Disclosure Re	eport Cove	r	10	-27-14)8:32	RC7	J	Am	endment Yes 🔀 No
Use this form for ge	neral report and	d committee i	informat	ion, must be	signed	and sub	mitted along with	other	detailed forms.
Do not use this form		rmation							
1. Committee Info	rmation								
a. Full Name								c.	. ID Number
Committee To Re-I	Elect Tony Rose	e For School	Board 						4D4JU3
b. Mailing Address (inc		nd Zip Code)						d	, Date Filed
1706 Stratford Roa Burlington, NC 272									10/27/2014
								e.	. Phone Number
									336-214-3512
2. Report Year	3. Period Star	rt Date (mm/c	ld/yy)	4. Period l (mm/dd/yy)	End Da	te	5. Treasurer F	ull Na	me
2014	07/	/01/2014		10/1	8/2014		Anthony G. Ro	se	
6. Type of Commit	tee (Check One	e)	9. Typ	e of Report	(c	heck on	ly one type of rep	ort fro	m one category)
Candidate Camp	aign 🔲 Part	y	Municip			State/C	ounty	R	Referendum
PAC	Refe	erendum		Organizational		🗆 🕠	Organizational		Organizational
Independent Expenditure Legal Expense F	_	t Fundraiser		Thirty-five day	,	,	Quarterly		Pre-referendum
7. Type of Fund	(if applicable, c	heck one)	1 🗆	Pre-primary		П	First	Г	Final
"Booster Fund"	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· · · · · ·	1Ħ	Pre-election		Ħ	Second		Supplemental Final
Building Fund				Pre-runoff		\boxtimes	Third		Annual
				Semi-annual			Fourth		Special
				Mid Year			Semi-annual		
Other:				Year End			Mid Year	1	0. Special Report Name
0.34			∤	Final			Year End		
8. Number of Fund	raisers this Re	eport	<u> </u>	Special			Final		
			<u> </u>				Special		
11. Account Inform				<u>.</u>			Information		<u>.</u>
a. Financial Institution				·	a. Finai	ncial Inst	itution Full Name		
State Employees' C		ınt Code			b. Purp	nee.		[c. Account Code
b. Purpose Campaign	c. Accou	III Cout			0.1 ui p	ose			C. Account Code
Campaign		1		,					
	d. Perio	d Begin Balane	e					-	d. Period Begin Balance
	\$ 33	52.82							\$
CERTIFICATION	[
I certify that the Cou the NC General Stat is complete, true and	utes and that no	funds are co	mmingl	ed with proh	ibited o	r other:	non-disclosed fur	2B, & 2 nds. I fi	22D-22M of Chapter 163 of urther certify that this report
Anthony G		2 0 0 0 0		•	mode	<i></i>	be	10/2	27/2014
	Printed Name of	of Signer		Si	ignature d	Appoint	ted Treasurer		Date
FOR OFFICE USE (1.	<u></u>	T~ 1	1' k 4 - 4 l 1
Date Received:	_10:	-27-14		Employee:			<u> </u>	Del	livery Method Normal Mail
Date Postmarke	ed:	.		Employee:				図	Registered Mail Hand Delivered
Date Scanned:				Employee:		•			Electronically Filed Signer has not received
Date Data Ente	red:			Employee:					mandatory training
			-		_				

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Amendment

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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

1. Committee Full Name (and Fund if applicable)	2. Type of Report	rt 3. ID Number					
Committee To Re-Elect Tony Rose For School Board	Organizational		4D4JU3				
Start of Election Cycle: January 1,	2011	Total this	Total this				
4) Cash on Hand at Start		Reporting Period \$ 3352.82	S 0.00				
RECEIPTS	Ve-2001#80942045						
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 2629.00	\$ 3674.00				
6) Contributions from Individuals	(CRO-1210)	\$ 3969.52	\$ 6542.79				
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$				
8) Contributions from Other Political Committees	(CRO-1230)	\$ 250.00	\$ 250.00				
9) Loan Proceeds	(CRO-1410)	\$	\$				
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$	\$				
11) Other Receipt Sources		建 加速分出的其外。					
11a) Interest on Bank Accounts	(CRO-1250)	\$ 1.60	\$ 1.91				
11b) Contributions from Not-for-Profit Organizat	ions <i>(CRO-1250)</i>	\$	\$				
11c) Outside Sources of Income	(CRO-1250)	\$	\$				
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	\$				
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$				
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 1	Ic, 11d and 11e)	\$ 6850.12	\$ 10,468.70				
EXPENDITURES	Marie Candoniero	的是是是					
13) Disbursements		PARTICIPATION OF THE PARTICIPA	At a second contract of				
13a) Operating Expenditures	(CRO-1310)	\$ 9205.53	\$ 9413.02				
13b) Contributions to Candidates/Political Comm	ittees (CRO-1310)	\$	\$				
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$				
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$				
15) Loan Repayments	(CRO-1420)	\$	\$				
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	\$				
17) In-Kind Contributions	(CRO-1510)	\$ 370.27	\$ 428.54				
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14.	15, 16 and 17)	\$ 9575.80	\$ 9841.56				
19) Cash on Hand at End (Add lines 4 and 12 together, then su	btract line 18)	\$ 627.14	\$ 627.14				
ADDITIONAL INFORMATION			Walter Andreas				
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	A STATE OF THE STA				
21) Outstanding Loans (incl. ones from other campaig	gns) (CRO-1430)	\$	LA CANADA DE CAN				
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$					
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$					
24) Account Transfers Within the Committee	(CRO-1720)	\$					
25) Administrative Support	(CRO-1710)	\$	\$				
26) Forgiven Loans	(CRO-1440)	\$	\$				
27) 48-Hour Notice Reports Sum	(CRO-2200)	\$	\$				
28) Contributions to be Refunded	(CRO-1215)	\$	\$				

Page

of

Yes 🖂

Amendment

No

1. Committee Full Name (and Fund if applicable)							2. ID Number			
			For School Board				4D4JU3			
3. C	ontributor Inform	nation								
a. An		b. Account Code	c. Form of Payment	d. In-Kind Description	c. Date (mm/dd/yyyy)	f	, Amount			
	Add Remove	- 1	PayPal		07/02/20		\$ 50.00			
	Add Remove	- 1	PayPal		07/07/20	14	\$ 50.00			
<u></u>	Add	1	PayPal		07/07/20	14	\$ 50.00			
	Remove Add	<u> </u>	PayPal		07/07/20	14	\$ 50.00			
	Remove Add	- 1	Check		07/09/20	14	\$ 50.00			
	Remove				07/17/20		\$ 50.00			
	Remove	- 1	Cash			_				
	Add Remove	1	Cash		07/17/20	14	\$ 50.00			
	Add Remove	1	Cash		07/24/20	14	\$ 50.00			
	Add Remove	1	Check		07/24/20	14	\$ 30.00			
	Add	1	Check		07/25/20	14	\$ 25.00			
	Add	1	Check		07/25/20	14	\$ 50.00			
	Remove Add	1	Check		07/25/20	14	\$ 25.00			
	Remove Add		Check		07/26/20	14	\$ 50.00			
	Remove Add	1								
	Remove	1	Check		07/27/20	14	\$ 30.00			
	Add Remove	1	Check		10/01/20	14	\$ 50.00			
	Add Remove	1	Check		07/28/20	14	\$ 10.00			
F	Add Remove	1	Check		07/30/20	014	\$ 25.00			
	Add	1	Cash		08/05/20)14	\$ 50.00			
	Remove Add	1	Cash		08/05/20)14	\$ 50.00			
	Remove Add	1	Cash		08/05/20)14	\$ 50.00			
	Remove Add				08/05/20		\$ 50.00			
	Remove Add	- 1 	Cash			+				
崮	Remove	1	Cash		08/05/20		\$ 50.00 945.00			
4. Total only this Page						\$				
	Total of ALL					\$ 2629.00				
(T	uts line must be on li	ne 5 of Detailed S	Summary Page CRO-1100)							

