Amendment

Disclosure Report Cover

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.

Be not use time	ionn to apaate	miloination.		Aller and the second second	and the state of the state of					
1. Committee In	formation									
a. Full Name								c. ID Number		
WHITNEY FO	R CLERK CO	MMITTEE								
b. Mailing Addre	ss (include Cit	y, State and Zip	Code)					d. Date Filed		
1514 BROADV GRAHAM, NC								01/11/2015		
GRAHAM, NC	21233							e. Phone Number		
								(336) 570-1761		
2. Report Year	3. Period Star	t Date (mm/dd/y	y)	4. Period End Date (mm/dd/yy) 5. Treas u			5. Treasur	er Full Name		
2014	10	0/19/2014			12/31/2	2014	CARIE W	HITNEY BARBOUR		
6. Type of Comn	nittee (Check C	ne)	9. Typ	e of Report	(cl	heck only one	type of rep	ort from one category)		
X Candidate Can	npaign 🔲 Par	ty	Munic	ipal		State/County		Referendum		
☐ Joint Fundraise	er 🔲 PAG	C		Organizatio	nal	Organizatio	nal	☐ Organizational		
Referendum	☐ Leg	gal Expense Fund		Thirty-five	day	Quarterly		Pre-referendum		
7. Type of Fund	town 1	le, check one)		Pre-primary	5	☐ First		Final		
"Booster Fund	THE PARTY OF STREET, S	e, encen one)		Pre-election		Second		Supplemental Final		
☐ Building Fund			H	Pre-runoff		Third		Annual		
The same of the sa	V C	P.L. P. I	Ц							
_	ection Year Can	S-Dilly of Assessment Company (Assessment Company)	_	Semi-annua		Fourth		☐ Special		
■ NC Public Can	npaign Financing	Fund		Mid Ye		Semi-annua	-			
				Year E	nd	☐ Mid Ye		10. Special Report Name		
Other:				Final		Year E	nd			
8. Number of Fu	ndraisers this	Report		Special		☐ Final				
8. Number of Fundraisers this Report 0						☐ Special				
3. Account Infor	mation				3. Acc	ount Informat	ion			
a. Financial Insti	itution Full Na	m e			a. Fina	ncial Institutio	on Full Nam	i e		
BRANCH BAN	IKING & TRU	JST			PAYP	AL, INC.				
b. Purpose		c. Account Cod	e		b. Purj	pose		c. Account Code		
CAMPAIGN			1		ONLI	NE CONTRIE	BUTIONS	2		
		d. Period Begin	Balan	ce				d. Period Begin Balance		
		\$ 1,292.	68					\$		
CERTIFICATIO	N									
Chapter 163 o	f the NC Gener	ral Statutes and this report is co	that no	funds are true and c	commi orrect a	ngled with pro	hibited or or been train	22A, 22B & 22D-22M of other non-disclosed ed by the NC State Board 01/11/2015 Date		
FOR OFFICE U		-Biror		9.6.	0.5749.8		300000			
TOR OFFICE U	OE OILLI	1 1	-			1	D-	livery Method		
Date Receive	ed:	11121201	5	Emplo	yee: .	U	- 🖺	Normal Mail		
Date Postma	rked:		_	Emplo	yee:		- 🖺	Registered Mail Hand Delivered		
Date Scanne	ed:						_ 🗆	☐ Electronically Filed		
Date Data E	ntered:			Emplo	yee:		_ 🗖	Signer has not received mandatory training		
	assistai	annot be used nt treasurer, cus	stodian	of books i	nforma	tion, or accour	nt in formati	9		

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 Re	_		D Nui	nber
WHITNEY FOR CLERK COMMITTEE	2014 Fourth	Quarter		_	
Start of Election Cycle: January 1, 2011		1	otal this	Ð	Total this lection Cycle
4) Cash on Hand at Start	-	\$	1,292.68	\$	0.00
RECEIPTS			<u> </u>		
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	0.00	\$	0.00
6) Contributions from Individuals	(CRO-1210)	\$	466.38	\$	5,064.96
7) Contributions from Political Party Committees	(CRO-1220)	\$	0.00	\$	300.00
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		1438	il mark		
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
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	0.00	\$	0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9.10,11a,11b,11c,	11d and 11e)	\$	466.38	\$	5,364.96
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$	475.30	\$	3,807.62
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)	\$	1,241.92	\$	1,241.92
17) In-Kind Contributions	(CRO-1510)	\$	41.38	\$	314.96
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15	, 16 and 17)	\$	1,758.60	\$	5,364.50
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18)	\$	0.46	\$	0.46
ADDITIONAL INFORMATION				lar carety	The state of the s
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)	\$	484.60	糠	
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-2220)	\$	0.00	\$	0.00
28) Contributions to be Refunded CRO-1100 NC State Board	(CRO-1215)	\$	1,141.92	\$	1,141.92 August 2008

