Disclosure Re	port Cover						Yes No
Use this form for ger	neral report and committee i	nformat	ion, must be	signed	and sub	mitted along with otl	ner detailed forms.
1. Committee Infor	to update information						
a. Full Name	mation						c. ID Number
Teetor for School B	oard						c. 1D Number
	ude City, State and Zip Code)						d. Date Filed
239 Harden St Burlington, NC 272	15						10/21/2014
Burnington, NC 272	13						e. Phone Number
							336-380-6553
2. Report Year	3. Period Start Date (mm/d	ld/yy)	4. Period 1 (mm/dd/yy)	End Da	ite	5. Treasurer Full	Name
2014	07/01/14		10/	18/14		Jeremy Teetor	
6. Type of Committ		9. Typ	e of Report	(0	heck onl	y one type of report	from one category)
Candidate Campa		Munici	THE REPORT OF THE PROPERTY OF THE PARTY OF T		State/Co		Referendum
PAC Independent	Referendum		Organizational			Organizational	Organizational
Expenditure	Joint Fundraiser		Thirty-five day	/		Quarterly	Pre-referendum
Legal Expense Fu			ъ :			F	
7. Type of Fund "Booster Fund"	(if applicable, check one)	님	Pre-primary Pre-election			First Second	Final Supplemental Final
Building Fund		lΗ	Pre-runoff			Third	Annual
			Semi-annual			Fourth	Special
			Mid Year		_ s	Semi-annual	
Other:			Year End			Mid Year	10. Special Report Name
8. Number of Funda	raisars this Danort	lH	Final Special		H	Year End	
o. Number of Fund	aisers this Report		Special			pecial	
11. Account Inform	ation			11. A	ccount I	nformation	
a. Financial Institution F	'ull Name			a. Fina	ncial Insti	tution Full Name	
PNC Bank b. Purpose	a Assessed Code						
manage	c. Account Code			b. Pur	oose		c. Account Code
campaign	1						
cash flow	d. Period Begin Balance						d. Period Begin Balance
	\$ 1,444.58						\$
	1,						4
CERTIFICATION							
the NC General Statu	imittee or Fund is in compli	ance wit	th all applica	ble pro	visions o	of Article 22A, 22B,	& 22D-22M of Chapter 163 of I further certify that this report
	correct and that I have been						i further certify that this report
Jeremy Teet				my	Teston		10/21/2014
	Printed Name of Signer		Si	gnature o	of Appointe	ed Treasurer	Date
FOR OFFICE USE O					1	_	Dallarena Madha d
Date Received:	10-23-14		Employee:			5	Delivery Method Normal Mail
Date Postmarked	ı.		Employees				Registered Mail
Date Fostillarket			Employee:				Hand Delivered
Date Scanned:			Employee:				Electronically Filed
							Signer has not received mandatory training
Date Data Entere	ed:		Employee:				mandatory training
Please Note: This	s form cannot be used to am	end con	nmittee infor	mation	such as	the committee addre	ss, treasurer, assistant treasurer,
	Vou must amend the States	n of boo	oks informati	on, or	account i	nformation.	