Page

<u>2</u> of

Amendment Yes

No

	mmittee Full Na	2. ID Number					
Com	mittee To Re-Ele	ect Tony Rose	For School Board				4D4JU3
3. Co	ntributor Infori	mation					
a. Ame	end	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy	<u>)</u>	f. Amount
	Add Remove	1	Cash		08/05/20)14	\$ 50.00
	Add Remove	1	Cash		08/05/20)14	\$ 50.00
	Add Remove	1	Check		08/07/20)14	\$ 25.00
	Add Remove	- 1	Cash		08/07/20)14	\$ 10.00
	Add	- 1	Check		08/13/20)14	\$ 25.00
	Remove Add	1	Cash	_	08/13/20)14	\$ 10.00
	Remove Add	1	Check		08/22/20		\$ 25.00
	Remove Add		Check		08/22/20		\$ 50,00
	Remove Add	1					
	Remove Add	1	Check		08/22/20		\$ 50.00
	Remove	1	Check		08/22/20)14	\$ 50.00
	Add Remove	- 1	Check		08/22/20)14	\$ 50.00
	Add Remove	- 1	Cash		08/22/20)14	\$ 50.00
	Add Remove	- 1	Cash		08/22/20)14	\$ 50.00
	Add Remove	- 1	Check		08/23/20)14	\$ 50.00
	Add Remove	1	Check		08/23/20)14	\$ 50.00
<u> </u>	Add Remove	1	Check		08/23/20)14	\$ 50.00
	Add Remove	- 1	Check		08/23/20)14	\$ 50.00
	Add Remove	1	Check		08/23/20)14	\$ 10.00
	Add	- 1	Cash		08/24/20)14	\$ 20.00
	Remove Add	- 1	Check		08/26/20	014	\$ 50.00
	Remove Add	1	Check		08/26/20)14	\$ 50.00
	Remove Add	- 1	Cash		08/29/20		\$ 20.00
	Remove	<u></u>	Casii		00/29/20	\$	845.00
4. Total only this Page 5. Total of ALL CRO-1205 Pages							J.D.00
			'ages ummary Page CRO-1100)			\$	2629.00

Page

3 of

Amendment

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No

1. Committee Full Name (and Fund if applicable)							2. ID Number			
			For School Board			4D4JU3				
3. Con	tributor Inforn	nation					· <u>-</u>			
a. Amen		b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount			
	Add Remove	1	Check		08/29/20	14	\$ 40.00			
	Add	- 1	Check		09/01/20	14	\$ 25.00			
	Remove Add		Check		09/02/20	14	\$ 25.00			
	Remove Add	1					:			
	Remove	1	Cash		09/06/20	14	\$ 20.00			
	Add Remove	1	Cash		09/06/20	14	\$ 20.00			
	Add Remove	- 1	Check		09/10/20	14	\$ 50.00			
	Add Remove	1	PayPal		09/13/20	14	\$ 49.00			
	Add Remove	1	PayPal		09/14/20	14	\$ 50.00			
	Add	1	Cash		09/14/20	14	\$ 20.00			
	Add	1	Check		09/20/20	114	\$ 50.00			
	Remove Add	1	Cash		09/21/20	114	\$ 50.00			
	Remove Add	1	Cash		09/21/20)14	\$ 50.00			
	Remove Add				09/24/20		\$ 50.00			
	Remove Add	1	Check							
	Remove	- 1	Check		10/01/20) 4	\$ 50.00			
	Add Remove	1	Check		10/03/20)14	\$ 20.00			
	Add Remove	1	Cash		10/05/20)14	\$ 20.00			
	Add Remove	1	Check		10/06/20)14	\$ 50.00			
	Add Remove	- 1	Check		10/06/20)14	\$ 25.00			
	Add Remove	1	Check		10/08/20)14	\$ 50.00			
	Add	- 1	Check		10/08/20)14	\$ 50.00			
	Add	1	Check		10/10/20	014	\$ 20.00			
	Remove Add	1	Cash		10/12/20)14	\$ 5.00			
4. Total only this Page						\$	789.00			
5. Total of ALL CRO-1205 Pages										
			ummary Page CRO-1100)			\$	2629.00 			

Page

of

Amendment

☐ Yes
☐

V

	e Full Name (and Fun	2. II	2. ID Number					
	To Re-Elect Tony Rose		4D4JU3					
3. Contribut	tor Information							
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount			
Add		PayPal		10/18/2014	\$ 50.00			
=	nove	ļ ,						
Add					\$			
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Add	1				\$			
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Ad	d				\$			
Ren	move							
Ad					\$			
	move							
Ad					\$			
	move							
Ad					\$			
	nly this Page		<u> </u>	\$	50.00			
	5 Tr. 1 CALL CDO 1205 Degree							
	f ALL CRO-1205 I ust be on line 5 of Detailed S	\$	2629.00					

Contributions from Individuals

				Amei	ıament		
Pg	_1	of	8_		Yes	\boxtimes	No

se this form to report individu	al contributions over \$50 c	r contributions under \$50	if form CRO 1205 is not used
---------------------------------	------------------------------	----------------------------	------------------------------

1. Commi	ittee Full Name (a	and Fund if applical	le)					2. ID Number			
Committe	e To Re-Elect Ton	y Rose For School B	oard						4D4JU3		
3. Contril	butor Information	n		Add		Rem	ove]	
a, Full Nam	e, Mailing Address &	Phone		b. Job Title/Profession				d. Comment	s		
(include o	city, state, & zip)			Owner							
Deva Ree	ce										
3005 Wes	ton Ct.			c. Employer's Name/Specific Field							
Burlington, NC 27215				Sir Spe	edy Pr	inting					
								e. Election S	um to Date		
336-538-0	0656							\$	100.00		
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		_			08/01/20	014	\$	100.00	
									\$		
									\$		
3. Contri	butor Informatio	n		Add		Rem	ove				
	e, Mailing Address &			b. Job Tit	le/Prof	ession		d. Commen	s		
	city, state, & zip)			Pro Bas	seball						
John McK				l							
1529 Cha	rleigh Court			c. Employ	yer's Na	me/Spe	cific Field				
Elon, NC	27244			Miami Marlins							
								e. Election S	Sum to Date		
								\$	100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Descrip	otion		j. Date (mm/dd/yy	<u> </u>	k. Amount	10000	
	1	Check					08/01/2	014	\$	100.00	
									\$		
									\$		
3. Contri	butor Informatio	n		Add		Rem	ove				
a. Full Nam	ie, Mailing Address &	Phone		b. Job Ti	tle/Prof	ession		d. Commen	ts		
(include	city, state, & zip)			Owner							
David Ste	ein										
5837 Lau	rel Ridge Road				<u> </u>		cific Field	_			
Snow Car	mp, NC 27349			IFC Pe	diatric	S				-	
								e. Election S	Sum to Date		
336-570 - 0	0577							\$	200.00		
f. Prior	g. Account Code	h. Form of Payment	i, In-k	Kind Deseri	ption		j. Date (mm/dd/yy	ууу)	k. Amount		
	1	Check					08/07/2	014	\$	200.00	
									\$		
								-	\$		
	only this Pag						<u>.</u>	\$		400.00	
	of ALL CRO	-1210 Pages Detailed Summary Page	^RO_110	9)			·	\$		3969.52	
(This lin	e musi de on line o oj	Detailed Summary Fuge	710-110L	<i>''</i>				!			

5. Total of ALL CRO-1210 Pages

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

Amendment

\$

3969.52

		n Individuals				Pg	_2 of	8_	Yes	No No
		vidual contributions o		or contri	bution	under	\$50 if form CRO) 1205 is no	t used	
1. Comm	ittee Full Name (and Fund if applicat	le)					2. ID Num	ber	
Committe	ee To Re-Elect Tor	ny Rose For School B	oard						4D4JU3	
3. Contri	butor Informatio	n		Add		Remo	ove			
a. Full Nam	ie, Mailing Address &	Phone		b. Job Title/Profession				d. Comments	5	
	city, state, & zip)			Retired	ı					
Grover Ta										
	Iaury Arch			c. Emplo	yer's Na	me/Spec	rific Field			
Burlingto	n, NC 27215			N/A						
								e. Election S	um to Date	
336-227-0	6730							\$	250.00	
f. Prior	g. Account Code	h. Form of Payment	i In-K	ind Descri	ntion	1	j. Date (mm/dd/yy		k. Amount	
[]			1. 1.1-1.	ma Desert	prion	-	<u> </u>		-	250.00
	1	Check					08/10/20		\$	250.00
						·,-,···			\$	
									\$	
3. Contri	butor Informatio	n		Add		Rem	ove	·		
a. Full Nam	ne, Mailing Address &	Phone		b. Job Ti	tle/Prof	ession		d. Comment	<u>s</u>	
(include	city, state, & zip)			Retired	j					
Jim Hair										
	gecrest Avenue			c. Emplo	yer's Na	me/Spe	rific Field			
Burlingto	n, NC 27215			N/A			:			
								e. Election S	um to Date	
336-226-8	8270							\$	450.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Descri	ption		j. Date (mm/dd/yy	yy)	k. Amount	
	1	Check			<u> </u>		08/13/20		\$	250.00
									\$	
									\$	
3. Contri	butor Informatio	on		Add		Rem	ove			
	ne, Mailing Address &		-=	b. Job Ti	itle/Prof	ession		d. Comment	s	
	city, state, & zip)			Unem	oloyeed					
Pam Thor	mpson									
2222 Dela	aney Drive			c. Emplo	yer's Na	me/Spe	eific Field			
Burlingto	n, NC 27215			N/A						
								e. Election S	um to Date	
336-675	3479							\$	125.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Descri	ption		j. Date (mm/dd/yy	уу)	k. Amount	
	1	Check					08/22/20	014	\$	50.00
									\$	
									\$	
4. Total	only this Page	e.						\$		550.00