Contributions from Individuals

Pg 1 of 3 Amendment

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		
WHIT	NEY FOR CLER	K COMMITTEE						
3. Conti	ributor Informati	on		Add 🔲 Rei	move			
	Name, Mailing Ade			b. Job Title/Pr	ofession	d. C	Comments	
(inclu	ide city, state, & z	ip)		ATTORNEY				
	JA A LEE			<u> </u>		1		
	NE FOREST DR			c. Employer's Name/Specific Field				
	CITY, NC 2734	.4			TLLIAMS, ROPER	F	Dection Sum to Date	
(919) 2	545-1164			& LEE	!			
					!	\$	150.0)0
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	cription	j. Date (mm/dd/yyyy)		k. Amount	\equiv
	1	Cash			10/22/2014		\$ 50.0)0
	1	Check			10/22/2014		\$ 100.0)0
							\$	_
	ributor Informati			Add 🔲 Rei	move			
	lame, Mailing Ado			b. Job Title/Pre	ofession	d. C	Comments	
(inclu	ide city, state, & z	ip)		ATTORNEY				
	JOANN G MACK					Į		
	ITEITH CT		!		Name/Specific Field			
	AM, NC 27713		I	JOANN G. MACK, ATTORNEY AT LAW			Dection Sum to Date	
(919) s '	08-1849		I	ATTORNEY	AT LAW	e. E	16 CHOR SUM TO DATE	
			1			\$	125.0)0
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	cription	j. Date (mm/dd/yyyy)		k. Amount	
X	<u> </u>	Check			09/11/2014		\$ 100.0)0
							\$	
							\$	
	ributor Informati				move			
	lame, Mailing Ado		ļ	b. Job Title/Pro	ofession	d. C	Comments	
	de city, state, & z	ip)		ATTORNEY				
	N G MACK		ļ	- Employarie	Name/Specific Field			
	TEITH CT		ļ			1		
	AM, NC 27713 08-1849		ļ	JOANN G. M ATTORNEY		e. E	Dection Sum to Date	_
(212) 5	00-10-7			ATTOMALI	ALLAW			
, 1		T	T			\$	125.0)()
	g. Account Code	h. Form of Payment	i. In-Kind Desc	cription	j. Date (mm/dd/yyyy)		k. Amount	
	l ⊢	Check			12/01/2014		\$ 125.0)0
	<u></u>			7-1-7			\$	
	<u> </u>						\$	
4. <u>Tota</u>	al only this Pa	ge	 "	_		\$	275.0	0
5. Tota	al of ALL CR	O-1210 Pages				\$	1666	
	(This line must be on line 6 of Detailed Summary Page CRO-1100)						466.3	8