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

	ype of Report		3. ID Number
Teetor for School Board 3 rd	Quarter Plus		
Start of Election Cycle: January 1,2	2011	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 1,444.58	\$ 744.58
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 0.00	\$ 0.00
6) Contributions from Individuals	(CRO-1210)	\$ 3,270.62	\$ 6,140.82
7) Contributions from Political Party Committees	(CRO-1220)	\$ 200.00	\$ 200.00
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0.00	\$ 0.00
9) Loan Proceeds	(CRO-1410)	\$ 0.00	\$ 0.00
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$ 0.00	\$ 0.00
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0.00	\$ 0.00
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	\$ 0.00	\$ 0.00
11c) Outside Sources of Income	(CRO-1250)	\$ 0.00	\$ 0.00
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$ 0.00	\$ 0.00
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$ 0.00	\$ 0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11a	l and 11e)	\$ 3,470.62	\$ 6,340.82
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 2,488.17	\$ 2,488.17
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 0.00	\$ 0.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0.00	\$ 0.00
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 0.00	\$ 0.00
15) Loan Repayments	(CRO-1420)	\$ 0.00	\$ 0.00
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$ 0.00	\$ 0.00
17) In-Kind Contributions	(CRO-1510)	\$ 2,300.62	\$ 4,470.82
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16	and 17)	\$ 4,788.79	\$ 6,958.99
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract	line 18)	\$ 126.41	\$ 126.41
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 0.00	
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$ 0.00	
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$ 0.00	
24) Account Transfers Within the Committee	(CRO-1720)	\$ 0.00	
25) Administrative Support	(CRO-1710)	\$ 0.00	\$ 0.00
26) Forgiven Loans	(CRO-1440)	\$ 0.00	\$ 0.00
27) 48-Hour Notice Reports Sum	(CRO-2200)	\$ 0.00	\$ 0.00
28) Contributions to be Refunded	(CRO-1215)	\$ 0.00	\$ 0.00
CRO-1100 NC State Board of Elections		Ψ 0.00	August 200

		m Individuals			Pg	_1 of		Yes	☐ No
CONTRACTOR DESIGNATION OF THE PARTY OF THE P	AND REAL PROPERTY AND ADDRESS OF THE PARTY AND	ividual contributions of	CONTRACTOR DESCRIPTION OF THE PERSON NAMED IN CONTRACTOR DESCRIPTION	or contribution	s unde	er \$50 if form CR	NAME AND ADDRESS OF THE OWNER, WHEN PERSON NAMED IN	THE RESIDENCE PROPERTY OF THE PERSONS ASSESSMENT	
1. Comm	ittee Full Name	(and Fund if applica	ble)				2. ID Nur	nber	
Teetor fo	r School Board					12			
3. Contri	ibutor Informatio	on		Add	Ren	nove			
	ne, Mailing Address	& Phone		b. Job Title/Pro	fession		d. Commen	ts	200 00000
	city, state, & zip)			Field Rep					
Stuart Sm 811 S Th				a Employada N	ama/6n	asiga Field			
	NC 27302			c. Employer's N Coca Cola	ame/Sp	ecine Field			
336-260-				Coca Cola			e. Election S	Sum to Date	
							•	50.00	
	-						\$	50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Description		j. Date (mm/dd/y	ууу)	k. Amount	
	1	Visa				07/19/2	2014	\$	50.00
								\$	
								\$	
3. Contri	butor Informatio	on		Add 🗌	Ren	nove			
	ne, Mailing Address	& Phone		b. Job Title/Pro			d. Commen	ts	
	city, state, & zip)			Assistant Bu	sar				
Jeremy T 239 Hard				- FII-N					
	on, NC 27215			c. Employer's N Elon Univers		ecinc Field	-		
336-380-	A CONTRACTOR OF THE PROPERTY O			Dion Chivers	ity		e. Election S	Sum to Date	
000000									
							\$	4,470.82	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description		j. Date (mm/dd/y	ууу)	k. Amount	
	1	visa	Tim	es News Ad		07/22/2	2014	\$	235.45
	1	visa	Tim	es News Ad		08/04/	2014	\$	261.38
	1	visa	Meb	oane Ent. Ad		08/07/	2014	\$	124.38
3. Contri	butor Informatio	on		Add	Ren	nove			
	ne, Mailing Address &	& Phone		b. Job Title/Pro	ession		d. Commen	ts	
	city, state, & zip)			Retired					
William I 806 Wary				a Emplementa N	IC	-iG-Fi-ld			
	n, NC 27215			c. Employer's N Retired	ame/Spe	ecilic Field			
336-222-				Retired			e. Election S	Sum to Date	
000 222				-			\$	250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Lind Description		j. Date (mm/dd/y	yyy)	k. Amount	
	1	check				08/07/2	2014	\$	250.00
								\$	
								\$	
	only this Pag						\$		921.21
5. Total	of ALL CRO	-1210 Pages					•		2 270 62

