Disclosure Report Cover	Disc	losure	Report	Cover
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Amendment	
☐ Yes	No No

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

1. Committee Information								
a. Full Name					c. ID Number			
WHITNEY FOR CLERK								
. Mailing Address (include City, State and Zip Code) d. Date Filed								
1514 BROADU		4/20/14						
GRAHAM, NC	e. Phone Number							
	~ (0)			-	336.693.7531			
2. Report Year 3. Period Start	Date (mm/dd/yy)	,			er Full Name			
2014 01/01/1	4	04/10	• •	CARIE	WHITNEY BARBOUR			
6. Type of Committee (Check O	PARTY OF THE PROPERTY OF THE PROPERTY OF	ype of Repo icipal	ort (check only one State/County		ort from one category) Referendum			
Candidate Campaign Party PAC Refer		Organizational	Organiza		Organizational			
		Thirty-five day			Pre-referendum			
Legal Expense Fund		Pre-primary	Firs		Final			
		Pre-election	Seco		Supplemental Final			
7. Type of Fund (if applicable, o	Charles and the same and the sa	Pre-runoff	This Fou		Annual Special			
☐ Booster Fund☐ Building Fund	l-	Semi-annual Mid Year			— Брестат			
Dunuing Fund	IH	Year End		i Year	10. Special Report Name			
Other:		Final		ar End	•			
8. Number of Fundraisers this l	Report	Special	Final					
Ø			☐ Special					
11. Account Information		SECTION CONTRACTOR OF THE PERSON OF T	11. Account Infor	Management Appears to the second				
a. Financial Institution Full Name			a. Financial Institution	n Full Name				
BB&T								
b. Purpose	c. Account Code		b. Purpose		c. Account Code			
CAMPAKEN ACCOUNT	1							
	d. Period Begin Bal	ance			d. Period Begin Balance			
	\$ 0.00				\$			
CERTIFICATION								
I certify that the Committee or Fun	nd is in compliance	with all appli	cable provisions of A	rticle 22A, 22	2B & 22D-22M of Chapter 163			
of the NC General Statutes and that	at no funds are com	mingled with	prohibited or other n	on-disclosed f				
report is complete, true and correc	t and that I have be	en trained by	the NC State Board of	of Elections.				
Caria Int. 1 T	Zarlania	Ca.	: 12 Rala	i N	4/28/14			
Carie Whitney	<u>Sarbour</u>	Sign	nature of Appointed Tre	asurer	Date			
FOR OFFICE USE ONLY	1	Sig	or rappointed He		Sano Sano			
Date Received:	1-28-14	Employ	ree: OH	<u>De</u>	elivery Method			
Date Received.		Linploy	100		Normal Mail			
Date Postmarked:	44	Employ	/ee:	- k	Registered Mail Hand Delivered			
Date Scanned:		Employ	ree:	_ =	Electronically Filed			
Date Data Entered:		Employ	/ee:		Signer has not received mandatory training			
Please Note: This form ca	innot be used to a	mend comm	ittee information su	ich as the coi				
assistant	t treasurer, custod	lian of books	s information, or ac	count inform	nation.			
You must amend	the Statement of	Organizatio	n (CRO-2100A-E) t	to make com	mittee changes.			

CRO-1000

NC State Board of Elections

August 2008

Amendment

Yes

No.