Contributions from Individuals

				Amendme	ent
Pg	2	of	3	· Yes	F 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		
WHIT	NEY FOR CLER	K COMMITTEE							
3. Cont	ributor Informati	on		Add	☐ Rei	move			
a. Full N	lame, Mailing Ado	lress & Phone	-	b. Job T	itle/Pr	ofession	d. Comments		
(inclu	de city, state, & z	ip)		ASSISTANT DISTRICT					
	EY L NIEMAN			ATTO	RNEY	(C) 10 E(11			
	OODBURY DR			-		Name/Specific Field			
	BOROUGH, NC	27278		1		IORTH	e. Election Sum to Date		
(919) 3	60-5651			CARO	LINA		-		
							\$		50.00
f. Prior	 -	h. Form of Payment	i. In-Kind Des	cription	•	j. Date (mm/dd/yyyy)		k. Amount	
	2	Electric Funds Tran				10/20/2014		\$	50.00
								\$	
								\$	
	ibutor Informati			Add	Rei	nove			
a. Full N	ame, Mailing Add	lress & Phone		b. Job T	itle/Pr	ofession	d. (Comments	
(include city, state, & zip)				ATTO	RNEY				
C TODD ROPER						V 10 40 57 11	Į		
1160 SILK HOPE - LINDLEY MILL ROAD				c. Employer's Name/Specific Field			ĺ		
SILER CITY, NC 27344				1	•	ILLIAMS, ROPER	e F	Dection Sum t	n Date
(919) 842-2020				& LEE				accion sum i	
							\$		50.00
f. Prior	g. Account Code		i. In-Kind Des	cription		j. Date (mm/dd/yyyy)		k. Amount	
	1	Cash				10/22/2014		\$	50.00
								\$	
								\$	
	ibutor Informatio			Add [☐ Rer	nove			
	ame, Mailing Add						d. C	d. Comments	
	de city, state, & zi	p)		EDUC/	AOITA	1			
	V C SIMPSON	202 001110		a Emple	na nia 3	Name/Specific Field			
	IMBERLY WOO ORD, NC 27330	DDS DRIVE			•				
	21-7869			l		AROLINA Y COLLEGE	e. F	Dection Sum t	o Date
(212) 1	2. 7007			COMIN	IONII	1 COLLEGE	\$		50.00
f. Prior	g Account Code	h. Form of Payment	i. In-Kind Desc	rintion		j. Date (mm/dd/yyyy)		k. Amount	
	I I	Check	THE TAILED EST						
						12/01/2014		\$	50.00
								\$	
								\$	
4. Total only this Page					\$		150.00		
	al of ALL CR(ine must be on line (D-1210 Pages 5 of Detailed Summary P	age CRO-1100)				\$		466.38

\sim	. • 1			w 14	
(`nn	itribi	ifions.	trom	Indiv	viduals

				Amendme	ent,
Pg	3	of	3	Yes	No.

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

1. Comm	ittee Full Name		2. ID Number				
WHITN	EY FOR CLER	K COMMITTEE					
3. Contr	ibutor Informati	on		Add 🔲 Ren	move		
a. Full Na	ame, Mailing Add	dress & Phone		b. Job Title/Pro	ofession	d. Comme	ents
(inclu	le city, state, & z	ip)		ASSTANT D	ISTRICT		
NORMA	AN M WHITNE	Y JR		ATTORNEY			
1514 BI	ROADWAY DR	IVE		c. Employer's I	Name/Specific Field		
GRAHAM, NC 27253				STATE OF N	IC		
(336) 570-1761					e. Election Sum to Dat		
						\$	491.96
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)	k. Am	ount
		In-Kind	WEBSITE WWW.VOTE	WHITNEY.OR	10/27/2014	\$	29.00
		In-Kind	FACEBOOK	BOOST	10/31/2014	\$	12.38
	-					\$	
4. Tota	l only this Pa	ge				\$	41.38
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$	466.38