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

3,270.62

\$

NAME AND ADDRESS OF THE OWNER, WHEN PERSONS NAMED IN	AND DESCRIPTION OF THE PERSON NAMED IN COLUMN 2 IS NOT THE OWNER.	ividual contributions of (and Fund if applical	COLUMN TO STATE OF THE PARTY OF) or contrib	outions	under \$50 if form C	2. ID Nu	AND DESCRIPTION OF THE PERSON NAMED IN COLUMN 2 IS NOT THE PERSON	
	or School Board	(and rund it applica-	Die)				M. ID IVA	mbei	
	ibutor Informatio			Add		Remove			
	me, Mailing Address	& Phone		b. Job Tit			d. Commer	its	
Constanc	city, state, & zip)			Office N	Manage	r			
	ttoway Terrace			c Employ	ver's Nar	ne/Specific Field	101		
	on, NC 27215			Dr. Will			-		
336-228-				D11 11 22	Hum C.	icii	e. Election	Sum to Date	
							\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Descrip	otion	j. Date (mm/dd/	уууу)	k. Amour	nt
	1	check				08/08/	2014	\$	100.00
								\$	
								\$	
3. Contri	ibutor Informatio	on		Add		Remove			
a. Full Nan	me, Mailing Address	& Phone		b. Job Titl	le/Profes	ssion	d. Commer	its	
	city, state, & zip)			Retired					
Anna Ger									
120 West				-		ne/Specific Field			
Elon, NC 336-584-				Teacher	C .		Flortion	C to Date	
330-304-	1427						е. Елестон	Sum to Date	
							\$	20.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Descrip	otion	j. Date (mm/dd/y	уууу)	k. Amour	nt
	1	check				08/07/	2014	\$	20.00
								\$	
								\$	
3. Contri	ibutor Informatio	on		Add		Remove			
	me, Mailing Address &	& Phone		b. Job Titl			d. Commen	its	
	city, state, & zip)			Assistan	nt Bursa	ar			
Jeremy T				7. 1		10 10 11			
239 Hard	on, NC 27215			Elon Un		ne/Specific Field			
336-380-				Elon On	nversity	y	a Flection	Sum to Date	
330-360-	0000								
	T		T.,,			1.2	\$	4,470.82	
f. Prior	g. Account Code	h. Form of Payment		Kind Descript	tion	j. Date (mm/dd/y		k. Amour	
	1	visa	-	boards		08/17/		\$	1,267.50
	1	visa	Door	r Hangers		09/12	/2014	\$	411.91
								\$	
	l only this Pag						\$		1,799.41
	l of ALL CRO						\$		3,720.62
(This line	e must be on line 6 of	Detailed Summary Page C.	RO-1100))					

Contributions from Individuals

		m Individuals		Pg		Particular and Partic	Yes	
		ividual contributions (and Fund if applica		0 or contributions un	der \$50 if form CI	The second liverage in the second	AND DESCRIPTION OF PERSONS ASSESSED.	
	or School Board	(ана ғина п арриса	ible)			2. ID Nu	imber	
700000000000000000000000000000000000000								
DUDNIEZO SERVIZACIO	ributor Informati				emove			
	me, Mailing Address	& Phone		b. Job Title/Profession	1	d. Comme	nts	
Steve Va	e city, state, & zip)			Retired				
	ndview Dr			c. Employer's Name/S	manifia Field			
	, NC 27253			Principal	pectite Field			
336-570				Timelpai		e. Election	Sum to Date	
						\$	250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
	1	check			08/27/	2014	\$	250.00
							\$	
							\$	
3. Contr	ributor Informati	on		Add Re	move			
	me, Mailing Address			b. Job Title/Profession		d. Comme	nts	
(include	city, state, & zip)			Attorney	VARIATION CONTRACTOR C			
James Jo	hnson							
1241 So	uth Fifth St A-1			c. Employer's Name/S	pecific Field			
	NC 27302			Law Offices of:				
919-563	-2117			James Hunt Johns	on	e. Election	Sum to Date	
						\$	50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
	1	visa			09/06/2	2014	\$	50.00
							\$	
							\$	
3. Contr	ibutor Informatio	on		Add Re	move			
a. Full Na	me, Mailing Address	& Phone		b. Job Title/Profession		d. Commer	nts	
	city, state, & zip)			Veterinarian				
Sharon K								
	Millston Dr			c. Employer's Name/S	pecific Field			
	on, NC 27215			DSK Petcare, Inc.				
336-227-	-9979					e. Election	Sum to Date	
						\$	150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
	1	visa			09/13/2	2014	\$	150.00
							\$	
							\$	
4. Tota	l only this Pag	e				\$		450.00
	l of ALL CRO					\$		3,270.62
(This lin	e must be on line 6 of	Detailed Summary Page C	RO-1100)				

