Add Remove	1	check		9-3-14	1	\$ 50.00	
붐	Add							
ఠ	Remove	<del>-</del> 1	check		9-3-14	1	\$ 30.00	
	Add	1	check		9-3-14	1	¢ 20.00	
	Remove	1	CHECK		9-3-14	+	\$ 30.00	
부	Add	1	check		9-3-14	1	\$ 30.00	
뷰	Remove							
+	Add Remove	1	cash		9-3-14	1	\$ 40.00	
旹	Add							
芦	Remove	<b>⊣</b> 1	cash		9-3-14	1	\$ 40.00	
	Add	1	navnal		10-1-1	А	\$ 25.00	
	Remove	1	paypal		10-1-1	4	\$ 25.00	
무	Add	_					\$	
뷰	Remove						<del>_</del>	
뷰	Add Remove	=					\$	
+	Add					·		
旹	Remove	-					\$	
	Add	1					Ф	
	Remove						\$	
	Add						\$	
	Remove							
4.	Total only this	Page				\$ 610.00		
5. Total of ALL CRO-1205 Pages						<u> </u>	410.00	
			mmary Page CRO-1100)			\$	610.00	

Contr	ibutions fro	m Individuals			Pg	1 of	11	Yes	No
Use this f	form to report ind	ividual contributions of	ver \$50	or contribution		r \$50 if form CR	O 1205 is no	t used	
1. Comm	ittee Full Name	(and Fund if applica	ble)			· · · · · · · · · · · · · · · · · · ·	2. ID Num	ber	1000
Allison C	Sant for School Bo	oard							
3. Contri	ibutor Informatio	on		Add 🔲	Rem	ove			
a. Full Nan	ne, Mailing Address	& Phone	,	b. Job Title/Prof	ession		d. Comments	;	
	city, state, & zip)	· · · · · · · · · · · · · · · · · · ·		Owner					
Tom Wil									
	el Hill Road			c. Employer's Na		cific Field			
Burlingto	on, NC 27215			Hickory Farn	15				
							e. Election St	ım to Date	
							\$	500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Lind Description		j. Date (mm/dd/yy	уу)	k. Amount	
	1	check				7-3-1	4	\$	500.00
						• ***		\$	
			-					\$	
3. Contri	butor Informatio	on -	<del>'</del>	Add	Rem	ove	2 1 2		
a. Full Nan	ne, Mailing Address	& Phone		b. Job Title/Prof	ession		d. Comments	1	
	city, state, & zip)			Owner			}		
Bob Char									
	ventry Place			c. Employer's Na		cific Field			
Burlingto	n, NC 27215			Chandler Cor	crete		F1 C		
							e. Election Su	im to Date	
							\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-k	ind Description	_	j. Date (mm/dd/yy	yy)	k. Amount	
	1	check				8-18-1	4	\$	100.00
								\$	
								\$	
3. Contri	butor Informatio	on .		Add 🔲	Remo	ove			
a. Full Nam	ne, Mailing Address &	& Phone		b. Job Title/Prof	ession		d. Comments		
	city, state, & zip)			Retired					
-	er Gant, Jr.								
	estdale Dr.			c. Employer's Na	ıme/Spec	cific Field			
Burlingto	n, NC 27215			N/A				. 5 .	
							e. Election St	im to Date	
							\$	200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description		j. Date (mm/dd/yy	yy)	k. Amount	<del></del>
	1	check				8-18-1	4	\$	200.00
								\$	
								\$	
4. Total	only this Pag	e			1.5		\$		800.00

CRO-1210 NC State Board of Elections April 2007

\$

10,785

5. Total of ALL CRO-1210 Pages

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

				Amei	nument		
Contributions from Individuals	Pg	 of	11_		Yes	$\times$	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 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 910 Central Ave. c. Employer's Name/Specific Field Burlington, NC 27215 LabCorp e. Election Sum to Date \$ 60.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount 1 check 8-18-14 \$ 60.00 \$ 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Owner Thomas Chandler 5348 S. NC 62 c. Employer's Name/Specific Field Burlington, NC 27215 Chandler Concrete e. Election Sum to Date \$ 250.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount 1 check 9-3-14 \$ 250.00 \$ \$ 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Professor **David Collins** 100 Keith Road c. Employer's Name/Specific Field Carboro, NC 27510 Univ. Of NC 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 9-10-14 \$ 100.00 \$ \$ 4. Total only this Page \$ 410.00

CRO-1210 NC State Board of Elections April 2007

\$

10,785

5. Total of ALL CRO-1210 Pages

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

		m Individuals ividual contributions o	over \$50	or contrib	P <sub>i</sub> outions un		of <u>11</u> CRO 1205 is no	Amendment Yes ot used	No		
1. Comm	uittee Full Name (	(and Fund if applicat	ble)	<b>-</b>			2. ID Nur	nber			
Allison C	Gant for School Bo	oard									
3. Contri	ibutor Informatio	On .		Add [	Re	emove					
	ne, Mailing Address d	& Phone		b. Job Titl	le/Professio	n	d. Commen				
	city, state, & zip)		<del></del>	Sales							
Hugh Cu: 1533 Yor	•			<u> </u>							
	on, NC 27215				er's Name/s	Specific Field					
Darmigio	ni, NC 27213			Keninen	its allu 1 C.	xuies	e. Election S	Sum to Date			
							\$	100.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Descript	tion	j. Date (mm/d		k. Amount			
	1	check		<u>-</u>			3-14	\$	100.00		
								\$			
								\$			
3. Contri	ibutor Informatio	on		Add [	Re	emove					
	ne, Mailing Address &	k Phone		b. Job Title	e/Profession	a	d. Comment	ts			
	city, state, & zip)			Textiles							
Carl Oehi 1819 Dali	-			e Employ	orlo Nama/S	Specific Field	<del></del>				
	ro, NC 27494			Glen Ray	·	pecine rieiu	<del></del>	_			
	,			011111111111111111111111111111111111111	, -1.		e. Election S	Sum to Date			
							\$	500.00			
f. Prior	g. Account Code	h. Form of Payment	i, In-K	ind Descript	tion	j. Date (mm/de	d/yyyy)	k. Amount			
	1	check			·	9-	3-14	\$	500.00		
								\$			
							<del></del>	\$			
	butor Informatio	~~~		Add [		move					
	a. Full Name, Mailing Address & Phone				e/Professior	<u> </u>	d. Comment	is			
	(include city, state, & zip) ennifer Ford			Office M	1gr						
	animer Ford 10 Faith Drive			c. Employe	er's Name/S	Specific Field					
	lle, NC 27249		-	c. Employer's Name/Specific Field Emerald Green			_				
	Diosonville, NC 27249							e. Election Sum to Date			