April 2007 CRO-1210 NC State Board of Elections

Contributions from Indivi		Pg	<u>3</u> of	8	Yes	No No		
Use this form to report individual contr		or contributions under	r \$50 if form CRC			 1		
1. Committee Full Name (and Fund i	t applicable)		<u>.</u>	2. ID Num	ber			
Committee To Re-Elect Tony Rose For	r School Board				4D4JU3			
3. Contributor Information		Add Rem	ove					
a. Full Name, Mailing Address & Phone	•	b. Job Title/Profession	<u>-</u>	d. Comments	d. Comments			
(include city, state, & zip)		Owner						
Richard Michaud								
1202 Hobbs Road		c. Employer's Name/Spe						
Greensboro, NC 27410		Richard Michaud Co	ompany					
				e. Election Su	ım to Date			
336-297-1202				\$	500.00			
f. Prior g. Account Code h. Form of	Danmont : In I	Kind Description	j. Date (mm/dd/yy	me)	k. Amount			
	rayment 1. 111-18	and Description	08/28/20		\$	500.00		
1 Check			00/20/20		Ψ	500.00		
					\$	_		
					\$			
3. Contributor Information		Add Rem	ove					
a. Full Name, Mailing Address & Phone	•	b. Job Title/Profession		d. Comments				
(include city, state, & zip)		Retired						
Paula James								
1660 Stratford Road		c. Employer's Name/Spe	cific Field					
Burlington, NC 27217		N/A						
				e. Election Su	ım to Date			
336-584-2728				\$	200.00			
f. Prior g. Account Code h. Form of	Payment i. In-k	Lind Description	j. Date (mm/dd/yy	уу)	k. Amount			
l Check			09/02/20	014	\$	200.00		
П					\$			
			1	·	\$			
3. Contributor Information		Add Rem	love					
	<u> </u>	b, Job Title/Profession		d. Comments	•	<u> </u>		
a. Full Name, Mailing Address & Phone (include city, state, & zip)		President		u. Commens	•			
Brent & Tisha Mansfield		1 resident						
4076 Pond Road		c. Employer's Name/Spe	ecific Field	1				
Burlington, NC 27215		Sudden Performance		1				
Burnington, TVC 27210				e. Election Su	ım to Date			
336-584-5668				\$	100.00			
f. Prior g. Account Code h. Form of	Payment i. In-F	Lind Description	j. Date (mm/dd/yy	уу)	k. Amount			
1 Check			09/05/20		\$	100.00		
					\$			
					\$			
4. Total only this Page	<u></u>		l	\$	l	800.00		

\$

3969.52

5. Total of ALL CRO-1210 Pages

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

Contributions from Individuals

Amendment

Pg of 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 Committee To Re-Elect Tony Rose For School Board 4D4JU3 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Retired Judith Bell 1411 Boone Rd, c. Employer's Name/Specific Field Burlington, NC 27217 N/A e. Election Sum to Date 336-584-7607 100.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description k. Amount j. Date (mm/dd/yyyy) \$ 100.00 1 Check 09/09/2014 S П \$ 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Account Exec. Mark Swing 105 Azalea Ct. c. Employer's Name/Specific Field Mebane, NC 27302 Curtis Media Group e. Election Sum to Date 336-684-1556 \$ 400.00 g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount f. Prior 09/10/2014 \$ 100.00 1 Check S 300.00 1 10/03/2014 Check S 3. Contributor Information Add Remove b. Job Title/Profession d. Comments a. Full Name, Mailing Address & Phone Retired (include city, state, & zip) Louise Arena c. Employer's Name/Specific Field 1929 FairWind Dr. N/A Graham, NC 27253 e. Election Sum to Date 703-201-8906 100.00 \$ f, Prior g. Account Code h. Form of Payment i, In-Kind Description j. Date (mm/dd/yyyy) k. Amount \$ 100.00 09/17/2014 i i 1 Check \$ \$ 4. Total only this Page \$ 600.00 5. Total of ALL CRO-1210 Pages \$

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

3969.52

					Amer	ndment		
ontributions from Individuals	Pg	_5	of	8_		Yes	\boxtimes	No
se this form to report individual contributions over \$50 or contribution:	s under	\$50 if for	m CRO	1205 is no	ot used			

1. Comm	. Committee Full Name (and Fund if applicable)							2. ID Number			
Committe	ee To Re-Elect To	ny Rose For School E	oard					4D4JU3	·		
3. Contri	butor Informatio	on		Add [Ren	nove		·			
a. Full Nam	ne, Mailing Address é	& Phone		b. Job Title.	/Profession		d. Comments				
	city, state, & zip)			Entreprer	neur						
Jennifer C											
P.O. Box				c. Employer's Name/Specific Field							
Wilmingt	on, NC 28405			Xpress In	nage, Inc.						
								um to Date			
							s	150.00			
		1	T			1.5.7.		<u> </u>			
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Descripti	on	j. Date (mm/dd/yy	уу)	k. Amount	-		
	1	PayPal				09/26/20	014	\$	150.00		
								\$			
								\$			
3. Contri	butor Informatio	on .		Add [Ren	nove		,			
a. Full Nam	ie, Mailing Address &	& Phone		b. Job Title	/Profession	•	d. Comment	s			
(include	city, state, & zip)			Assistant	Director of	of IS&T					
Anthony	Glenn Rose	,									
1706 Stratford Road				c. Employer	r's Name/Sp	ecific Field					
Burlingto	n, NC 27217			Elon University							
							e. Election S	um to Date			
336-584-2	2728						\$	990.18			
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Descripti	on	j. Date (mm/dd/yy	уу)	k. Amount			
	1	Check				09/30/20	014	\$	489.25		
	1	Electronic	Vista	Print		07/22/2	014	\$	40.28		
	1	Electronic	Vista	Print		07/27/2	014	\$	40.28		
3. Contri	butor Informatio	on .		Add [Ren	nove					
a, Full Nam	e, Mailing Address &	& Phone		b. Job Title	/Profession		d. Comment	s			
(include	city, state, & zip)			Assistant	Director of	of IS&T					
Anthony (Glenn Rose										
1706 Stra	tford Road			c. Employer	r's Name/Sp	ecific Field					
Burlingto:	n, NC 27217			Elon Uni	versity						
							e. Election S	um to Date			
336-584-2	2728						s	990.18			
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Descripti	on	j. Date (mm/dd/yy	yy)	k. Amount			
	1	CheckCard	USP	S Postage		07/31/20	014	\$	16.60		
	1	Electronic	Face	book Ad		07/31/2	.014	\$	30.64		
	1	Electronic	Face	book Ad		08/28/2	014	\$	50.00		
4. Total only this Page							\$		817.05		
	of ALL CRO	-1210 Pages Detailed Summary Page O	ממונ באם	1			\$		3969.52		
t i nis une	e must ne on une o ot .	<i>Delauea Summary Page C</i>	KU-1100	i			i				

C_{α}	mtrib	utions	from	Ind	ivida	ala
t . C	HULLID	unons	irom	Ina	ivian	ais

Amendment Contributions from Individuals

Pg 6 of 8

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

C26 11112 1	orm to report mar	Vidual Continuations C	· • • • • • • • • • • • • • • • • • • •	or contin	outions under	ψυση ποιπι Οικι	J 1205 13 1101			
1. Comm	Committee Full Name (and Fund if applicable)							2. ID Number		
Committe	ee To Re-Elect Tor	ny Rose For School B	oard					4D4JU3		
3. Contri	butor Informatio	n		Add	Rem	ove				
a. Full Nan	ne, Mailing Address &	Phone		b. Job Tit	le/Profession		d. Comments	•		
(include	city, state, & zip)			Assista	nt Director o	f IS&T				
Anthony	Glenn Rose									
1706 Stra	tford Road			c. Employ	er's Name/Spe	cific Field				
Burlingto	n, NC 27217			Elon Ur	niversity			<u>.</u>	_	
							e. Election Su	ını to Date		
336-584-2	2728						\$	990.18		
f. Prior	g. Account Code	h. Form of Payment	i. In-K	 Ind Descrip	otion	j. Date (mm/dd/yy	yy)	k. Amount		
	1	Electronic		book Ad		08/31/20		\$	1.00	
	1	Credit Crd	Vista	VistaPrint 08/05/2			014	\$	75.77	
	1	Electronic	Face	FacebookAd 09/30/2			014	\$	73.09	
3. Contributor Information			-	Add	Rem	ove	1.5		T	
a. Full Name, Mailing Address & Phone					tle/Profession		d. Comments		.1.	
	city, state, & zip)			Retired	 					
Glenn Rose				1						
1810 Wel	llington Road			c. Employ	yer's Name/Spe	cific Field				
	n, NC 27217			N/A					-	
							e, Election Su	ım to Date		
336-584-	9132						\$	92.61		
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Descrip	otion	j. Date (mm/dd/yy	<u> </u> yy)	k. Amount		
	1	Cash	Enve	Envelopes		07/27/20	014	\$	6.41	
	1	Cash	USP	S Stamps		07/28/2	:014	\$	29.40	
	1	Cash	USP	S Stamps		08/28/2	014	\$	6.80	
3. Contri	butor Informatio	n		Add	Rem	ove			<u>,</u>	
a. Full Nan	ne, Mailing Address &	Phone		b. Job Tit	tle/Profession		d. Comments	i		
(include	city, state, & zip)	_,		Preside	nt					
Clark Lin	dley			,			,			
P.O. Box					yer's Name/Spe					
Burlingto	n, NC 27216			Lindley	/ Laboratorie	s, Inc.				
							e. Election St	im to Date		
336-584-	1228						\$	100.00		
f, Prior	g. Account Code	h. Form of Payment	i. In-K	and Descrip	ption	j. Date (mm/dd/yy	yy)	k. Amount		
	1	Check	_			07/28/2	014	\$	50.00	
								\$		
							,	\$	·-	
4. Total	l only this Page	e				\$		242.47		
	of ALL CRO	 -					\$		3969.52	
(This lin	e must be on line 6 of	Detailed Summary Page (CRO-1100)			1			