Description of the later of the	NAME AND ADDRESS OF THE OWNER, WHEN PERSON AND ADDRESS OF THE OWNER, W	ividual contributions		0 or contributions un	der \$50 if form CF			
1. Comn	nittee Full Name	(and Fund if applica	ble)			2. ID Nu	mber	
Teetor fo	or School Board							
3. Contr	ibutor Informati	on		Add 🔲 Re	emove			
a. Full Na	me, Mailing Address	& Phone		b. Job Title/Profession	1	d. Commen	nts	
	city, state, & zip)			Retired				
Janice Pl								
1742 Ro				c. Employer's Name/S	Specific Field			
	on, NC 27217			Professor				
336-228-	-8382					e. Election	Sum to Date	
						\$	50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
	1	visa			09/19/2	2014	\$	50.00
							\$	
							\$	
CHECKE HOUSE WATER	ibutor Informatio			Add Re	emove			
a. Full Nai	me, Mailing Address	& Phone		b. Job Title/Profession	1	d. Commen	its	
	city, state, & zip)			Retired				
Karen H	•							
1929 Ma				c. Employer's Name/S	pecific Field			
the second control of	on, NC 27215			Elon University				
336-227-	8317					e. Election	Sum to Date	
						\$	50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
	1	check			09/29/2	2014	\$	50.00
							\$	
							\$	
3. Contr	ibutor Informatio	on		Add Re	move			
a. Full Nar	ne, Mailing Address &	& Phone		b. Job Title/Profession		d. Commen	ts	
(include	city, state, & zip)							
				c. Employer's Name/S	pecific Field			
						e. Election S	Sum to Date	
						\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-le	Kind Description	j. Date (mm/dd/yy	ууу)	k. Amount	
							\$	
							\$	
							\$	
	only this Page					\$		100.00
5. Total	of ALL CRO	-1210 Pages				\$		3,720.62
(This line	e must be on line 6 of l	Detailed Summary Page C	RO-1100)		Ψ		3,120.02

Contributions from Individuals

Amendment

Yes

Contributions from Political Party Committees

Amendment

g 1 of 1 Yes No

Use this form to report contributions from a political party

1. Committee Ful		2. ID Number						
Teetor for School		and the state of t						
3. Contributor In	formation		Add	Rei	move			
a. Full Name, Mailing (include city, state,	& zip)					b. Con	nments	
PO Box 1815	en of Alamance Coun	ty						
Burlington, NC 2	7216					c. Elec	tion Sum to	Date
						\$	200.00	
d. Account Code	e. Form of Payment	f. In-Kind Descrip	otion		g. Date (mm/dd/yyy	yy)	h. Amoun	t
1	check			 	09/07/2	2014	\$ 20	00.00
				 			\$	
							\$	
3. Contributor In			Add	Rei	move			
a. Full Name, Mailing						b. Con	nments	
(include city, state,	& Др)					c. Elec	tion Sum to	Date
						\$		
d. Account Code	e. Form of Payment	f. In-Kind Descrip	tion		g. Date (mm/dd/yyy	/y)	h. Amoun	1
				 			\$	
	,						\$	-
							\$	
3. Contributor In	formation		Add	Rer	nove			
a. Full Name, Mailing (include city, state,						b. Con	nments	
						c. Elec	tion Sum to I	Date
		1		 		\$		
d. Account Code	e. Form of Payment	f. In-Kind Descrip	tion		g. Date (mm/dd/yyy	y)	h. Amount	t
							\$	
							\$	
							\$	
4. Total only th						.\$	200.00	
	L CRO-1220 Page n line 7 of Detailed Summa					\$	200.00	