5. Total of ALL CRO-1210 Pages \$ 10,785 (This line must be on line 6 of Detailed Summary Page CRO-1100) CRO-1210

NC State Board of Elections

i. In-Kind Description

f, Prior

g. Account Code

1

4. Total only this Page

h. Form of Payment

check

100.00

\$

\$

\$

\$

k. Amount

100.00

700.00

April 2007

j. Date (mm/dd/yyyy)

9-3-14

		m Individuals lividual contributions	over \$5	Pg O or contributions und	. <u>4</u> of	11	Amendmen Yes	-
1. Com	mittee Fuli Name	(and Fund if applica	ble)	o or commons and	ier \$50 ii ionn Cr	2. ID Nu		
	Gant for School B					2. 15 114	INDCI	
3. Cont	ributor Informati	on		Add  Re	move			
	me, Mailing Address	& Phone	-	b. Job Title/Profession		d. Commen	its	<del>-</del>
	e city, state, & zip)			Lawyer				
Dorn Pit	πman ckshire Dr					_		
	on, NC 27215			c. Employer's Name/S Pittman Law Firm	pecific Field	4		
Juning	011, 110 27213			Piuman Law Firm		n Flation i	Sum to Date	
						e. Election s		<del></del> -
						\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
	1	check			9-3-1	4	\$	100.00
							\$	
							\$	
	ibutor Informatio			Add Rei	nove		· .	T :
	me, Mailing Address &	& Phone		b. Job Title/Profession		d. Comment	ts	<u> </u>
	city, state, & zip)			Textiles	•		<u> </u>	
Steve Bo 910 Cent								
	oro, NC 27215			c. Employer's Name/Sp Culp	ecific Field	_		
	310, 110 2,213			Cuip		e. Election S	um to Dote	
						\$	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
							\$	
							\$	
	ibutor Informatio			Add Ren	nove			
	ne, Mailing Address &	k Phone		b. Job Title/Profession		d. Comment	S	<u>.                                    </u>
	city, state, & zip)	<del></del>		Mteal Sales				
Mike Bro								
	m, Gibsonville, NC	,		c. Employer's Name/Sp				
27215	ii, Giosonvine, Ne			Brothers Metal Fab	ricators	a Flantina F	4- D-4	
			,			e. Election S	um to Date	
f. Prior	g. Account Code	h Form of Bound	1		1	\$	150.00	
		h. Form of Payment	i. in-K	ind Description	j. Date (mm/dd/yy		k. Amount	<u></u>
	1	check			9-3-14	1	\$	150.00
						·	\$	<u> </u>
	İ				1		(r	

4. Total only this Page

5. Total of ALL CRO-1210 Pages

350.00

10,785

\$

Use this	form to report ind		_	Pg 0 or contributions und	<u>5</u> of er \$50 if form CR	<u>11</u> .O 1205 is no	Amendmen Yes ot used	
1. Comn	nittee Full Name	(and Fund if applica	ble)			2. ID Nun	ıber	
Allison (	Gant for School B	oard						
3. Contr	ibutor Informati	on		Add 🗌 Rei	nove			
	ne, Mailing Address	& Phone		b. Job Title/Profession		d. Comment	S	
Harold H	city, state, & zip)			textiles				
	estdale Dr.			c. Employer's Name/Sp	ecific Field	-		
Burlingto	on, NC 27215			Glen Raven				
						e. Election S	um to Date	
						\$	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			9-3-1	4	\$	250.00
							\$	
			- i				\$	
3. Contr	ibutor Informati	on		Add 🔲 Ren	nove			The state of
	ne, Mailing Address	& Phone		b. Job Title/Profession		d. Comments	<u> </u>	<u> </u>
	city, state, & zip)			textiles				
Dan Cox Dana Dri						_		
	on, NC 27215			c. Employer's Name/Sp Glen Raven	ecific Field	_		
Durmigie	m, 110 27213			Olen Raven		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	cash			9-3-1	4	\$	100.00
							\$	
							\$	
	butor Informatio			Add 🗌 Ren	nove			
	ne, Mailing Address	& Phone		b. Job Title/Profession		d. Comments	3	
Steve Vai	city, state, & zip)		<del>.</del>	retired		ĺ		
	view Drive			c. Employer's Name/Sp	ecific Field	-		
Graham,				N/A	- Tield			
						e. Election Su	ım 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			10-1-1	4	\$	250.00
							\$	

(This line must be on line 6 of Detailed Summary Page CRO-1100)
CRO-1210

4. Total only this Page

5. Total of ALL CRO-1210 Pages

10,785

600.00

\$

\$

		m Individuals	over \$5	P <sub>i</sub> O or contributions un	g <u>6</u> 0 der \$50 if form Cl	f <u>11</u>	Amendmen Yes	_
1. Com	mittee Full Name	(and Fund if applica	ble)	o or contributions un	der \$50 ii form er	2. ID Nu		
1	Gant for School Bo	·			<del>_</del>			
3. Cont	ributor Informati	on		Add 🔲 Re	move			
	ime, Mailing Address	& Phone		b. Job Title/Profession	n_	d. Commer	ıts	<u> </u>
	e city, state, & zip)  I Anderson			Physcian				
I	adowood Drive			- F1	10 5111	_		
	on, NC 27215			c. Employer's Name/S Kernodle Clinic	specific Field	-		
	,			remodic cinic		e. Election	Sum to Date	
<u> </u>	T	T	,—			\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
	I	check			9-10-	14	\$	100.00
							\$	
						•	\$	
	ibutor Informatio			Add 🗌 Re	move			
	me, Mailing Address	& Phone	·	b. Job Title/Profession	1	d. Commen	ts	.1
Ron Lee	city, state, & zip)			Retiered				
	und Stone Court			a Employavia Nama /6		_		
	ille, NC 27249			c. Employer's Name/S N/A	респис глена	-		
	,					e. Election S	Sum to Date	
						\$	100.00	<del></del>
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Kind Description	j. Date (mm/dd/y	/vvy)	k. Amount	
	1	check			9-10-		\$	100.00
						·	\$	
						<u> </u>	\$	
3. Contr	ibutor Informatio	on		Add ☐ Rei	move			,
a. Full Nar	ne, Mailing Address &	k Phone		b. Job Title/Profession		d. Comment	ts	<u> </u>
	city, state, & zip)			retired				
Susie Lo			_					
	wood Lane			c. Employer's Name/SI	ecific Field	_		
Durinigio	on, NC 27215			N/A		- F) d 6		
						e. Election S	oum to Date	<del></del>
						\$	200.00	
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-	14	\$	200.00
							\$	
							\$	