Use this f	orm to report indi			Pg or contributions unde				⊠ No
1. Comm	ittee Full Name (and Fund if applical	ole)		 	2. ID Num	ber	
Committe	ee To Re-Elect To	ny Rose For School B	oard			4D4JU3		
3. Contri	butor Informatio	n		Add 🗌 Ren	iove			
a. Full Nan	ie, Mailing Address é	& Phone		b. Job Title/Profession		d. Comments	;	
(include	city, state, & zip)			Owner				
David Mo								
-	/ Hill Lane			c. Employer's Name/Sp				
Burlington,NC 27215				David R Moore CL	U &			
226 504 2701				Association		e. Election Su	ım to Date	
336-584-3	3781					\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	and Description	j. Date (mm/dd/yy	yy)	k. Amount	
	1	Check			10/03/2	014	\$	100.00
							\$	
							\$	
3. Contri	butor Informatio	n		Add Ren	nove			
a. Full Nan	ne, Mailing Address &	& Phone		b. Job Title/Profession		d. Comments	3	
(include	city, state, & zip)			Owner				
Judith Co	leman							
P.O. Box	4234			c. Employer's Name/Sp	ecific Field			
Burlingto	n, NC 27215			Coleman Roofing				
						e. Election Su	um to Date	
336-584-6	6710					\$	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			10/08/2	014	\$	200.00
							\$	
							\$	
3. Contri	butor Informatio)n		Add 🗌 Ren	nove			
a. Full Nan	ie, Mailing Address &	& Phone		b. Job Title/Profession		d. Comments	S	
(include	city, state, & zip)			Maintenance Contr	ol Manager			

Burlingt	on, NC 27215			Elon University				
						e. Election	Sum to Date	
336-675	-5346					\$	60.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Lind Description	j. Date (mm/dd/	уууу)	k. Amoun	it
	1	Check			10/06	/2014	\$	60.00
							\$	
							\$	
4. Tota	al only this Pag	(e			_	\$		360.00

e. Employer's Name/Specific Field

\$

3969.52

Paul Holt

140 Random Lane

5. Total of ALL CRO-1210 Pages

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

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					Amer	idment		
Contributions from Individuals	Pg	8	of	8_		Yes	\boxtimes	No
Use this form to report individual contributions over \$50 or contributions	under \$	550 if form	CRO	1205 is no	ot used			

1. Committee Full Name (and Fund if applicable) 2. ID Number Committee To Re-Elect Tony Rose For School Board 4D4JU3 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Retired Dexter Barbee 127 Meadowood Drive c. Employer's Name/Specific Field Burlington, NC 27215 N/A e. Election Sum to Date 336-584-1178 500.00 f. Prior h. Form of Payment g. Account Code i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount 1 Check 10/18/2014 200.00 \$ \$ 3. Contributor Information Add Remove a. 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 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount \$ \$ Ŝ 3. Contributor Information Add Remove a. 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 S f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount \$ \$ \$ 4. Total only this Page \$ 200.00 5. Total of ALL CRO-1210 Pages \$ 3969.52 (This line must be on line 6 of Detailed Summary Page CRO-1100)

Contributions from Other Political Committees

				Amei	nament		
Pg	1	of	1		Yes	\boxtimes	No

Use this form to report contributions from other candidate, referendum or PAC committees

1. Committee Full	. Committee Full Name (and Fund if applicable)							
Committee To Re-	Elect Tony Rose For School Boar	rd						4D4JU3
3. Contributor Inf	ormation		Add		Remo	ve		
a. Full Name, Mailing	Address & Phone		b. Type of	Committee			d. Com	nents
(include city, state, é			\boxtimes	Candidate	[PAC		
Johnson For Sherif		į	<u> </u>	Referendun				
3530 Cardwell Dri			c. Level R	egistered (Sp		County:		
Burlington, NC 27	215			Federal State	L L	Municipality:	e Flecti	on Sum to Date
		ŀ	<u> </u>	State	L	with the state of		
		ļ	i				\$	250.00
f. Account Code	g. Form of Payment	h. In-Kind	Descriptio	n	i.	Date (mm/dd/yyyy))	j. Amount
1	Check					07/07/2014		\$ 250.00
								\$
				_				\$
3. Contributor Inf	ormation		Add		Remo	ve		
a. Full Name, Mailing				f Committee			d. Com	ments
(include city, state, d				Candidate		PAC		-
				Referendur]	
			c. Level F	Registered (S	pecify)	7 .	-	
			片片	Federal	į (County:	a Floot	ion Sum to Date
				State	<u>_</u>	Municipality:		on Sun to Date
							\$	
f. Account Code	g. Form of Payment	h. In-Kind	Description	n	[i	. Date (mm/dd/yyyy)	j. Amount
								\$
						·		\$
				, -			•	\$
3. Contributor In	formation	<u> </u>	Add		Remo	ove		
a. Full Name, Mailing				f Committee			d. Com	ments
(include city, state,				Candidate		PAC		
				Referendu			_	
			c. Level l	Registered (S	pecify)	<u> </u>	-	
				Federal State		County: Municipality:	e Flect	ion Sum to Date
				State			\$	Jon Sum to Dute
f. Account Code	g. Form of Payment	h. In-Kino	d Description	on .		i. Date (mm/dd/yyy)	/)	j. Amount
h Account Code	g. Your and a say well							\$
			<u> </u>	· · · · · ·				\$
				-				\$
4. Total only this	Page	<u>J</u>					\$	250.00
5. Total of ALL C	CRO-1230 Pages n line 8 of Detailed Summary Page CRO)-1100)					\$	250.00

Other Receipt Sources

Amendment
Pg 1 of 1 Yes No

Jse this form to report income not	eported on another form.	i.e. interest income,	not for profit contributions etc.
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1. Committee Full Name (and Fund if applicable) 2. ID Number										
Committee To R	e-Elect Tony Rose For	School Board				4D4JU3				
3. Type of Recei	pt Source	(Please use separate CRO-12	50 forms	for each type of	Recei	pt Source.)				
Interest		Contributions from Not-for-F	rofit Organi	izations	Outs	ide Sources of Income				
4. Contributor I	nformation	☐ Add		Remo						
a. Full Name, Mailir	ng Address & Phone		b. Not-for	-Profit Federal ID	#	d. Comments				
(include city, state		· · · · · ·								
State Employees										
1172 St. Mark's			c. Outside	Source Explanation	110					
Burlington, NC		e. Election Sum to Date								
336-538-4734										
330-330-4/34			_			\$ 1.91				
f. Account Code	g. Form of Payment	h. In-Kind Description		i. Date (mm/dd/yy	уу)	j. Amount				
1	Credit			07/01/2014	ļ	\$ 0.18				
1	Credit			08/04/201	4	\$ 0.59				
4. Contributor I		Add		Remo	ove					
	ng Address & Phone		b. Not-for	r-Profit Federal ID	#	d. Comments				
(include city, stat	•			<u> </u>		· ·				
State Employees						i				
1172 St. Mark's	Church Road		c. Outsid	e Source Explanati	on					
Burlington, NC	27215					<u></u>				
						e. Election Sum to Date				
336 - 538-4734						\$ 1.91				
f. Account Code	g. Form of Payment	h. In-Kind Description		i, Date (mm/dd/y	ууу)	j. Amount				
Ī	Credit			09/02/201	4	\$ 0.47				
1	Credit			10/01/201	4	\$ 0.36				
4. Contributor l	Information	Add		Remo	ove					
	ng Address & Phone		b. Not-fo	r-Profit Federal ID	#	d. Comments				
(include city, stat					-					
	·	.		·						
			c. Outsid	e Source Explanati	on					
						DI d C & D.A.				
						e. Election Sum to Date				
						\$				
f. Account Code	g. Form of Payment	h. In-Kind Description		i. Date (mm/dd/y	ууу)	j. Amount				
						\$				
						\$				
5. Total only	this Page					\$ 1.60				
6. Total of ALL CRO-1250 Pages										
	(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest) \$ 1.60									
		y Page CRO-1100 if Not-for-Profit Co	ntribution)			Ψ 1.00				
		y Page CRO-1100 if Outside Sources of								