Use this form to	report expenditures coordinated party ex	from the committe	e f	or; operating expens	ses,	contributions to	candida	ate/political
THE RESIDENCE OF THE PERSON NAMED IN COLUMN 2 IS NOT THE PERSON NA	ull Name (and Fun	Assessment of the last of the						2. ID Number
Teetor for Scho								
3. Type of Disb	ursement (Plea	se use separate C	RO	-1310 forms for each	ch ty	pe of Disbursen	nent.)	
Operating E	xpenses	Contributions to Can	dida	ates/Political Committees	S	☐ Co	ordinate	d Party Expenditures
4. Payee Inform	ation		A	dd [Remove		
a. Full Name, Maili	ng Address & Phone		b.	Coordinated Committe	ee Na	me	d. Co	mments
(include city, state,	& zip)							
Williams Athlet								
1307 S. Church			c.	Level Registered (Spec	ify)			
Burlington, NC	27215			Federal		County:		
336-570-6161				State		Municipality:	e. Ele	ection Sum to Date
							\$ 2	250.00
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)		j. Amount	k. Re	quired Remarks
1	check	A		07/21/2014		\$250.00	prog	ram ad
	CHECK	A	_	07/21/2014		\$250.00		
						\$		
4. Payee Inform	ation		A	dd [Remove		
a. Full Name, Maili	ng Address & Phone		b.	Coordinated Committe	ee Na	me	d. Co	mments
(include city, state,	& zip)							
Western Athleti	c Boosters							
1731 N NC Hig	-		c.	Level Registered (Speci	ify)			
Elon, NC 27244				Federal		County:		
336-538-6020			L	State		Municipality:	e. Ele	ection Sum to Date
							\$	150.00
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)		j. Amount	k. Re	quired Remarks
1	check	A		08/05/2014		\$150.00	prog	ram ad
			7			\$	1	
					- 115550			
4. Payee Inform			A			Remove		
	ng Address & Phone		b.	Coordinated Committe	ee Na	me	d. Co	mments
(include city, state,								
EAHS All Sport		-	1000	I 1 D 1 (6 1			-	
4040 Mebane R Mebane, NC 27		}	c.	Level Registered (Speci Federal	11y)	Country	-	
919-563-5991	302		F	State	╡	County: Municipality:	o Flo	ection Sum to Date
717-303-3771		ŀ		J State		Municipanty.		
							\$ 1	150.00
f. Account Code	g. Form of Payment	h. Purpose Code	_	i. Date (mm/dd/yyyy)		j. Amount		quired Remarks
1	check	A		08/06/2014		\$150.00	bann	er
						\$		
5. Total only thi	s Page						\$	550.00
	CRO-1310 Pages							
(This line goes in	line 13a of Detailed Sun	mary Page CRO-1100	if C	(perating Expenses)			•	2 400 17
	line 13b of Detailed Sun		- 5			1.50	\$	2,488.17
	line 13c of Detailed Sum	THE RESIDENCE OF THE PERSON NAMED IN COLUMN 2 IS NOT THE OWNER, THE PERSON NAMED IN COLUMN 2 IS NOT THE OWNER,	DESCRIPTION	CONTRACTOR DE LA CONTRA	ıditur	res)		
	es (List detailed exp							
A* - Media E - Salaries	B* - Printing	C* - Fund				D - To Anoth		
I - Postage	F* - Equipment J - Penalties	G - Politica K* - Office						Office Expenses
O* - Other	William Control of the Control of th					- Donatio		9
* Codes magnin	detailed evalence	on in uponiused up	-	ulso field (le)				