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)

400.00

10,785

\$

Amendment Contributions from Individuals Yes X No Pg of 11 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 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Owner Thomas E. Chandler Jr. 2516 Pineway Drive c. Employer's Name/Specific Field Burlington, NC 27215 Chandler Concrete 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 9-10-14 \$ 100.00 \$ \$ 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Owner Lydia Duke 840 Colonial Meade c. Employer's Name/Specific Field Suffolk, VA 23434 Duke Automotive 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 Ī check 9-10-14 \$ 100.00 \$ \$ 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Analyst

Marla Wi 2615 Am				a Empharagla Na	(C:C-F!-14			
			<u> </u>	c. Employer's Name	Specific Field			
Burlingto	n, Nc 27215			LabCorp				
						e. Electio	n Sum to Date	
						\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kii	nd Description	j. Date (mm/do	l/уууу)	k. Amoun	<u> </u>
	1	check			9-3	3-14	\$	100.00
							\$	
							\$	
4. Total	only this Pag	e			· · ·	\$	L	300.00
5. Total	of ALL CRO	-1210 Pages		. 1	-			••

CRO-1210

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

10,785

		m Individuals ividual contributions	over \$50		Pg <u>8</u> of oder \$50 if form CR		Amendmen Yes	_
		(and Fund if applica			100, 000 11 101111 01	2. ID Nu		
Allison (	Gant for School Bo	oard						
3. Contr	ibutor Informati	on		Add R	lemove			
	ne, Mailing Address	& Phone		b. Job Title/Profession	on	d. Commen	its	
(include John Gar	city, state, & zip)			Textiles				
	en Woods			c. Employer's Name	Specific Field	+		
Chapel H	iill, NC 27516			Glen Raven				
						e. Election	Sum to Date	
						\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Lind Description	j. Date (mm/dd/y	ууу)	k. Amount	
	1	check			9-3-1	14	\$	100.00
							\$	
							\$	
3. Contr	ibutor Informati	on		Add 🔲 R	emove			
	ne, Mailing Address	& Phone		b. Job Title/Profession	חו	d. Commen	its	
Chan Cha	city, state, & zip)			Retired				
	dleclub Way			c. Employer's Name/	Specific Field	1		
Burlingto	on, NC 27215			N/A		]		
						e. Election S	Sum to Date	
				_		\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	and Description	j. Date (mm/dd/y	ууу)	k. Amount	
	1	check			9-26-	14	\$	100.00
							\$	
							\$	
<del></del>	butor Informatio			Add 🗌 R	emove			
	ne, Mailing Address	& Phone		b. Job Title/Profession	en .	d. Commen	ts	
Brian Spa	city, state, & zip) ingler			Finance Advisor				
3535 Star	nton Court			c. Employer's Name/	Specific Field	1		
Cacham	roham NC 27252			Edward Laws		1		

3535 Sta	3535 Stanton Court		c. Employer's Name/	c. Employer's Name/Specific Field					
Graham,	NC 27253			Edward Jones					
							e. Election	Sum to Date	
							\$	250.00	
f. Prior	g. Account Code	h. Form of Payment	i, In-K	Kind Description	j. Da	ite (mm/dd/yy	уу)	k. Amour	ıt
	1	check				9-19-1	4	\$	250.00
								\$	
								\$	
4. Tota	l only this Pag	e				* * * *	\$		450.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)			<b>)</b>	i.		\$		10,785	

		m Individuals	over \$50	) or contri	ibutions	Pg unde	<u>9</u> of er \$50 if form CRe	<u>II</u> O 1205 is no	Amendment  Yes ot used	t 🛛 No	
1. Comm	nittee Full Name (	(and Fund if applical	ble)					2. ID Num	iber	er en station	
Allison C	Gant for School Bo	oard		· · · · · · · · · · · · · · · · · · ·							
	ibutor Informatio			Add		Rem	iove		1 1 1 1		
	me, Mailing Address &	& Phone			itle/Profes	ssion		d. Comments			
Janie Sell	city, state, & zip) lars			Attorne	;y						
	iherst Ave			c. Emplo	ver's Nar	ne/Spe	ecific Field	1			
	on, NC 27215			<u> </u>	re Wood			1			
			١					e. Election Si	um to Date		
								\$ 100.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Cind Descrip	ption		j. Date (mm/dd/yy	уу)	k. Amount		
	1	check	<u> </u>				9-21-1	4	\$	100.00	
									\$		
									\$		
	ibutor Informatio			Add	_=	Rem	iove				
	ne, Mailing Address &	& Phone		b. Job Tit		sion		d. Comments	<u> </u>		
Kristin M	city, state, & zip)			Physicia	an						
1552 Yor				c. Employ	yer's Nan	ne/Spe	ecific Field	1552			
Burlingto	on, NC 27215				gton Ped						
								e. Election Sum to Date			
								\$	100.00		
f. Prior	g. Account Code	h. Form of Payment	i, In-K	Kind Descrip	otion		j. Date (mm/dd/yy	уу)	k. Amount		
	1	check					9-26-1	.4	\$	100.00	
									\$		
			<u> </u>						\$	7	
<del></del>	butor Informatio			Add		Rem	ove	т			
	ne, Mailing Address & city, state, & zip)	¿ Phone		b. Job Tit		sion		d. Comments	3		
Jerry Bail				Banker							
3122 Bricewood Place				c. Employ	yer's Nan	ne/Spe	cific Field				
Burlington, NC 27215				Wells F	argo						
								e. Election Sum to Date			
								\$	150.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-K	and Descrip	otion		j. Date (mm/dd/yy	yy)	k. Amount		
	1	check					10-1-1	4	\$	150.00	