ъ.					
Dis	bu	rse	m	en	ts

Amendment

DISDURSEMENTSPg 1 of 9 \square Ye

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

1. Committee Full Name (and Fund if applicable)

	ıll Name (and Func						2. ID Number
Committee To R	e-Elect Tony Rose	For School Board					4D4JU3
3. Type of Disbu			RO.	-1310 forms for each ty			
Operating Ex				tes/Political Committees			d Party Expenditures
4. Payee Inform	ation		Α	dd 🔲	Remove		
a. Full Name, Mailir			b.	Coordinated Committee Na	me	d. Co	mments
(include city, state, &	-						
State Emp Credi							
1172 St. Mark's			c.	Level Registered (Specify)	· — —		
Burlington, NC	27215		Federal County:				
				State	Municipality:	e. Ele	ection Sum to Date
336-538-4734						s	15.00
			Ц,	<u>.</u>		<u> </u>	
f. Account Code	g. Form of Payment	h. Purpose Code	_	i. Date (mm/dd/yyyy)	j. Amount		quired Remarks
1	Debit	0		07/01/2014	\$1.00	1	thly Account
·		-	_			Fee	Al-land annual
1	Debit	O		08/04/2014	\$1.00	1	ithly Account
			_		Damasia	Fee	··-
4. Payee Inform		<u></u>	_	dd	Remove	d C-	
a. Full Name, Mailir	-		þ.	Coordinated Committee Na	inie	u. C0	
(include city, state, &	& zip)		}				
PayPal.com				Lavel Designated (Caratter)		1	
			C.	Level Registered (Specify) Federal	County:	1	
				= =	· ·	A FI	ection Sum to Date
			┞┺	State	Municipality:	E. ER	Atton Sam to Date
						\$ 4	41.92
f. Account Code	g. Form of Payment	h, Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Re	quired Remarks
_		0			\$1.75	Payl	Pal Fee
1	Debit	0]	07/02/2014	د/،او	ļ	
1	Debit	0		07/07/2014	\$1.75	Payl	Pal Fee
1							·
4. Payee Inform	ation		_	dd 📙	Remove		
a. Full Name, Mailii	ng Address & Phone		h.	Coordinated Committee Na	nne	d. Co	omments
(include city, state,							
Markell Printing	,		<u> </u>			-	
718 E. Davis Sti			c.	Level Registered (Specify)		-	
Burlington, NC	27215		ļĻ	Federal 🖂	County:		
			L	State	Municipality:	e. Ele	ection Sum to Date
336-226-7148						\$	1702.66
	- AB	h. Purpose Code	١.,	: Dota (====================================	I A mount	I, D	equired Remarks
f. Account Code	g. Form of Payment	u, rurpose Coue	_	i. Date (mm/dd/yyyy)	j. Amount		Yard Signs
1	Check	В		07/09/2014	\$1702.66	500	i ara signs
					S		
5. Total only thi	is Page	<u> </u>			.	\$	1708.16
	CRO-1310 Pages				•••		
	line 13a of Detailed Sun	nmary Page CRO-110	0 if	Operating Expenses)		· ·	9205.53
(This line goes in	line 13b of Detailed Sur	nmary Page CRO-110	0 if	Contrib to Candidates/Politic		\$	7403.33
				Coordinated Party Expendite		<u> </u>	
	es (List detailed ex						
A* - Media	B* - Printing	C* - Fun	dra	ising	D - To Anoth		
E - Salaries	F* - Equipment						c Office Expenses
I - Postage	J - Penalties	K* - Offi	ce F	Expenses	Q* - Donatio	n to L	egal Expense Fund
O* - Other	e detailed evalanat	ion in required r	em-	arks field (k)			

n	ic	h		rs	^	m	^	n	40	
1,	IS	D	u	rs	е	m	е	n	IS	

Pg <u>2</u>

ıf 9

 ∇

Amendment Yes

No

1. Committee F	ull Name (and Fun	d if applicable)			2. ID Number
Committee To F	Re-Elect Tony Rose	For School Board			4D4JU3
3. Type of Disbu			RO-1310 forms for each	type of Disburser	nent.)
Operating E			ndidates/Political Committees		pordinated Party Expenditures
4. Payee Inform		Controllions to Car	Add	Remove	Dordania Control of the Control of t
	<u> </u>				d Comments
	ng Address & Phone		b. Coordinated Committee !	Name	d. Comments
(include city, state,	& zip)		1		
Kidsport					
3370 South Chu	irch Street		c. Level Registered (Specify))	_
Burlington, NC	27215		Federal	County:	
			State	Municipality:	e. Election Sum to Date
336-538-0073					\$ 250.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	GI I		0.5/1.0/0.1.1	50.50.00	Banner printing
1	Check	0	07/10/2014	\$250.00	and displaying.
		· -			
				\$	
4. Payee Inform	ation	<u> </u>	Add	Remove	
	ng Address & Phone	 _	b. Coordinated Committee I	 -	d. Comments
	-		.,, 000, 000, 000, 000, 000, 000, 000,		
(include city, state, or Dollar General	& zip)		-		
	D. I		10 10 10		-{
1500 Power Line Road			c. Level Registered (Specify)		4
Elon, NC 27244	•		Federal 🔀	County:	
			State	Municipality:	e. Election Sum to Date
336-584-1853					\$ 3.20
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Chaole Cond	С	07/12/2014	\$3.20	Envelopes
1	Check Card		07/12/2014	\$3.20	
				\$	
		<u> </u>			
4. Payee Inform	ation		Add	Remove	
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee ?	Name	d. Comments
(include city, state,	& zip)				
VistaPrint.com					
			c. Level Registered (Specify)		7
			Federal 🛛	County:	7
			State	Municipality:	e. Election Sum to Date
					\$ 35.22
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
		_			Address Labels
1	Check Card	В	07/14/2014	\$35.22	Thank You Cards
				 \$	l .
				1	
5. Total only thi	is Page				\$ 288.42
5. Total only thi					\$ 288.42
6. Total of ALL	CRO-1310 Pages	nmary Page CRO-110	0 if Operating Expenses)		
6. Total of ALL (This line goes in	CRO-1310 Pages line 13a of Detailed Sun	. –	0 if Operating Expenses) 0 if Contrib to Candidates/Poli		\$ 288.42 \$ 9205.53
6. Total of ALL (This line goes in (This line goes in	CRO-1310 Pages line 13a of Detailed Sun line 13b of Detailed Sun	nmary Page CRO-110	0 if Contrib to Candidates/Polit	ical Comm)	
6. Total of ALL (This line goes in (This line goes in (This line goes in	CRO-1310 Pages line 13a of Detailed Sun line 13b of Detailed Sun line 13c of Detailed Sun	nmary Page CRO-110 nmary Page CRO-110	0 if Contrib to Candidates/Polit 0 if Coordinated Party Expendi	ical Comm)	
6. Total of ALL (This line goes in (This line goes in (This line goes in 7. Purpose Code	CRO-1310 Pages line 13a of Detailed Sun line 13b of Detailed Sun line 13c of Detailed Sun es (List detailed ex	nmary Page CRO-116 nmary Page CRO-116 penditure code in	0 if Contrib to Candidates/Polii 0 if Coordinated Party Expendi (h.) above)	ical Comm) tures)	\$ 9205.53
6. Total of ALL (This line goes in (This line goes in (This line goes in 7. Purpose Code A* - Media	CRO-1310 Pages line 13a of Detailed Sun line 13b of Detailed Sun line 13c of Detailed Sun es (List detailed ex B*-Printing	nmary Page CRO-116 nmary Page CRO-116 penditure code in C* - Fun	0 if Contrib to Candidates/Polii 0 if Coordinated Party Expendi (h.) above) draising	ical Comm) (tures) D - To Anot	\$ 9205.53
6. Total of ALL (This line goes in (This line goes in (This line goes in 7. Purpose Code A* - Media E - Salaries	CRO-1310 Pages line 13a of Detailed Sun line 13b of Detailed Sun line 13c of Detailed Sun es (List detailed ex B* - Printing F* - Equipment	nmary Page CRO-110 nmary Page CRO-110 penditure code in C* - Fun G - Politi	0 if Contrib to Candidates/Polii 0 if Coordinated Party Expendi (h.) above) draising cal Party	ical Comm) (ures) D - To Anot H* - Holdin	\$ 9205.53 her Candidate g Public Office Expenses
6. Total of ALL (This line goes in (This line goes in (This line goes in 7. Purpose Code A* - Media	CRO-1310 Pages line 13a of Detailed Sun line 13b of Detailed Sun line 13c of Detailed Sun es (List detailed ex B*-Printing	nmary Page CRO-110 nmary Page CRO-110 penditure code in C* - Fun G - Politi	0 if Contrib to Candidates/Polii 0 if Coordinated Party Expendi (h.) above) draising	ical Comm) (ures) D - To Anot H* - Holdin	\$ 9205.53