Disbursements

Amendment

of <u>4</u>

Pg

Yes

Disbursem				Pg		of <u>4</u>	Yes		No
Use this form to	report expenditures	from the committ	ee for; operating exp	penses,	, contributions	to candid	date/political		
	coordinated party ex	THE RESIDENCE PROPERTY AND ADDRESS OF THE PERSON NAMED IN							
Teetor for Scho	full Name (and Fun	d if applicable)					2. ID Numbe	r	
3. Type of Disb		and una namanata (PO 1210 frames fra	, ,	ton a CDistan	()			
Operating E	The state of the s		CRO-1310 forms for ndidates/Political Commi		ype of Disbur	THE RESERVE AND ADDRESS OF THE PERSON.	ted Party Expenditure	ac	
4. Payee Inform	The state of the s		Add		Remove	Coordinat	ed I arty Expenditure	.5	
	ing Address & Phone		b. Coordinated Comm	nittee N		d. C	Comments		
(include city, state,									100000000000000000000000000000000000000
Alamance Serto	oma Club		1						
1550 E Little Jo			c. Level Registered (S	pecify)					
Burlington, NC	27217		Federal		County:				
336-227-0804			State		Municipality:	e. E	lection Sum to Date		
						\$	40.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yy	уу)	j. Amount	k. R	equired Remarks		Villa in the
1	check	0			640.00		ndidate		
1	CHECK	0	09/04/2014		\$40.00	Din	iner		
					\$				
4. Payee Inform	ation		Add		Remove				
	ing Address & Phone		b. Coordinated Comm	nittee N		d.C	omments		
(include city, state,						100	Omnens		
The Alamance I									
114 W Elm St			c. Level Registered (S	pecify)					
Graham, NC 27	253		Federal		County:				
336-228-7851			State		Municipality:	e. El	lection Sum to Date		
						\$	250.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yy)	yy)	j. Amount	k. R	equired Remarks		
1	check	A					vertising		
1	CHECK	A	09/18/2014		\$250.00				
					\$				
4. Payee Inform	ation		Add		Remove				
	ng Address & Phone		b. Coordinated Comm	nittee N		d. C	omments		
(include city, state,									
	men of Alamance		-						
PO Box 1815	uman w	9	c. Level Registered (S	pecify)					
Burlington, NC	27216		Federal		County:				
			State		Municipality:	e. El	ection Sum to Date		
						\$	25.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyy	yy)	j. Amount	k. R	equired Remarks		
1	check	О	09/18/2014		\$25.00		didate		
						Din	ner		
	-				\$				
5. Total only thi	s Page					\$	315.00		
	CRO-1310 Pages								
	line 13a of Detailed Sum					\$	2,488.17		
	line 13b of Detailed Sum		5		,	•	2,100.17		
THE RESIDENCE PARTY AND ADDRESS OF THE PARTY A	line 13c of Detailed Sum es (List detailed exp	THE RESIDENCE PROPERTY AND ADDRESS OF THE PERSON NAMED IN COLUMN TWO PERSONS NAMED IN COLUMN TRANSPORT NAMED IN COLUMN TWO PERSONS NAMED IN COLUMN TRANSPORT N	THE RESERVE AND ADDRESS OF THE PARTY OF THE	penditu	res)				
A* - Media	B* - Printing	C* - Fund			D - To An	other Can	didate		
E - Salaries	F* - Equipment	G - Politic					c Office Expenses		#185W
I - Postage	J - Penalties		e Expenses				egal Expense Fun		
O* - Other * Codes require	e detailed explanati	on in required re	marks field (k)						