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

April 2007

350.00

10,785

\$

\$

\$

		m Individuals	Quar \$5	O an aontaileatica	Pg	_10 of	11	Amendmen Yes	_
1. Com	nittee Full Name	(and Fund if applica	ovel 35	o or contributions	s unae	er \$50 II form CR			<del></del>
J	Gant for School B		ibie)		<del></del>	<u>.</u>	2. ID Nu	mber	
3. Conti	ributor Informati	on		Add 🗍	Ren	nove	<u> </u>		
	me, Mailing Address			b. Job Title/Profe		1070	d. Commer	ıfe	
(include	e city, state, & zip)			Retired	2001011		di Comme		<u> </u>
Sue Draj		<del></del>							
1	dwood Lane			c. Employer's Na	me/Spe	ecific Field			
Burlingt	on, NC 27215								
							e. Election	Sum to Date	
ĺ							\$	200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Lind Description		j. Date (mm/dd/yy	/yy)	k. Amount	
	1	check				10-9-		\$	200.00
								\$	
			+					\$	<del></del>
3. Contr	ibutor Information	DD:	<u> </u>	Add 🗍	Rem				<del>                                     </del>
	me, Mailing Address		_ <del></del>	b. Job Title/Profe		love	d. Commen	do.	
	city, state, & zip)			VP Operations			u. Commen	18	<del></del>
Patti Bate				j vi opstanom	-				
				c. Employer's Na	me/Spe	cific Field			
				Glen Raven					
							e. Election S	Sum to Date	
							\$	300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-k	ind Description		j. Date (mm/dd/yy	уу)	k. Amount	
	1	in-kind	Func	lraising ev	_	8-27-1	4	\$	300.00
_ <u>_</u>								\$	_
								\$	
<del></del>	ibutor Informatio			Add 🔲	Rem	ove			
	ne, Mailing Address &	& Phone		b. Job Title/Profes	ssion		d. Commen	ts	
(інсіцие	city, state, & zip)								
				c. Employer's Nan	ne/Spe	cific Field			
							e. Election S	Sum to Date	<u>-</u> -
							\$	10 2 110	
f, Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description		j. Date (mm/dd/yy		k. Amount	
	1							\$	
					-			\$	
								\$	
4. Total	only this Page	;					 \$	<u> </u>	500.00
5. Total	of ALL CRO	-1210 Pages							<del></del>
		Detailed Summary Page C	RO-1100)				\$		10,785

		m Individuals	over \$50	) or contril	Pg			Amendmen  Yes	_
1. Comn	nittee Full Name	(and Fund if applica	ble)	or contra	Junons and	· ·	2. ID Nui		
Allison (	Gant for School Bo	pard	<del></del>	, - 4					·
<u> </u>	ibutor Informatio			Add	Re	move	<del></del>	e e	
	me, Mailing Address	& Phone			le/Profession		d. Commen	ts	
Allison C	city, state, & zip)	<u> </u>	<u>.</u>	Dance I	nstructor				
,	kory Avenue			c. Employ	er's Name/S	necific Field	-		
	on, NC 27215				ton Acader		1		
				of Danc	e and Arts	•	e. Election S	Sum to Date	
							\$	4025.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-F	 Lind Descrip	tion	j. Date (mm/dd/y)	/yy)	k. Amount	
	1	check				7-2-1		\$	2000.00
	1	check				7-21-	-14	\$	900.00
	1	check				7-31-	14	\$	1125.00
	ibutor Informatio		$\Box$	Add		move			
	ne, Mailing Address & city, state, & zip)	& Phone			le/Profession		d. Comment	ts	
Allison G				Dance	iistructor				
	kory Avenue			c. Employ	er's Name/Sp	pecific Field	_		
Burlingto	on, NC 27215					ny of Dance			
				and Arts	5		e. Election S	Sum to Date	
·							\$	5925.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Descrip	tion	j. Date (mm/dd/yy	уу)	k. Amount	
	1	check				10-1-1	14	\$	1900.00
								\$	
	,							\$	
	butor Informatio			Add		nove			
	ne, Mailing Address & city, state, & zip)	2 Phone		b. Job Titl	e/Profession		d. Comment	<u>s</u>	
(Include (	city, state, & zipj								
			ı	c. Employe	er's Name/Sp	ecific Field			
							e. Election S	um to Date	
							\$		
f, Prior	g. Account Code	h. Form of Payment	i. In-K	ind Descript	ion	j. Date (mm/dd/yy	yy)	k. Amount	
								\$	
								\$	
		ı						\$	

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)

10,785

5925.00

\$

				Amen	dment		
Disbursements	Pg	1	of 7		Yes	$\bowtie$	No
Use this form to report expenditures from the committee for; operating e	xpenses,	contrib	outions to candid	late/politi	cal	. —	
committees and coordinated party expenditures.	•			•			