Use this form to summarize all disclosure reporting forms and to total monetary information 3. ID Number 1. Committee Full Name (and Fund if applicable) 2. Type of Report WHITNEY FOR 51 WUARTERLY Total this Total this Start of Election Cycle: January 1, **Election Cycle** Reporting Period 4) Cash on Hand at Start RECEIPTS 5) Aggregated Contributions from Individuals (CRO-1205) \$ 750,00 \$ S 6) Contributions from Individuals (CRO-1210) S 7) Contributions from Political Party Committees (CRO-1220) \$ S 8) Contributions from Other Political Committees (CRO-1230) S (CRO-1410) S \$ 9) Loan Proceeds (0) Refunds/Reimbursements to the Committee (CRO-1240) 11) Other Receipt Sources \$ (CRO-1250) 11a) Interest on Bank Accounts \$ 11b) Contributions from Not-For-Profit Organizations (CRO-1250) S (CRO-1250) S 11c) Outside Sources of Income S 11d) Legal Expense Fund - Other Sources (CRO-1270) \$ \$ (CRO-1265) \$ 11e) Exempt Purchase Price Sales OD 12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e) EXPENDITURES 13) Disbursements (CRO-1310) 13a) Operating Expenditures \$ 1,038,00 1,038.00 S S 13b) Contributions to Candidates/Political Committees (CRO-1310) 13c) Coordinated Party Expenditures \$ (CRO-1310) 14) Aggregated Non-Media Expenditures (CRO-1315) \$ S \$ (CRO-1420) \$ 15) Loan Repayments \$ (CRO-1320) \$ 16) Refunds/Reimbursements from the Committee S S 17) In-Kind Contributions (CRO-1510) 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) S 038.W 038.00 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) ω Z. 00 ADDITIONAL INFORMATION (CRO-1330) \$ 20) Non-Monetary Gifts Given to Other Committees 21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430) S 22) Debts and Obligations owed by the Committee (CRO-1610) S (CRO-1620) \$ 23) Debts and Obligations owed to the Committee 24) Account Transfers Within the Committee (CRO-1720) \$ (CRO-1710) S S 25) Administrative Support 26) Forgiven Loans (CRO-1440) \$ 27) 48-Hour Notice Reports Sum (CRO-2220) \$ \$ (CRO-1215) \$ 28) Contributions to be Refunded \$

Contributions from Individuals

				_	Amendment	
Contributions from Individuals	Pg		of	<u>3</u>	☐ Yes	No.
Use this form to report individual contributions over \$50 or contributions	under	r \$50 if	form	CRO	1205 is not us	ed

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Contributions from Individuals

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

1. Com	mittee Full Nam	e (and Fund if appl	icable)				2. ID Number			
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3. Cont	ributor Informa	ntion		Add	Ren	nove				
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Contributions from Individuals

Pg <u>3</u> of <u>3</u> Amendment No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used 2. ID Number 1. Committee Full Name (and Fund if applicable) WHITNEY FOR Add Add Remove 3. Contributor Information b. Job Title/Profession a. Full Name, Mailing Address & Phone d. Comments (include city, state, & zip) ATTORNEY /PARTNER MATTHEW C. SUCZYNSKI 19036 STONE BROOK MATTHEW CHARCES CHAPEL HILL, NC 27517 e. Election Sum to Date LAW FIRM 50.00 j. Date (mm/dd/yyyy) k. Amount f. Prior h. Form of Payment i. In-Kind Description g. Account Code s 50,00 CASH ♂ \$ S ☐ Add ☐ Remove 3. Contributor Information b. Job Title/Profession d. Comments a. Full Name, Mailing Address & Phone (include city, state, & zip) c. Employer's Name/Specific Field e. Election Sum to Date f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount S S 3. Contributor Information Add ☐ Remove . Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) c. Employer's Name/Specific Field e. Election Sum to Date k. Amount f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) S \$ S 4. Total only this Page 5D, 00 \$ 5. Total of ALL CRO-1210 Pages

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

1,750,00

					Amendmen	t	
Disbursements	Pg		of	1	☐ Yes	Ø №	
Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political							

	ull Name (and Fund					2. I	D Number		
	EY FOR C	LERK							
3. Type of Disb		use separate CR	O-1310	forms for e	ach type of Disb	urs <u>eme</u> i	<u>ut.)</u>		
Operating Expo	enses	ributions to Candida	tes/Politic	al Committees	Coo	dinated P	arty Expenditures		
4. Payee Inform			M	Add	Remove				
a. Full Name, M	ailing Address & Pho	one		b. Coordinate	d Committee Name	d. C	Comments		
(include city, state,	& zip)								
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A* - Media	B* - Printi			undraising	D - To	Another	Candidate		
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