CRO-1210

NC State Board of Elections

April 2007

\mathbf{T}						
1)	IS	hı	irs	e	ne	nts

				Amendme	ent
Pg	<u>l</u>	of	_1_	Yes	₩. No

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

1. Committee F	ull Name (and Fund	if applicable)						2. ID Nu	mber
WHITNEY FO	R CLERK COMMI	TTEE							
3. Type of Disbu	irsement (Please	use separate CR(D-1310	forms for eac	lı type	of Disbu	rseme	ent.)	
X Operating Exp	penses	ributions to Candidat	tes/Polit	ical Committees		Coc	ordinat	ed Party E	xpenditures
4. Payee Inform	ation			Add 🔲	Remo	ve			
a. Full Name, M	ailing Address & Ph	one		b. Coordinate	d Com	mittee Na	am e	d. Comm	ents
(include city, sta	ite, & zip)								
	TDOOR ADVERT	ISING, LLC				0 10 1		1	
1920 WEST LE				c. Level Regis		County:		-	
GREENSBORG				State	F			e Flectio	n Sum to Date
(336) 292-4242				3					
								\$	370.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Am	ount	k. Re	quired Re	marks
1	Check	A	1	0/23/2014	\$	370.00	BILI	LBOARD)
					\$				
4. Payee Inform	ation			Add 🔲	Remo	ve			· · · · · · · · · · · · · · · · · · ·
a. Full Name, Ma	ailing Address & Ph	one		b. Coordinate	d Com	mittee Na	a m e	d. Com m	ents
(include city, sta	te, & zip)								
PAYPAL, INC.								1	
2211 N. IST ST					tered (Specify) County:			
ŀ	SAN JOSE, CA 95131 (408) 376-7400				-	Municip		e Dectio	on Sum to Date
[(408) 376-7400 [State		_ ividitoip	anty.	c. Eccur	a Sum to Date
								\$	21.38
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Am	ount	k. Re	quired Re	marks
2	Electric Funds Tran	0	10	0/20/2014	\$	15.40	TRA	NSACTI	ON FEE
					\$				
4. Payee Inform	ation	•		Add 🔲	Remo	ve	•		
a. Full Name, Ma	ailing Address & Ph	one		b. Coordinate	d Com	mittee Na	ım e	d. Com m	ents
(include city, sta	te, & zip)		··		•				
VISTAPRINT (USA, INC.								
95 HAYDEN A				c. Level Regis				_	
LEXINGTON,	MA 02421			☐ Federal ☐ State		County:		a Floatia	n Sum to Date
				state		Municip	aniy.	e. Electio	in Sum to Date
								\$	89.90
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	mm/dd/yyyy)	j. Am	ou n t	k. Re	quired Re	marks
1	Debit Card	В	10	0/27/2014	\$	89.90	PAL	M CARE	os
					\$				
5. Total only thi	е Рода							\$	475.30
								: Д	473.30
	CRO-1310 Pages		1100 '					!	
	n line 13a of Detailed S n line 13b of Detailed S					Dollston I C		\$	475.30
	n line 13c of Detailed S		-				omm)		
	odes (List detailed				<u>, , , , , , , , , , , , , , , , , , , </u>				
A* - Media	B* - Printin			undraising		D - To	Anot	her Candi	date
E - Salaries	F* - Equipm	_		litical Party					Office Expenses
I - Postage	J - Penaltie			Office Expenses	S				d Expense Fund
O* Other								_	
* Codes require	e detailed explanatio	n in required ren	ıarks f	ield (k)					

				- Amendmo	en t	_
Refunds/Reimbursements From the Committee	Pg	 of	2	Yes	\mathbf{Q}'	No

Use this form to report refunds/reimbursements, including contributions returned to the contributor

1. Committee Full	Name (and Fund if ap	plicable)			2. II	D Number	
WHITNEY FOR	CLER	COMMITTE	Е					
3. Payee Informati	ion			Add Re	move			
a. Full Name, Mail		ress & Phone		d. Type of Comm	ittee	g. C	omments	
(include city, sta	te, & zi	p)		☐ Candidate	PAC			
JOANN G MACI	<u> </u>			Referendum	Party			
7 MONTEITH C	Γ			e. Level Register				
DURHAM, NC 2	27713			Federal	County:	09/11/2014		
(919) 308-1849				☐ State	Municipality:			
						i. O	riginal Receipt Amount	
						\$	100.00	
b. Job Title/Profession c. Employer's Name/Specific Field				f. Purpose Code		j. Đ	ection Sum to Date	
ATTORNEY JOANN G. MACK, ATTORNEY AT LAW			L		\$	125.00		
k. Account Code	l. Form	of Payment	m. Required Remar	ks	n. Date (mm/dd/y	ууу)	o. Amount	
1	Check				12/02/2014		\$ 100.00	
•					12/02/2014		. 100.00	
3. Payee Informati					move			
a. Full Name, Mail	-			d. Type of Comm		g. C	omments	
(include city, sta	te, & zi	p)		Candidate	PAC			
NORMAN M WI	HITNEY	Y JR		Referendum	☐ Party			
1514 BROADWAY DRIVE			c. Level Register		h. O	riginal Receipt Date		
GRAHAM, NC 2	27253			☐ Federal	County:		11/02/2014	
(336) 570-1761				☐ State	Municipality:			
						i. 0	riginal Receipt Amount	
<u></u>						\$	233.92	
b. Job Title/Profess	ion	c. Employer's N	Same/Specific Field	f. Purpose Code		j. Đ	ection Sum to Date	
ASSTANT DISTRICT ATTORNEY		STATE OF NC		Р		\$ 291.		
k. Account Code	l. Form	of Payment	m. Required Remar	ks	n. Date (mm/dd/y	yyy)	o. Amount	
1	Check		FACEBOOK POST BO	OOSTS	12/16/2014		\$ 233.92	
3. Payee Informati	ion			Add ☐ Rei	move		<u> </u>	
a. Full Name, Mail		ress & Phone		d. Type of Comm	ittee	g. C	omments	
(include city, sta				☐ Candidate	□ PAC		_	
NORMAN M WI	HTNE	/ IR		Referendum	☐ Party	•		
1514 BROADWA				e. Level Register	red (Specify)	h. Original Receipt Date		
GRAHAM, NC 2		. –		☐ Federal	County:	10/20/2014		
(336) 570-1761				☐ State	☐ Municipality:			
						i. 0	riginal Receipt Amount	
						\$	850.00	
b. Job Title/Profess	ion	c. Employer's N	lame/Specific Field	f. Purpose Code		j. E	ection Sum to Date	
ASSTANT DISTRICT ATTORNEY	-	STATE OF NC	-	Р		\$ 291.96		
k. Account Code	l. Form	of Payment	m. Required Remar	·ks	n. Date (mm/dd/y)	yyy)	o. Amount	
Check LAMAR BILLBOARD)	11/24/2014	· · · · ·	\$ 850.00			
4. Total only this Page							1,183.92	
5. Total of ALL C		0 Pages				\$		
(This line must be on line 15 of Detailed Summary Page CRO-1100)						1,241.92		
			sement code in (f) al					
ļ	L - Returned to Contributor M - Overpayment for Service N - Exceeded Contibution Limit							
i	P* - Reimbursement of In-Kim O* Other * Codes require detailed explanation in required remarks field (m)							