Disbursements

Amendment

Yes

No

1. Committee Fi	1. Committee Full Name (and Fund if applicable) 2. ID Number							
	te-Elect Tony Rose I						4D4JU3	
3. Type of Disbu			RO	-1310 forms for each ty	pe of Disburseme	ent.)		
Operating Ex				ates/Political Committees			Party Expenditures	
4. Payee Inform				.dd	Remove			
	ng Address & Phone	. .		Coordinated Committee Na		d. Co	nments	
(include city, state,	_		<u> - ۲</u>					
Elon College Po								
105 South Willia			Ļ	Level Registered (Specify)				
Elon, NC 27244			<u> -</u>	Federal Specify	County:			
E1011, NC 27244			┆		Municipality:	a Fla	ction Sum to Date	
227 504 5042				State	wuntcipanty.	L. LIL	thon Sum to Date	
336-584-5943						\$ 3	2.80	
6.1. (6.1.	- F	h. Purpose Code	L.,	: Date (mm/dd/mm)	i t mount	l, Da	uired Remarks	
f. Account Code	g. Form of Payment	n. I ui pose Code		i. Date (mm/dd/yyyy)	j, Amount		·	
1	Check Card	I		07/14/2014	\$32.80	Stam	ps	
					\$			
	.		_	11		<u> </u>		
4. Payee Inform		Ц	_	.dd	Remove			
	ng Address & Phone		b.	. Coordinated Committee Na	me	a. Co	niments	
(include city, state,	& zip)							
Office Depot			_	,,				
1825 South Chu			€.	Level Registered (Specify)				
Burlington, NC	27215		L	Federal 🖂	County:			
		ĻĻ	State	Municipality:	e. Ele	ction Sum to Date		
336-226-6122						S 4	1.27	
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Re	quired Remarks	
1	Check Card	В		07/15/2014	\$4.27	Pape	r	
1	CHECK Card	D -		07/13/2014	Ψ1,2,			
					 			
							<u></u>	
4. Payee Inform	ation		Add Remove			, -		
a, Full Name, Maili	ng Address & Phone		b.	. Coordinated Committee Na	ıme	d. Co	mments	
(include city, state,	_							
The Times-New			1					
707 S. Main Str			c.	Level Registered (Specify)]		
Burlington, NC			Ē	Federal 🖂	County:]	<u></u>	
				State	Municipality:	e. Ele	ction Sum to Date	
336-506 - 3062							1121.40	
250 200 200						\$ 1	1121.40	
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Re	quired Remarks	
					0015.05	Back	To School	
1	Check	A		07/18/2014	\$317.35	Livi	ng Here Ads	
	<u> </u>					+	To School	
1	Check	A		07/23/2014	\$150.00	1	or Charge	
5. Total only th	is Page	l		<u>. </u>	1	S	504.42	
	CRO-1310 Pages							
	line 13a of Detailed Sun	nmary Page CRO-110	0 if	Operating Expenses)			0005.53	
				Contrib to Candidates/Politic	al Comm)	\$	9205.53	
(This line goes in	line 13c of Detailed Sun	nmary Page CRO-110	o if	Coordinated Party Expenditu	res)			
	es (List detailed ex				·	•		
A* - Media	B* - Printing	C* - Fun			D - To Anothe	er Can	lidate	
E - Salaries	F* - Equipment						Office Expenses	
I - Postage	J - Penalties					n to L	egal Expense Fund	
O* - Other								
l * Codes requir	e detailed explanat	ion in required r	em	arks field (k)				

Disbursements Pg

Amendment of <u>9</u>

1. Committee F	ull Name (and Fun	l if applicable)			2. ID Number
Committee To F	Re-Elect Tony Rose	For School Board			4D4JU3
3. Type of Disbu	irsement (Plea	se use separate C	RO-1310 forms for each	type of Disbursem	ent.)
Operating E			ndidates/Political Committees		ordinated Party Expenditures
4. Payee Inform			Add	Remove	
	ng Address & Phone		b. Coordinated Committee	Name	d. Comments
(include city, state,	-				
Mebane Enterpr	ise				
106 North 4 th St	reet		c. Level Registered (Specify)	
Mebane, NC 27.	302		Federal 🖂	County:	
			State	Municipality:	e. Election Sum to Date
919-563-3555					\$ 63.78
			<u> </u>		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	Α	07/29/2014	\$63.78	Back To School
-	-			-	Ad B&W
				\$	
A Dayon Inform	ntion		Add \square	Remove	
4. Payee Inform			h. Coordinated Committee		d. Comments
	ng Address & Phone		Coordinated Committee		u. commens
(include city, state,	& zip) nce High School		4		
Athletic Booster	_		c. Level Registered (Specify	<u> </u>	1
P.O. Box 204	3		Federal Specify	County:	1
			State	Municipality:	e, Election Sum to Date
Elon, NC 27244			state	wanterparty.	
336-538-6020					\$ 120.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
-				6120.00	Program Ad
1	Check	Α	07/31/2014	\$120.00	
	_			\$	
		<u></u>			
4. Payee Inform	ation		Add	Remove	
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee	Name	d. Comments
(include city, state,			1		
Graham Cinema	ı				-
P.O. Box 872			c. Level Registered (Specify		
Graham, NC 27	253		Federal 🖂	County:	
			State	Municipality:	e. Election Sum to Date
336-229-4221					\$ 115.00
	P 69	h, Purpose Code	i Data (m.m.t.).t/	1:4::::::::::::::::::::::::::::::::::::	k. Required Remarks
f. Account Code	g. Form of Payment	n, r urpose Coue	i, Date (mm/dd/yyyy)	j. Amount	Screen Ad
1	Check	О	08/01/2014	\$115.00	Serceil Au
· · · · · · · · · · · · · · · · · · ·					
				\$	
5. Total only thi	is Page				\$ 298.78
	CRO-1310 Pages				
		nmary Page CRO-110	0 if Operating Expenses)		\$ 0205.52
			00 if Contrib to Candidates/Poli	tical Comm)	\$ 9205.53
			0 if Coordinated Party Expend		<u> </u>
	es (List detailed ex	penditure code in	(h.) above)		
A* - Media	B* - Printing	C* - Fun	draising	D - To Anoth	
E - Salaries	F* - Equipment				g Public Office Expenses
I - Postage	J - Penalties	K* - Offi	ce Expenses	Q* - Donatio	on to Legal Expense Fund
O* - Other * Codes requir	e detailed explanat	ion in required r	emarks field (k)		