Alfano Gant for School Board    A Type of Dishursement	1. Committee F	ull Name (and Fun	d if applicable)			2. ID Number			
Coordinated Party Expension   Coordinated Plarty Expenditures   Coordinated Plarty Expenditures   Add   Remove	Allison Gant for	r School Board							
Add   Remove	3. Type of Disb	ursement <u>(Plea</u>	ise use separate C	RO-1310 forms for eac	h type of Disbursen	<u>ient.)</u>			
## B. Coordinated Committee Name	Operating E	xpenses	Contributions to Car	ndidates/Political Committees	Co	ordinated Party Expenditures			
## B. Coordinated Committee Name	4. Payee Inform	iation		Add	Remove				
				b. Coordinated Committe					
Markel    Tile East Davis Street   Burlington, NC 27215		=							
Seast Davis Street				†					
Burlington, NC 27215    Federal	718 East Davis	Street		c. Level Registered (Speci	fv)	1			
State						1			
Federal   County Code   Form of Payment   h. Purpose Code   L. Date (mm/dd/yyyy)   J. Amount   L. Required Remarks				1	= '	e. Election Sum to Date			
Account Code   g. Form of Payment   h. Purpose Code   l. Date (min/dd/yyyy)   j. Amount   campaign signs and buttons   campaign signs and buttons   campaign signs and buttons   campaign signs									
debit card   A   7-7-14   \$1769.38   campaign signs and buttons						\$ 0			
debit card   A   7-7-14   \$1769.38   campaign signs and buttons	f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	i. Amount	k. Required Remarks			
1	• • • • • • • • • • • • • • • • • • • •		<u> </u>						
A	1	debit card	A	7-7-14	\$1769.38				
A   Payee Information	_		<u> </u>						
Description	1	debit card	A	7-16-14	\$106.92	campaign signs			
Description	4. Pavee Inform	lation		Add	1 Remove				
County			<b>_</b>	·					
Markel    718 East Davis Street		-		0, 000, 0,111,112	L 1141110	u. Comments			
C. Level Registered (Specify)		& zipj		1					
Burlington, Nc 27215    Federal   County: Municipality: e. Election Sum to Date	** * * * * *	Street		o Level Registered (Speci		-			
State				<del></del>	<del></del>	-			
\$ 1876.30  f. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks  1 debit card A 7-30-14 \$203.50 campaign signs  1 debit card A 9-10-14 \$203.50 campaign signs  4. Payee Information Add Remove a. Full Name, Mailing Address & Phone (include city, state, & 2ip)  Markell 718 East Davis Street Burlington, NC 27215 c. Level Registered (Specify)  Federal County: State State County: State Required Remarks  c. Level Registered (Specify)  Federal County: State Required Remarks  c. Level Registered (Specify)  Federal County: County: State Required Remarks  c. Level Registered (Specify)  Federal County: State Required Remarks  c. Election Sum to Date  \$ 2283.30  f. Account Code g. Form of Payment h. Purpose Code l. Date (mm/dd/yyyyy) j. Amount k. Required Remarks  debit card A 9-16-14 \$652.77  Set Contain of ALL CRO-1310 Pages  (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13a of Detailed Summary Page CRO-1100 if Contrib to Condidates/Political Comm) (This line goes in line 13a of Detailed Summary Page CRO-1100 if Contrib to Condidates/Political Comm) (This line goes in line 13a of Detailed Summary Page CRO-1100 if Contrib to Condidates/Political Comm) (This line goes in line 13a of Detailed Summary Page CRO-1100 if Contrib to Condidates/Political Comm) (This line goes in line 13a of Detailed Summary Page CRO-1100 if Contrib to Condidates/Political Comm) (This line goes in line 13a of Detailed Summary Page CRO-1100 if Contrib to Condidates/Political Comm) (This line goes in line 13a of Detailed Summary Page CRO-1100 if Contrib to Condidates/Political Comm) (This line goes in line 13a of Detailed Summary Page CRO-1100 if Contrib to Condidates/Political Comm) (This line goes in line 13a of Detailed Summary Page CRO-1100 if Contrib to Condidates/Political Comm) (This line goes in line 13a of Detailed Summary Page CRO-1100 if Contrib to Condidates/Political Comm) (This line goes in line 13a of Detailed Summary Page CR	Durington, 140.	4/413		<del> </del>	<b>=</b>	a Flantian Pura to Data			
Account Code   g. Form of Payment   h. Purpose Code   i. Date (mm/dd/yyyy)   j. Amount   k. Required Remarks				State		e. Election Sum to Date			
1 debit card A 9-10-14 \$203.50 campaign signs  4. Payee Information Add Remove  a. Full Name, Mailing Address & Phone (include city, state, & zip)  Markell 7-18 East Davis Street  Burlington, NC 27215  C. Level Registered (Specify)  Burlington, NC 27215  Burlington, NC 27215  C. Level Registered (Specify)  Federal County: State Municipality: c. Election Sum to Date  \$ 2283.30  C. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks  1 debit card A 9-16-14 \$652.77 campaign signs  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) (This line goes in line 13a of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13a of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13a of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13a of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13a of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13a of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13a of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13a of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13a of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)  The page of the 13a of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)  The page of the 13a of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)  The page of the 13a of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)  The page of the 13a of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)  The page of the 13a of Detailed Summary Page CRO-1100 if Contri			;	<u>{</u>		\$ 1876.30			
1 debit card A 9-10-14 \$203.50 campaign signs  4. Payee Information	f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks			
4. Payee Information Add Remove  a. Full Name, Mailing Address & Phone (include city, state, & zip)  Markell  718 East Davis Street  Burlington, NC 27215  C. Level Registered (Specify)  Federal County: State Monicipality: c. Election Sum to Date  \$ 2283.30  C. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks  I debit card A 9-16-14 \$652.77  Segmana signs  5. Total only this Page \$ 4182.37  6. Total of ALL CRO-1310 Pages  (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)  (This line goes in line 13a of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)  (This line goes in line 13b of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)  7. Purpose Codes (List detailed expenditure code in (h.) above)  A* - Media B* - Printing C* - Fundraising D - To Another Candidate  F* - Equipment G - Political Party H* - Holding Public Office Expenses  O* - Other	1	debit card	A	7-30-14	\$203.50	campaign signs			
a. Full Name, Mailling Address & Phone (include city, state, & zip)  Markell 718 East Davis Street Burlington, NC 27215    Federal   County:     State   Municipality:   Election Sum to Date     State   Municipality:   Election Sum to Date     State   Sta	1	debit card	A	9-10-14	\$203.50	campaign signs			
a. Full Name, Mailling Address & Phone (include city, state, & zip)  Markell 718 East Davis Street Burlington, NC 27215    Federal   County:     State   Municipality:   Election Sum to Date     State   Municipality:   Election Sum to Date     State   Sta	4. Payee Inform	ation	П	Add	1 Remove				
County:   Coun				b. Coordinated Committee	<del>-</del>	·			
Markell 718 East Davis Street Burlington, NC 27215    Federal						<del> </del>			
C. Level Registered (Specify)   Federal   County:   State   Municipality:   C. Election Sum to Date		<u></u>		1					
Burlington, NC 27215    Federal   County: Municipality: c. Election Sum to Date		Street		c. Level Registered (Specif	fy)	1			
State Municipality: c. Election Sum to Date  \$ 2283.30  f. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks  debit card A 9-16-14 \$652.77 campaign signs  5. Total only this Page \$ 4182.37  6. Total of ALL CRO-1310 Pages  (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)  (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)  (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)  7. Purpose Codes (List detailed expenditure code in (h.) above)  A*- Media B*- Printing C*- Fundraising DTo Another Candidate E - Salaries F*- Equipment G - Political Party H*- Holding Public Office Expenses  O*- Other						-			
\$ 2283.30  f. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks  debit card A 9-16-14 \$652.77 campaign signs  5. Total only this Page \$ \$4182.37  6. Total of ALL CRO-1310 Pages  (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)  (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)  (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)  7. Purpose Codes (List detailed expenditure code in (h.) above)  A*- Media B*- Printing C*- Fundraising D-To Another Candidate  F*- Equipment G-Political Party H*- Holding Public Office Expenses  O*- Other	8,			<b>≔</b>	<u> </u>	e. Election Sum to Date			
I. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks  debit card A 9-16-14 \$652.77 campaign signs  5. Total only this Page \$4182.37  6. Total of ALL CRO-1310 Pages  (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)  (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)  (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)  7. Purpose Codes (List detailed expenditure code in (h.) above)  A*- Media B*- Printing C*- Fundraising D-To Another Candidate  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  O*- Other					<u></u>				
debit card A 9-16-14 \$652.77 campaign signs  5. Total only this Page \$ 4182.37  6. Total of ALL CRO-1310 Pages  (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)  (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)  (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)  7. Purpose Codes (List detailed expenditure code in (h.) above)  A*-Media B*-Printing C*-Fundraising D-To Another Candidate 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  O*-Other			l			\$ 2283.30			
1 debit card A 9-16-14 \$652.77 campaign signs  5. Total only this Page \$ 4182.37  6. Total of ALL CRO-1310 Pages  (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)  (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)  (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)  7. Purpose Codes (List detailed expenditure code in (h.) above)  A*-Media B*-Printing C*-Fundraising D-To Another Candidate 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  O*-Other	f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks			
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) (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 B*- Printing C*- Fundraising D- To Another Candidate 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 O*- Other		-				· · · · · · · · · · · · · · · · · · ·			
5. Total only this Page \$ 4182.37  6. Total of ALL CRO-1310 Pages  (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)  7. Purpose Codes (List detailed expenditure code in (h.) above)  A*- Media B*- Printing C*- Fundraising D- To Another Candidate 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 O*- Other	1	debit card	A	9-16-14	\$652.77	<b>44</b>			
5. Total only this Page \$ 4182.37  6. Total of ALL CRO-1310 Pages  (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)  7. Purpose Codes (List detailed expenditure code in (h.) above)  A*- Media B*- Printing C*- Fundraising D- To Another Candidate 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 O*- Other						<del> </del>			
6. Total of ALL CRO-1310 Pages  (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)  (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)  (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)  7. Purpose Codes (List detailed expenditure code in (h.) above)  A* - Media B* - Printing C* - Fundraising D - To Another Candidate  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  O* - Other			ĺ		\$				
6. Total of ALL CRO-1310 Pages  (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)  (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)  (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)  7. Purpose Codes (List detailed expenditure code in (h.) above)  A* - Media B* - Printing C* - Fundraising D - To Another Candidate  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  O* - Other	5. Total only thi	is Page	* * * * * * * * * * * * * * * * * * *		<del>_</del>	\$ 4182.37			
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)  7. Purpose Codes (List detailed expenditure code in (h.) above)  A*- Media B*- Printing C*- Fundraising D- To Another Candidate  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  O*- Other					er e d'il	1			
(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 B*- Printing C*- Fundraising D- To Another Candidate  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  O*- Other			mary Page CRO-1100	0 if Operating Expenses)		11.001.20			
7. Purpose Codes (List detailed expenditure code in (h.) above)  A*- Media B*- Printing C*- Fundraising D- To Another Candidate  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  O*- Other									
A*-Media B*-Printing C*-Fundraising D-To Another Candidate  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  O*-Other	(This line goes in								
A*-Media B*-Printing C*-Fundraising D-To Another Candidate  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  O*-Other	7. Purpose Code	7. Purpose Codes (List detailed expenditure code in (h.) above)							
I - Postage J - Penalties K* - Office Expenses Q* - Donation to Legal Expense Fund O* - Other	A* - Media				D - To Anoth				
O* - Other									
	_	J - Penalties	K* - Offic	ze Expenses	Q* - Donatio	n to Legal Expense Fund			
		a detailed evaluant	ion in required re	amorks field (k)					