Disbursements

Use this form to	report expenditures coordinated party ex	from the committ	tee for; operating expenses	s, contributions to	candidate/political
	Full Name (and Fun				2. ID Number
Teetor for Scho		u it applicable)			2. ID Number
3. Type of Disb	ursement (Plea	ise use separate (CRO-1310 forms for each	type of Disbursen	nent.)
Operating E			ndidates/Political Committees		pordinated Party Expenditures
4. Payee Inform	nation		Add	Remove	
a. Full Name, Maili	ing Address & Phone		b. Coordinated Committee N	Name	d. Comments
(include city, state,	& zip)				
Times-News					
PO Box 481			c. Level Registered (Specify)	,	
Burlington, NC	27215		Federal	County:	
336-506-3062			State	Municipality:	e. Election Sum to Date
					\$ 1,001.13
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check	A	09/26/2014	\$803.13	advertising
1	check	A	10/08/2014	\$198.00	advertising
4. Payee Inform	nation		Add \square	Remove	
	ing Address & Phone		b. Coordinated Committee N		d. Comments
(include city, state,					
Mebane Enterpr					
106 N Fourth St			c. Level Registered (Specify)		
Mebane, NC 27	302		Federal	County:	-
919-563-3555			State	Municipality:	e. Election Sum to Date
		-			\$ 373.14
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check	A	10/10/2014	\$373.14	advertising
				\$	
4. Payee Inform	ation		Add	Remove	
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee N	lame	d. Comments
(include city, state,					
Southern Alama					. 0
631 Southern Hi			c. Level Registered (Specify)]
Graham, NC 272	253	1	Federal	County:	
336-570-6400		1	State	Municipality:	e. Election Sum to Date
					\$ 200.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check	A	10/18/2014	\$200.00	banner and program ad
				\$	
5. Total only thi	s Page			\$	\$ 1,574.27
	CRO-1310 Pages			\$	\$ 1,574.27
6. Total of ALL (This line goes in	CRO-1310 Pages line 13a of Detailed Sum				,
6. Total of ALL (This line goes in the Company of t	CRO-1310 Pages line 13a of Detailed Sum line 13b of Detailed Sum	mary Page CRO-1100) if Contrib to Candidates/Politic	ical Comm)	\$ 1,574.27 \$ 2,488.17
6. Total of ALL (This line goes in the Community of the C	CRO-1310 Pages line 13a of Detailed Sum line 13b of Detailed Sum line 13c of Detailed Sum	nmary Page CRO-1100 nmary Page CRO-1100) if Contrib to Candidates/Politic) if Coordinated Party Expenditi	ical Comm)	,
6. Total of ALL (This line goes in a (This line goes in a (This line goes in a 7. Purpose Code	CRO-1310 Pages line 13a of Detailed Sum line 13b of Detailed Sum line 13c of Detailed Sum es (List detailed exp	nmary Page CRO-1100 nmary Page CRO-1100 penditure code in (0 if Contrib to Candidates/Politic 0 if Coordinated Party Expenditu (h.) above)	ical Comm) ures)	\$ 2,488.17
6. Total of ALL (This line goes in a (This line goes in a (This line goes in a 7. Purpose Code A* - Media	CRO-1310 Pages line 13a of Detailed Sum line 13b of Detailed Sum line 13c of Detailed Sum es (List detailed exp B* - Printing	amary Page CRO-1100 amary Page CRO-1100 penditure code in (C* - Fund	Oif Contrib to Candidates/Politic Oif Coordinated Party Expendita (h.) above) Iraising	ical Comm) ures) D - To Anothe	\$ 2,488.17 er Candidate
6. Total of ALL (This line goes in a (This line goes in a (This line goes in a 7. Purpose Code A* - Media E - Salaries	CRO-1310 Pages line 13a of Detailed Sum line 13b of Detailed Sum line 13c of Detailed Sum es (List detailed exp B* - Printing F* - Equipment	umary Page CRO-1100 umary Page CRO-1100 penditure code in (C* - Fund G - Politic	O if Contrib to Candidates/Politic O if Coordinated Party Expenditu (h.) above) Iraising al Party	ical Comm) ures) D - To Anothe H* - Holding	\$ 2,488.17 er Candidate Public Office Expenses
6. Total of ALL (This line goes in a (This line goes in a (This line goes in a 7. Purpose Code A* - Media	CRO-1310 Pages line 13a of Detailed Sum line 13b of Detailed Sum line 13c of Detailed Sum es (List detailed exp B* - Printing	umary Page CRO-1100 umary Page CRO-1100 penditure code in (C* - Fund G - Politic	Oif Contrib to Candidates/Politic Oif Coordinated Party Expendita (h.) above) Iraising	ical Comm) ures) D - To Anothe H* - Holding	\$ 2,488.17 er Candidate