ħ	ic	h	11	re	ρI	n	ρr	ıts	
v	12	v	u	13	CI	11	CI.	LUD	

Amendment Yes

	ull Name (and Func				2. ID Number
Committee To R	Re-Elect Tony Rose I				4D4JU3
3. Type of Disbu			RO-1310 forms for eac	ch type of Disbursen	ient.)
Operating Ex			ndidates/Political Committees		ordinated Party Expenditures
4. Payee Inform	 		Add	Remove	
a. Full Name, Mailir			b. Coordinated Committee		d. Comments
(include city, state, d	=				
PayPal.com	F.		1		
- ay i anvoin			c. Level Registered (Speci	ify)	1
				County:	1
			State	Municipality:	c. Election Sum to Date
					\$ 41.92
f. Account Code	g. Form of Payment	h. Purpose Code	i, Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
n Account Coue				 	PayPal Fee
1	Debit	0	08/07/2014	\$1.03	
-					PayPal Fee
1	Debit	0	09/01/2014	\$1.03	1
A Davas I-fo	ation	<u> </u>	Add	Remove	
4. Payee Inform	· · · · · · · · · · · · · · · · · · ·	<u> </u>	b. Coordinated Committee		d. Comments
	ng Address & Phone		Coordinated Committee		
(include city, state, o			1		
Fairway Outdoo			a Land D	ifu)	-
1920 West Lee Street			c. Level Registered (Spec		-
Greensboro, NC 27303				County:	a Planting Sum to B
			State	Municipality:	e. Election Sum to Date
336-292-4242					\$ 2700.00
f. Account Code	g. Form of Payment	h. Purpose Code	i, Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			\$1270.00	September
1	Check	0	08/20/2014	\$1370.00	Billboads
			00/05/0014	01220.00	October
1	Check	0	09/25/2014	\$1330.00	Billboards
4. Payee Inform	ation		Add [Remove	
	ing Address & Phone		b. Coordinated Committee		d. Comments
a. Full Name, Maili (include city, state,	=				
Excite Printworl			7		
2897 Rocky Cli		-	e. Level Registered (Spec	ify)	
Burlington, NC				County:	
Darmigion, NC	ت : عبد ق با		State	Municipality:	e. Election Sum to Date
336-227-0890			<u>L</u>		
JJU-221-U09U					\$ 499.59
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
					T-Shirts
1 1	Check	0	08/22/2014	\$499.59	
	 	†			T-Shirts
1	Check	0	10/09/14	\$168.67	
5. Total only thi	is Page				\$ 3370.32
	CRO-1310 Pages				
		umary Page CRO-116	00 if Operating Expenses)		
(This line goes in	line 13b of Detailed Con-	umary Page CRO-116	90 if Contrib to Candidates/F	Political Comm)	\$ 9205.53
			90 if Coordinated Party Expe		
	es (List detailed ex			·	
7. Purpose Code A* - Media	B* - Printing	penditure code in C* - Fun		n - To Anot	her Candidate
A* - Media E - Salaries	B* - Printing F* - Equipment			H* - Holdin	g Public Office Expenses
I - Postage	J - Penalties		ice Expenses		ion to Legal Expense Fund
O* - Other			-		
	e detailed explanat	ion in required r	emarks field (k)		

Disbursements		

			Amendment						
Pg	6	oſ	9	Yes	\boxtimes	No			

	ull Name (and Fune							2. ID Number
Committee To F	Re-Elect Tony Rose	For School Board						4D4JU3
3. Type of Disbu	ırsement <i>(Plea</i>	se use separate C	RO-	-1310 forms for ea	ch ty	pe of Disbursen	ent.)	· · · · · · · · · · · · · · · · · · ·
Operating E				tes/Political Committee				d Party Expenditures
4. Payee Inform			À	dd		Remove		
	ng Address & Phone		b. 6	Coordinated Commit	tee Na		d. Co	mments
(include city, state,	_			· · · · ·				
Al Van's Advert								
3290 Van Drive			c. Level Registered (Specify)					
Burlington, NC	27215			Federal		County:	Ì	
				State		Municipality:	e. Ele	ection Sum to Date
336-226-7400						,	\$	651.56
f. Account Code	g. Form of Payment	h. Purpose Code	<u>'</u>	i. Date (mm/dd/yyyy))	j. Amount	k. Re	quired Remarks
1	Charle	0		08/20/2014		\$651.56	Pend	cils and
1	Check	0		08/29/2014		\$651.56	Emo	ory Boards
				•		\$		
4. Payee Inform	L ation		A	dd		Remove	1	
- • • • • • • • • • • • • • • • • • • •	ng Address & Phone		$\overline{}$	Coordinated Commit	— tee Na		d. Co	omments
(include city, state,				**		 		
BACAR	210)		1					
215 Alamance F	Rd.		ç. 1	Level Registered (Spe	cify)		1	
Burlington, NC 27215					\boxtimes	County:	1	
24g.on, 1.0 2,212				State	Ħ	Municipality:	e. Ele	ection Sum to Date
336-260-9800 or 336-516-7217					<u> </u>			60.00
f. Account Code	g. Form of Payment	h. Purpose Code	٦-	i. Date (mm/dd/yyyy		j. Amount	k, Ro	equired Remarks
					,	060.00	Gol	f Tournament
1	Check	0		09/22/2014		\$60.00	Hole	e Sponsor
						\$		
4. Payee Inform	ation		Add Remove					
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee Name			d. Co	omments	
(include city, state,	& zip)							
International Mi	inute Press						_	
1143-F St. Mark	s Church Road		c. Level Registered (Specify)				_	
Burlington, NC	272715			Federal	\boxtimes	County:		
				State	<u> </u>	Municipality:	e. El	ection Sum to Date
336-270-4426							\$	627.00
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount		equired Remarks
1	Check	В		09/12/2014		\$627.00	Palr	m Cards
						\$		
5. Total only thi	is Page	1	1.			J	\$	1338.56
	CRO-1310 Pages			,				
	line 13a of Detailed Sun	nmary Page CRO-116	00 if C	Operating Expenses)			1	0205 52
	(This line goes in line 13th of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) \$ 9205.53							
	line 13c of Detailed Sun						<u> </u>	
	es (List detailed ex							
A* - Media	B* - Printing	C* - Fun	drai	sing		D - To Anoth		
E - Salaries	F* - Equipment							c Office Expenses
I - Postage	J - Penalties	K* - Offi	ice E	xpenses		Q* - Donati	on to L	egal Expense Fund
O* - Other		ion in mossius I	40.000	wka fiold (k)				
i – Coaes requir	e detailed explanat	ion in required r	CIII	n ve nein (k)				

Disbursements

Amendment

1. Committee Fu					2. ID Number
	e-Elect Tony Rose F	For School Board			4D4JU3
3. Type of Disbur			RO-1310 forms for each ty	vpe of Disbursem	ent.)
Operating Exp			didates/Political Committees		ordinated Party Expenditures
4. Payee Informa			Add	Remove	
			b. Coordinated Committee Na		d. Comments
a. Full Name, Mailing	=	ì	Coordinated Committee IN		
(include city, state, &	e zipj		1		
PayPal.com		i	F 175		4
		i	c. Level Registered (Specify)		4
		i	Federal 🖂	County:	
		i	State	Municipality:	e. Election Sum to Date
		ł			\$ 41.92
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Debit	0	09/13/2014	\$1.72	PayPal Fee
				 	Day Dol Coo
1	Debit	0	09/14/2014	\$1.75	PayPal Fee
				Remove	
4. Payee Informa		Ц	Add		d. Comments
a. Full Name, Mailin	-	1	b. Coordinated Committee Na	аше	u. Comments
(include city, state, &	k zip)		1		
PayPal.com		_			4
			c. Level Registered (Specify)		4
			Federal 🖂	County:	
			State	Municipality:	e. Election Sum to Date
			<u></u>		\$ 41.92
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k, Required Remarks
1	Debit	0	09/26/2014	\$4.65	PayPal Fee
					D 2 1 2
1	Debit	0	10/18/2014	\$1.75	PayPal Fee
				<u> </u>	
4. Payee Informa			Add	Remove	140
a. Full Name, Mailin	g Address & Phone		b. Coordinated Committee N	ame	d. Comments
(include city, state, &	-				
Alamance News					_
114 West Elm St			c. Level Registered (Specify)		_
Graham, NC 272			Federal 🖂	County:	
Granani, NC 474	- - -		State	Municipality:	c. Election Sum to Date
226 220 7051					
336-228-7851					\$ 400.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	Α	09/30/2014	\$400.00	1/2 Page Ad
	i			\$	
5. Total only this	s Page	1			\$ 409.87
	CRO-1310 Pages				
		unary Page CRO-110	00 if Operating Expenses)		0.000.7.7
(This line goes in i	ling 13h of Dotoiled C.	mary Page CRO-110	00 if Contrib to Candidates/Politi	ical Comm)	\$ 9205.53
			10 if Contrib to Candidates/Point 10 if Coordinated Party Expendit		
				/	<u> </u>
	es (List detailed exp			D Т	her Candidate
A* - Media	B* - Printing	C* - Fund			her Candidate g Public Office Expenses
E - Salaries	F* - Equipment		cal Party ice Expenses		on to Legal Expense Fund
1 - Postage O* - Other	J - Penalties	w Om	esenoque so	v - กกแลก	