					Am e n dm e	
Refunds/Reimbursements From the Committee	Pg	2	of	2	Yes	▼ No

Use this form to report refunds/reimbursements, including contributions returned to the contributor

	•	_	enents, including et	ontinoutions retur	nea to the contine	_		
1. Committee Full Name (and Fund if applicable)							D Number	
WHITNEY FOR	CLERE	СОММІТТЕ	Œ		·			_
			<u> </u>					
3. Payee Informat	ion			Add 🔲 Rei	move			
a. Full Name, Mailing Address & Phone				d. Type of Committee			omments	
(include city, state, & zip)				☐ Candidate	PAC			
NORMAN M WHITNEY JR				Referendum	☐ Party			
1514 BROADW				e. Level Register	red (Specify)	h. O	riginal Rec	eipt Date
GRAHAM, NC				Federal	County:		11/27/2	1014
(336) 570-1761	41400			State	Municipality:		11/2//2	,014
(330) 370-1701				 :	i. 0	riginal Rece	ipt Amount	
					s		58.00	
			4.5		i. Election Sum to Date			
b. Job Title/Profes:		 	Name/Specific Field	f. Purpose Code		J. Mection Sum to Date		
ASSTANT DISTRIC' ATTORNEY	Γ	STATE OF NC		Р				291.96
k. Account Code	l. Form	of Payment	m. Required Remai	ks	n. Date (mm/dd/y	yyy) o. Amount		
1	Check		WEBSITE WWW.VO	TEWHITNEY.ORG	12/31/2014		\$	58.00
4. Total only this Page						\$		58.00
5. Total of ALL CRO-1320 Pages (This line must be on line 15 of Detailed Summary Page CRO-1100)						\$	-	1,241.92
6. Purpose Cod	es (List	detailed disbur	sement code in (f) a	bove)				
L - Returned to Contributor M - Overpayment for Service N - Exceeded Contibution Limit								
P* - Reimburse	ment of	f In-Kinc O* (Other					
* Codes require	e detaile	d explanation i	n required remarks	s field (m)				
CRO-1320				rd of Elections				July 2007