				Amen	dment		
Disbursements	Pe	2	of 7		Yes	$\boxtimes$	No
Use this form to report expenditures from the committee for: operating a	evnencec	- contri	butions to candida	ate/politi	leal		

Ose 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)	<u> Andrija Programa i Britanija kao ali</u>		2. ID Number	
Allison Gant fo	<del></del>					
3. Type of Disb			CRO-1310 forms for each	<u>type of Disburse</u>	<u>ment.)</u>	
Operating F			ndidates/Political Committees		Coordinated Party Expenditures	
4. Payee Inforn	<del>··</del>		Add	Remove		
a. Full Name, Mail	ing Address & Phone		b. Coordinated Committee N	Vame	d. Comments	
(include city, state,	& zip)					
Weebly					 	
San Francisco,	CA		c. Level Registered (Specify)			
			Federal	County:		
			State	Municipality:	e. Election Sum to Date	
					\$ 0	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
					Website	
<u></u>	debit card	Α	7-11-14 \$39.95		W GOSILE	
				\$		
4. Payee Inform	nation		Add	Remove		
a. Full Name, Maili	ing Address & Phone		b. Coordinated Committee N	iame	d. Comments	
(include city, state,	& zip)					
Times News			]			
707 S Main Stre	eet		c. Level Registered (Specify)		_	
Burlington, NC	27215		Federal T	County:		
υ,			State	Municipality:	e. Election Sum to Date	
					\$ 0	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	debit card	A	7-23-14	\$496.83	Campaign ads	
1	debit card	A	9-10-14	\$198.00	campaign ads	
4. Payee Inform	ation		Add	Remove		
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee N		d. Comments	
(include city, state,	•			·		
Times News	<u>p)</u>		-			
707 S Main Stre	eet		c. Level Registered (Specify)		7	
Burlington, NC			Federal	County;	-	
24	2,210		State	Municipality:	e. Election Sum to Date	
				Manierpanty.		
					\$ 698.43	
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	
				\$		
5. Total only th	is Page		<u> </u>		\$ 1956.39	
	CRO-1310 Pages				1750.57	
		mary Page CRO-110	0 if Operating Expenses)			
			0 if Contrib to Candidates/Politic	cal Comm)	\$ 11,001.20	
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						
	es (List detailed ex					
A* - Media	B* - Printing	C* - Fund		D - To Anot	her Candidate	
E - Salaries	F* - Equipment	G - Politic	cal Party		g Public Office Expenses	
I - Postage	J - Penalties		ce Expenses	on to Legal Expense Fund		
O* - Other	rog Big Letric					
* Codes require	e detailed explanati	ion in required re	emarks field (k)			