Disbursements

Pg <u>8</u> of <u>9</u>

Amendment Yes

No

1. Committee Fu	ull Name (and Func	d if applicable)				2. ID Number
	le-Elect Tony Rose I					4D4JU3
3. Type of Disbu		se use separate C		ms for each t	'ype of Dishurson	
Operating Ex		Contributions to Can				oordinated Party Expenditures
		Cal	Add		Remove	-y =p
4. Payee Inform		<u> </u>	· · · · · · · · · · · · · · · · · · ·	ed Committee N		d. Comments
a. Full Name, Mailin	-		D. Coordinate	Committee N	-amt	- Comments
(include city, state, &			1			1
The Times-News						\dashv
707 S. Main Stre				stered (Specify)		-
Burlington, NC	27215		Federa	al 🗵	County:	
			State		Municipality:	e. Election Sum to Date
336-506-3062						\$ 1121.35
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (m	m/dd/yyyy)	j. Amount	k. Required Remarks
			10/01/20		\$489.00	Voter Guide Ad
<u> </u>	Check	A	10/01/2	V17	ψτυ <i>Σ</i> .υυ	
					\$	
4. Payee Inform	ation		Add		Remove	
		<u>i</u>	,	ed Committee N		d. Comments
	ng Address & Phone		Jonatual			
(include city, state, &	or vih)		1			
WPCM	.d		a I 15	stored 10-	,,614	-
1109 Tower Roa				stered (Specify)		\dashv
Elon, NC 27244	ı		Feder	ral 💹	County:	a Flaction Co to D.
			State		Municipality:	e. Election Sum to Date
336-584-0126						\$ 400.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (m	m/dd/yyyy)	j. Amount	k. Required Remarks
		Δ	10/15/2	014	\$400.00	Radio Ad
1	Check	Α	10/15/2	V14	φτυυ.υυ	
					\$	
			A .1.1			
4. Payee Inform			Add Remove b. Coordinated Committee Name			d. Comments
	ng Address & Phone		p. Coordinat	ea Committee N	vailit	G. COMMENTS
(include city, state,	& zip)		1			
WBAG		_				-
P.O. Box 2450				istered (Specify)		\dashv
Burlington, NC	27216		Feder Feder	ral 🗵	County:	
- ′			State		Municipality:	e. Election Sum to Date
336-226-1150						\$ 396.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (m	nm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	A	10/17/2	:014	\$396.00	Radio Ad
					\$	
5 Total - 1 11	is Page				_	\$ 1285.00
5. Total only the					<u> </u>	
	CRO-1310 Pages	umaro Paga CBO 114	10 if Oneralin-	Expenseel		
	line 13a of Detailed Sur				ical Comm)	\$ 9205.53
(This line goes in	line 13b of Detailed Sur	mmary rage CRO-II(ory Contrib to :	d Parto Em.	tures	[
	line 13c of Detailed Sur			a rarty Expendi	uni cəj	<u> </u>
	es (List detailed ex				D 70	thar Condidate
A* - Media	B* - Printing		idraising			other Candidate
E - Salaries	F* - Equipment					ng Public Office Expenses tion to Legal Expense Fund
I - Postage	J - Penalties	K* - Off.	ice Expenses		v~ - nonat	con to Degat Dapense Fullu
O* - Other * Codes requir	e detailed explanat	ion in required r	emarks field	<u>l (</u> k)		
, Coursitulli						

				Ame	ndment
Disbursements	Pg	9	of <u>9</u>		Yes

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

1. Committee Full Name (and Fund if applica

1. Committee F	uii Name (and Fun	u ii appiicable)			2. ID Number		
	Re-Elect Tony Rose	For School Board			4D4JU3		
3. Type of Disbi	irsement <u>(Plea</u>		RO-1310 forms for each	type of Disbursen	ient.)		
Operating E		Contributions to Car	ndidates/Political Committees		ordinated Party Expenditures		
4. Payee Information			Add	Remove			
a. Full Name, Mailing Address & Phone			b. Coordinated Committee	Name	d. Comments		
(include city, state,							
State Emp Cred							
1172 St. Mark's			c. Level Registered (Specify	· · · · · · · · · · · · · · · · · · ·	_		
Burlington, NC	27215		Federal 🔀	County:			
224 522 4724			State	Municipality:	e. Election Sum to Date		
336-538-4734					\$ 15.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Debit	0	09/01/2014	\$1.00	Monthly Account Fee		
1	Debit	0	10/010/2014	\$1.00	Monthly Account		
A Down I-form	estion	<u> </u>		Remove	Fee		
4. Payee Inform		Ц_	Add L		d. Comments		
	ng Address & Phone		o. Coordinated Committee	. rainte	a. Comments		
(include city, state,	& zip)		_				
			c. Level Registered (Specify	······································	7		
			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 Remarks		
				\$			
				-	-		
				\$			
4. Payee Inform	ation	<u> </u>	Add	Remove	<u></u>		
	ng Address & Phone		h. Coordinated Committee		d. Comments		
(include city, state,	_			· · · · · ·			
(include city, state,	с гір)						
			c. Level Registered (Specify	<i>y</i>)			
			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 Remarks		
	<i>a</i>		, , , , , , , , , , , , , , , , , , , ,	s			
				\$			
5. Total only th	is Page				\$ 2.00		
	CRO-1310 Pages						
			00 if Operating Expenses)		\$ 9205.53		
			00 if Contrib to Candidates/Pol				
			0 if Coordinated Party Expend	litures)			
	es (List detailed ex			an on a co	Candidata		
A* - Media B* - Printing C* - Fun			draising cal Party		ner Candidate g Public Office Expenses		
			ce Expenses		on to Legal Expense Fund		
O* - Other							
* Codes require detailed explanation in required remarks field (k)							

In-Kind Contributions

				Amendment								
F	'g	<u>1</u>	of	<u>2</u>		Yes	\boxtimes	No				

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.

Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)				2. ID Number			
Committee To Re-Elect Tony Rose For School Board				4D4JU3			
3. Contributor Information Add Remove							
a. Full Name, Mailing Address & Phone	of C	ontributor	c. Com	, Comments			
(include city, state, & zip)			Individual				
Anthony Glenn Rose		Cand	lidate				
1706 Stratford Road	Party		1				
Burlington, NC 27217	□ РАС						
·	[H		rendum	d. Election Sum to Date			
		Othe	r Receipt Source	\$ 990.18			
e. Description			f. Date (mm/dd/yyyy)		g. Fair Market Amount		
VistaPrint Order Number: 3C3BV-W2A50-0N2			07/22/2014		\$ 40.28		
Bag, Stickers, 2 Shirts							
VistaPrint Order Number: 121T0-X2A98-0L7			07/27/2014	ţ	\$ 40.28		
Labels							
USPS			07/31/2014	ļ	\$ 16.60		
Stamps Add Branching Add Branching B	2		ļ,				
	Remove	of C	ontributor	e Con	ıments		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. 1 ype		ridual	C. COII	Impiria		
Glenn Rose			lidate				
1810 Wellington Road		Party					
Burlington, NC 27217		PAC					
=			rendum	d. Elec	ction Sum to Date		
			r Receipt Source	\$ 92.61			
e. Description			f. Date (mm/dd/yyy	/y)	g. Fair Market Amount		
Dollar General			07/27/2014	ļ	\$ 6.41		
Envelopes							
USPS			07/28/2014	1	\$ 29.40		
Stamps							
USPS			08/28/2014	1	\$ 6.80		
Stamps) om 2***						
	Remove	. nr r	Contributor	c Con	nments		
a. Full Name, Mailing Address & Phone (include city state & zip)	у, туре		vidual				
(include city, state, & zip) Anthony Glenn Rose			Candidate				
1706 Stratford Road		Party					
l —							
229.0,	PAC		erendum	d. Election Sum to Date			
		Othe	er Receipt Source	\$ 990.18			
e. Description	1		f. Date (mm/dd/yyy	' уу)	g. Fair Market Amount		
Facebook Ad			07/31/2014		\$ 30.64		
Facebook Ad			08/28/2014	4	\$ 50.00		
Facebook Ad			08/31/2014	4	\$ 1.00		
4. Total only this Page			1	\$	221.41		
5. Total of ALL CRO-1510 Pages				İ			
(This line must be on line 17 of Detailed Summary Page CRO-1100)				\$	370.27		

T	Kind	Comt		
ın-	·Kina	Cont	ributi	ons

		Ameno	mendment					
-Kind Contributions	Pg	2	of	2		Yes	\boxtimes	N
this form to report non manatary contributions, denotions								

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund. Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable) 2. ID Number Committee To Re-Elect Tony Rose For School Board 4D4JU3 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Type of Contributor c. Comments (include city, state, & zip) Individual \boxtimes Anthony Glenn Rose Candidate 1706 Stratford Road Party Burlington, NC 27217 PAC d. Election Sum to Date Referendum 336-584-2728 Other Receipt Source 990.18 e. Description f. Date (mm/dd/yyyy) g. Fair Market Amount VistaPrint Order Number: XMLND-X2A98-9W5 08/05/2014 75.77 Car Magnets Facebook Ad 09/30/2014 \$ 73.09 \$ 3. Contributor Information Add Remove b. Type of Contributor c. Comments a. Full Name, Mailing Address & Phone Individual (include city, state, & zip) Candidate Party PAC Referendum d. Election Sum to Date Other Receipt Source f. Date (mm/dd/yyyy) g. Fair Market Amount e. Description \$ \$ \$ 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Type of Contributor c. Comments (include city, state, & zip) Individual Candidate Party PAC d. Election Sum to Date Referendum Other Receipt Source g. Fair Market Amount e. Description f. Date (mm/dd/yyyy) \$ \$ 4. Total only this Page \$ 148.86 5. Total of ALL CRO-1510 Pages \$ 370.27 (This line must be on line 17 of Detailed Summary Page CRO-1100)