In-Kind Contributions Use this form to report non-monetary contributions		g 1 of		Amendm	☑ No
Jse CRO-1215 if In-Kind Contributions were or			to the cor	innietee or	iuiių.
. Committee Full Name (and Fund if applicabl			2. ID	Number	
WHITNEY FOR CLERK COMMITTEE					
3. Contributor Information	☐ Add ☐ Re	emove	<u> </u>		
. Full Name, Mailing Address & Phone	b. Type of Cor	atri butor	c. Con	ıments	
(include city, state, & zip)	🔀 Individual				
NORMAN M WHITNEY JR	☐ Candidate				
1514 BROADWAY DRIVE	☐ Party				
GRAHAM, NC 27253	☐ PAC				
(336) 570-1761	Referendur		d. Dec	tion Sum	to Date
	Other Rece	ipt Source	\$		491.96
. Description		f. Date (mm/c	ld/yyyy)	g. Fair M	arket Amount
WEBSITE WWW.VOTEWHITNEY.ORG		10/27/20	014	\$	29.00
FACEBOOK BOOST		10/31/20	n14	S	12.38

CRO-1510 NC State Board of Elections December 2007

\$

\$

41.38

41.38

4. Total only this Page

5. Total of ALL CRO-1510 Pages
(This line must be on line 17 of Detailed Summary Page CRO-1100)

			tee Page 1 ofository or credit accounts.		
Contract of the last of the la	ee Full Name (and Fund			2. ID Num	ber
WHITNEY	FOR CLERK COMM	ITTEE			
3. Transfer	Information				
a. Amend	b. Account Code Transferred From	c. Account Code Transferred To	d. Date (mm/dd/yyyy)	e. Amount	
Add Remove	2	1	10/20/2014	\$	484.60
4. Total o	only this Page			\$	484.60
SAME TO SERVE THE RESERVE OF THE SERVE OF TH	of ALL CRO-1720 I	Pages led Summary Page CRO-110	70)	\$	484.60
CRO-1720		NC State Board o	f Elections		December 2007

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U.O	ntrii	oution	S TO	ne	Keim	nurse	N:

				Amendme	ent /
Pg	_1_	of	_1_	Yes	☑ N

Use this form to report Contributions under \$1,000 which will be refunded within 7 days. Refunds must be disclosed on the Refunds/Reimbursements Form (CRO-1320).

1. Committee Full Name				2. II	D Num	ber
WHITNEY FOR CLERK COMMITTEE						
3. Contributor Information		Add 🔲 Re	move			
Full Name & Mailing Address of the Payee		Full Name &	Mailing Address	s of	the Re	imbursee
(the original vendor)		(the person to	whom the camp	aign	<u>check</u>	is written)
NORMAN M WHITNEY JR	AN M WHITNEY JR NORMAI					
1514 BROADWAY DRIVE			DWAY DRIVE			
GRAHAM, NC 27253		GRAHAM, N	IC 27253			
a. Contribution Description	b. Date	(m m/dd/yyyy)	c. Credit Card	Y/N	d. Am	ount
LAMAR COMPANIES BILLBOARD	1	0/20/2014	N		\$	850.00
3. Contributor Information		Add 🔲 Re	move			
Full Name & Mailing Address of the Payee Full Name & Mailing Address of the Reimbursee						imbursee
(the original vendor)		(the person to	whom the camp	aign	check	is written)
NORMAN M WHITNEY JR	İ		WHITNEY JR			
1514 BROADWAY DRIVE			DWAY DRIVE			
GRAHAM, NC 27253		GRAHAM, N	IC 27253			
a. Contribution Description	b. Date	(mm/dd/yyyy)	c. Credit Card Y	Y/N	d. Am	ount
FACEBOOK POST BOOSTS	1	1/02/2014	N		\$	233.92
3. Contributor Information		Add Re	move			
Full Name & Mailing Address of the Payee		Full Name & 1	Mailing Address	s of 1	the Rei	mbursee
(the original vendor)		(the person to	whom the campa	aign	check	is written)
NORMAN M WHITNEY JR		NORMAN M	WHITNEY JR			
1514 BROADWAY DRIVE 1514 BROADWAY DRIVE						
GRAHAM, NC 27253		GRAHAM, NC 27253				
a. Contribution Description	b Date	(m m/dd/yyyy)	c. Credit Card	Z/N	d. Am o	ount.
WHITNEY FOR CLERK WEBSITE	1					
WITH TOR CEER WEBSITE	I	1/27/2014	N		\$	58.00
4. Total only this Page				\$		1,141.92
5. Total of ALL CRO-1215a Pages (This line goes in line 28 of Detailed Summary Page	CRO-11	00)		\$		1,141.92
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CRO-1215

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