Pg	3

of <u>7</u>

Amenament Yes

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
Allison Gant for							And the second s
3. Type of Disbu				1310 forms for each t			
Operating Ex				tes/Political Committees			d Party Expenditures
4. Payee Inform	ation			ld 🔲		<del>,</del>	
a. Full Name, Mailir	ng Address & Phone		b. (	Coordinated Committee Na	ame	d. Co	mments
(include city, state, d	=		-				
Williams Athlet			L				
1307 S Church S			c. L	Level Registered (Specify)	[		
Burlington, NC				Federal	County:		
5, 7. 5			$  \vec{\sqcap}$	State	Municipality:	e. Ele	ection Sum to Date
			一			6	١
		:				\$ (	U
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Re	quired Remarks
			$\dashv$		† <b>*</b>		gram ad
1	debit check	A		7-29-14	\$250.00	L	
			$\dashv$	<u>.</u>	· or		
					\$		
4. Payee Inform	ation		Ad	id 🔲 .	Remove		
	ng Address & Phone	<u> </u>		Coordinated Committee N	<del></del>	d. Co	omments
(include city, state,	<del>-</del>						
United States Po			i				
405 Maple Stree			c. I	Level Registered (Specify)		1	
Burlington, NC				Federal Specify	County:	1	
Durinigion, NC	41411			State	Municipality:	FILA	ection Sum to Date
			1	j siaic 📙	типогранку.		
			1			\$	0
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Re	equired Remarks
1	debit card	I		8-5-14	\$49.00	post	age
			+			<del> </del>	<u> </u>
1					\$		
4. Payee Inform	ation		Ac	id	Remove	<u> </u>	
	ng Address & Phone		_	Coordinated Committee N		-	omments
(include city, state,	=		<u> </u>			T	
	ce citi)		1				
Office Depot	Street			Level Registered (Specify)		1	
1811 S Church S			Ç. !	Federal Specify	County:	1	
Burlington, NC	21213				County: Municipality:	A E1	ection Sum to Date
			1	State	ошистранту:	e. El	cenon oum to Date
						\$	0
f. Account Code	g. Form of Payment	h. Purpose Code	1	i. Date (mm/dd/yyyy)	i. Amount	k. 12	equired Remarks
11 ACCOUNT CORE				<del></del> -		_	ce supplies
1	debit card	K		8-5-14	\$63.46	3111	suppried
	111.	17	$\dashv$	9 27 14	¢20.20	offi	ce supplies
1	debit card	K		8-27-14	\$30.28		
5. Total only th						\$	392.74
6. Total of ALL	CRO-1310 Pages		_		· · · · · · · · · · · · · · · · · · ·		
(This line goes in	line 13a of Detailed Sun					\$	11,001.20
				Contrib to Candidates/Politi		<b>"</b>	. 190011mV
(This line goes in	line 13c of Detailed Sun	nmary Page CRO-110	10 if C	Coordinated Party Expendit			
	es (List detailed ex	penditure code in	(h.)	above)			
A* - Media	B* - Printing	C* - Fun	drais	sing	D - To Anoth		
E - Salaries	F* - Equipment	G - Politi	ical P	arty			ic Office Expenses
I - Postage	J - Penalties	K* - Offi	ice E	xpenses	Q* - Donatio	on to L	egal Expense Fund
O* - Other	ing jiyan na in	and an extra server			e e e e e e e e e e e e e e e e e e e		<ul> <li>Solve and production of the particular companies of the particular companies.</li> </ul>
* Codes requir	e detailed explanat	ion in required r	ema	rks tiela (k)			

				Amend	ment		
Disbursements	Pg	4	of <u>7</u>		Yes	$\boxtimes$	No
Use this form to report expenditures from the committee for: operating	evnenses	contrib	utions to can	didate/nolitic	al		

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)		1 1 1 1 1 1 1 1 1		2. ID Number			
Allison Gant for									
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)									
Operating E	xpenses	Contributions to Car	ndid	lates/Political Committees	Co	ordinated Party Expenditures			
4. Payee Inform	ation		A	\dd	Remove				
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee Name			d. Comments			
(include city, state,	_								
International M			1						
1143 St Marks (	Church Road		c.	Level Registered (Specify)					
Burlington, NC			┢	Federal	County:				
,			State Municipality:			e. Election Sum to Date			
			┝						
						\$ 0			
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks			
		-			J. Almount	print			
1	debit card	В		8-6-14	\$467.18	materials			
						materials			
					\$				
4. Payee Inform	ation			xdd 🗔	Remove				
	ng Address & Phone			. Coordinated Committee N		d. Comments			
	<u> </u>			Coordinated Committee (	vanic	d. Comments			
(include city, state,			┨						
Forty West Gril			┝	T 15 1/ 1/0 10		-}			
2701 Ramada R			C.	Level Registered (Specify)					
Burlington 2721	15		<u>ا</u> اِ	Federal	County:				
			止	State	Municipality:	e. Election Sum to Date			
						\$ 0			
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks			
1	debit card	0		8-11-14 \$12.02		republican			
					<b>V12.32</b>	womens meeting			
					\$				
	5	· · · · · · · · · · · · · · · · · · ·							
4. Payee Inform			Add Remove						
•	ng Address & Phone		b. Coordinated Committee Name			d. Comments			
(include city, state,									
Mebane Enterpr						_			
106 N 4 <sup>th</sup> Street			c. Level Registered (Specify)						
Mebane, NC 27	302			Federal	County:				
				State	Municipality:	e. Election Sum to Date			
						\$ 0			
f. Account Code	g. Form of Payment	h. Purpose Code	_	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks			
1	debit card	A		8-18-14	\$124.38				
					\$				
5. Total only thi	s Dogo	:		<u>l</u>	٠,	\$ 603.58			
	CRO-1310 Pages					3 003.38			
		unary Paga CRO-110	n if	Onorativa Evnaucas)					
(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)  \$ 11,001.20									
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)									
					итеа)	The second secon			
A* - Media	es (List detailed ex B* - Printing	penditure code in ( C* - Fund			D - To Anoth	per Condidate			
E - Salaries F* - Equipment G - Political						er Candidate g Public Office Expenses			
I - Postage J - Penalties K* - Office						on to Legal Expense Fund			
O* - Other	o i manios	K - OIII			Z - Donatio	Degai Dapense Fund			
* Codes requir	e detailed explanat	ion in required re	em	arks field (k)		and the second s			