Pg

Disbursements

Amendment

Yes

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/p committees and coordinated party expenditures.	political
committees and coordinated party expenditures.	
1 Committee Full Name (and Full 19 19 11)	
1. Committee Full Name (and Fund if applicable) Teetor for School Board	ID Number
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)	
Operating Expenses Contributions to Candidates/Political Committees Coordinated Part	ty Expenditures
4. Payee Information Add Remove	ey Emperiumures
a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comme	ents
(include city, state, & zip)	
Pyrix, Inc.	
144 2nd St. 1st Floor San Francisco, CA 94105 c. Level Registered (Specify) Federal County:	
1 000 (40 0000	Sum to Date
\$ 24.90	0
	ed Remarks
1 ETF O 10/18/2014 \$24.90 Processin	ng Fees
\$	
4. Payee Information Add Remove	
a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comme	nts
(include city, state, & zip)	
PNC Bank 832 S Main St c. Level Registered (Specify)	
832 S Main St Graham, NC 27253 c. Level Registered (Specify) Federal County:	
	Sum to Date
\$ 24.00	0
f. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required	d Remarks
1 ETF O 10/18/2014 \$24.00 Bank Fee	es
\$	
4. Payee Information	
a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Commer	nts
(include city, state, & zip)	
c. Level Registered (Specify)	
Federal County:	
State Municipality: e. Election	Sum to Date
\$	
f. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required	d Remarks
\$	
\$	***************************************
5. Total only this Page \$ 48	8.90
6. Total of ALL CRO-1310 Pages	0.90
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)	400 17
(This the goes in the 150 of Detailed Summary Fage CKO-1100 if Control to Canadades/Foutical Comm)	,488.17
(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	
I - Postage J - Penalties K* - Office Expenses Q* - Donation to Legal E	
O* - Other * Codes require detailed explanation in required remarks field (k)	

Disbursements

Amendment

In-Kind Contributions			1	Pg <u>1</u> of	1	Yes No
Use this form to report non-monetary co Use CRO-1215 if In-Kind Contributions	ntributions, des	onations, g be refunde	goods or serviced within 7 day	ces provided to the	e comr	nittee or fund.
1. Committee Full Name (and Fund if					2. ID	Number
Teetor for School Board				-		
3. Contributor Information	Add		Remove			
a. Full Name, Mailing Address & Phone			b. Type of C	Contributor	c. Con	nments
(include city, state, & zip)				vidual		
Jeremy Teetor			Can	didate		
239 Harden St			Party	•		
Burlington, NC 27215			PAC			
336-380-6553				erendum	d. Ele	ction Sum to Date
			Othe	er Receipt Source	\$	4,470.82
e. Description				f. Date (mm/dd/yy	уу)	g. Fair Market Amount
Times News Ad				07/22/2014	4	\$ 235.45
Times News Ad				08/04/201	4	\$ 261.38
Mebane Enterprise Ad				08/07/201	4	\$ 124.38
3. Contributor Information	Add		Remove			
a. Full Name, Mailing Address & Phone			b. Type of C	Contributor	c. Con	nments
(include city, state, & zip)				vidual		
Jeremy Teetor				didate		
239 Harden St			Party			
Burlington, NC 27215			PAC			
336-380-6553				erendum	d. Ele	ction Sum to Date
			Othe	er Receipt Source	\$	4,470.82
e. Description				f. Date (mm/dd/yy	yy)	g. Fair Market Amount
Fairway Outdoor Billboards				08/17/2014	4	\$ 1,267.50
Door Hangers				09/12/201	4	\$ 411.91
						\$
3. Contributor Information	Add		Remove			
a. Full Name, Mailing Address & Phone			b. Type of C		c. Con	nments
(include city, state, & zip)				vidual		
				didate		
			Party PAC			
				erendum	d Flo	ction Sum to Date
				er Receipt Source	u. Ele	cuon Sum to Date
					\$	
e. Description				f. Date (mm/dd/yy	уу)	g. Fair Market Amount
						\$
					-	\$
						\$
4. Total only this Page					\$	2,300.62
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Sumn	nary Page CRO-	1100)			\$	2,300.62

In-Kind Contributions