<b>Disbursem</b> Use this form to		from the committe	Pg ee for; operating expenses,	5 of contributions to c	Amendment  7
	ull Name (and Fun				2. ID Number
Allison Gant fo		a ii applicable)			Z. ID INGMOCE
3. Type of Disb	ursement (Plea	se use separate C	RO-1310 forms for each t	one of Dishursem	ent.)
Operating E			didates/Political Committees		ordinated Party Expenditures
4. Payee Inforn	<del></del>	The second second second	Add	Remove	·
	ing Address & Phone		b. Coordinated Committee Na		d. Comments
(include city, state,	<del>-</del>		,		
Fairway Outdoo					
1920 West Lee	Street		c. Level Registered (Specify)		
Greensboro, NO	27401		Federal	County:	
			State	Municipality:	e. Election Sum to Date
					\$ 0
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	debit card	Α	8-18-14	\$1267.50	Billboard
			0 10 14	\$1207.50	
				\$	
4. Payee Inform	ation		Add	Remove	
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee Na	ıme	d. Comments
(include city, state,					
Eastern Alaman	ce High School				
Boosters			c. Level Registered (Specify)		
Eastern Alaman	<del>-</del>		Federal	County:	
4040 Mebane R	-		State	Municipality:	e. Election Sum to Date
Mebane, NC 27	7302				\$ 0
		[	· · · · · · · · · · · · · · · · · · ·		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check	A	8-22-14	\$150.00	campaign ad
				\$	
4. Payee Inform	ation		Add	Remove	
	ng Address & Phone		b. Coordinated Committee Na		d. Comments
(include city, state,	_				
Western Alamai					
	nce High School	Ì	c. Level Registered (Specify)	·	
1731 N NC 87			Federal	County:	1
Elon, NC 27244	1		State	Municipality:	e. Election Sum to Date
Eion, INC 27244				у дана	\$ 0
f. Account Code	g. Form of Payment	h, Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1. recount Cour	<del></del>	7 - 0. p. 0.000			campaign ad
1	check	A	8-12-14	\$150.00	- campaign ad
				\$	

									Amenunien	
Disbursements					Pg	<u>6</u>	of	<u>7</u>	Yes Yes	
	11.	. •	•			. 11		11		

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

2. ID Number 1. Committee Full Name (and Fund if applicable) Allison gant for School Board (Please use separate CRO-1310 forms for each type of Disbursement.) 3. Type of Disbursement Contributions to Candidates/Political Committees Coordinated Party Expenditures Operating Expenses 4. Payee Information Add Remove b. Coordinated Committee Name d. Comments a. Full Name, Mailing Address & Phone (include city, state, & zip) DLX\*PS Print c. Level Registered (Specify) 2861 Mandela Pkwy Oakland, CA 94608 Federal County: Municipality: e. Election Sum to Date State \$ h. Purpose Code k. Required Remarks f. Account Code g. Form of Payment i. Date (mm/dd/yyyy) j. Amount bumper stickers В 9-10-14 \$75.61 1 debit card \$ Remove 4. Payee Information Add d. Comments b. Coordinated Committee Name a. Full Name, Mailing Address & Phone (include city, state, & zip) Alamance News c. Level Registered (Specify) 114 W Elm Street Graham, NC27253 Federal County: Municipality: e. Election Sum to Date State - 0 h. Purpose Code g. Form of Payment i. Date (mm/dd/yyyy) j. Amount k. Required Remarks f. Account Code camaign ad 9-18-14 \$250.00 1 debit card Μ campaign ad 10-3-14 \$539.48 1 debit card Μ 4. Payee Information Add Remove b. Coordinated Committee Name d. Comments a. Full Name, Mailing Address & Phone (include city, state, & zip) **WBAG** c. Level Registered (Specify) 1745 Burch Bridge Road Federal Burlington, NC 27217 County: e. Election Sum to Date State Municipality: h, Purpose Code k. Required Remarks i. Date (mm/dd/yyyy) j. Amount f. Account Code g. Form of Payment radio ad 9-30-14 \$432.00 check Μ \$ 1297.09 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) \$ 11,001.20 (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) D - To Another Candidate C\* - Fundraising A\* - Media B\* - Printing G - Political Party H\* - Holding Public Office Expenses E - Salaries F\* - Equipment K\* - Office Expenses Q\* - Donation to Legal Expense Fund I - Postage J - Penalties O\* - Other منظم أغل منظم المنظم المنظ والمنظم المنظم المن \* Codes require detailed explanation in required remarks field (k)

No

Disbursem	ents		Pg	7 of	7 Yes No				
Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political									
	coordinated party ex								
	ull Name (and Fun	d if applicable)	<u> </u>			2. ID Number			
Allison Gant for		••							
				1-1310 forms for each t					
Operating E		Contributions to Ca		ates/Political Committees		oordinated Party Expenditures			
4. Payee Information				.dd	Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)				Coordinated Committee N	ame	d. Comments			
Curtis Media G			-						
1109 Tower Drive				Level Registered (Specify)		-			
Burlington, NC 27215				Federal Federal	County:	-			
g,			┨┝	State	Municipality:	e. Election Sum to Date			
			-	<u> </u>		+			
						\$ 0			
f. Account Code	g. Form of Payment	Form of Payment h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks			
1	debit card	A		10-17-14	\$997.50	radio ad			
					\$				
4. Payee Inform	otion			dd 🗍	Domosto				
*	ng Address & Phone		<del></del>	Coordinated Committee N	Remove	d. Comments			
(include city, state,	-		·	Coordinated Continuities IV	ame	d. Conductits			
Pay Pal	cc zipj		┨						
			c.	Level Registered (Specify)		1			
			厅	Federal	County:				
				State	Municipality:	e. Election Sum to Date			
						\$			
f. Account Code	g. Form of Payment	h. Purpose Code	1	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks			
1	auto w/d	С		8-6-14	\$1.50	service charge			
	auto w/d	С		8-9-14	\$1.50	service charge			
4. Payee Inform	estion	<u>.                                    </u>		dd 🗍	Remove				
a. Full Name, Mailing Address & Phone				Coordinated Committee Na		d. Comments			
(include city, state,	=		1	Oddianaca Committee I ii		us comments			
Pay Pal	z.p/		1						
				Level Registered (Specify)					
				Federal	County;	1			
				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			
1	auto w/d	С		10-1-14	\$1.03	service charge			
			$\dashv$		r.				
	<u> </u>				\$				
5. Total only thi		•	\$ 1001.53						
	CRO-1310 Pages								
_	line 13a of Detailed Sun	\$ 11,001.20							
-	line 13b of Detailed Sun	,							
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)  7. Purpose Codes (List detailed expenditure code in (h.) above)									
A* - Media B* - Printing C* - Fundraising D - To Another Candidate									
E - Salaries F* - Equipment G - Political Party H* - Holding Public Office Expenses									

O\* - Other

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

CRO-1310

NC State Board of Elections

December 2009

Q\* - Donation to Legal Expense Fund

K\* - Office Expenses

I - Postage

J - Penalties