Disclosure Rej	port Cover				Amendment Yes 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 Informa. Full Name	mation				c. ID Number					
Committee to Brian	81-0920510									
	51 07 2 0010									
b. Mailing Address (inclu		d. Date Filed								
113 Bell Tower Cou Elon, NC 27244		0728/16								
	e. Phone Number									
				>	336-278-7446					
2. Report Year	Id/vv)	4. Period End Date (mm/dd/yy) 5. Treasurer 1		Name						
2016	01/01/2016	0	06/30/2016 Brian Fee							
6. Type of Committee	ee (Check One)	9. Type of Repo	rt (check on	ly one type of report ;	from one category)					
Candidate Campa		Municipal	State/C		Referendum					
PAC Independent	Referendum	Organizatio		Organizational	Organizational					
Expenditure	Joint Fundraiser	Thirty-five	day	Quarterly	Pre-referendum					
Legal Expense Fu										
7. Type of Fund "Booster Fund"	(if applicable, check one)	Pre-primary Pre-election		First Second	Final Supplemental Final					
Building Fund		Pre-runoff		Third	Supplemental Final Annual					
Dantanig rand		Semi-annua	.1	Fourth	Special					
		Mid Y	ear S	Semi-annual						
Other:		Year l	ind	Mid Year	10. Special Report Name					
0 N 1 0F 1		Final	ᅵ႘	Year End						
8. Number of Fundr	aisers this Report	Special Special		Final Special						
11. Account Informa	ation		11. Account I	11. Account Information						
a. Financial Institution F				a. Financial Institution Full Name						
Carolina Bank										
b. Purpose	c. Account Code		b. Purpose		c. Account Code					
Campaign Finance	1									
rmance	d. Period Begin Balance		-		d. Period Begin Balance					
,										
	\$ 200.00				\$					
CERTIFICATION										
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.										
	Feeley		Sect	es	107/29/16					
	Printed Name of Signer		Signature of Appoint	ted Treasurer	Date					
FOR OFFICE USE O	NLY 7/20/1/		/	7/1						
Date Received:	1/29/10	Employe	»: <u>L</u>		Delivery Method Normal Mail					
Date Postmarked		Employe	»: 		Registered Mail Hand Delivered					
Date Scanned:	8/3/16	Employe	»:	<u>)</u> [Electronically Filed Signer has not received					
Date Data Entere	ed:	Employe	»: 		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.										
	Tou must amend the States	nem of Organizat	OII (CKO-2100A-	L) to make committe	e changes.					

07-20-16A09:48 RCVD

Yes

No

Use this form to summarize all disclosure reporting forms and to total monetary information. 1. Committee Full Name (and Fund if applicable) 2. Type of Report 3. ID Number Brian Feeley Quarterly Total this Total this **Start of Election Cycle:** 2016 January 1, Reporting Period **Election Cycle** Cash on Hand at Start \$ 200.00 \$ 200.00 RECEIPTS **Aggregated Contributions from Individuals** \$ (CRO-1205) \$ \$ 6) Contributions from Individuals (CRO-1210) \$ **Contributions from Political Party Committees** (CRO-1220) \$ \$ \$ **Contributions from Other Political Committees** (CRO-1230) \$ 9) Loan Proceeds (CRO-1410) \$ 10) Refunds/Reimbursements To the Committee (CRO-1240) \$ Other Receipt Sources 11) \$ \$.06 11a) Interest on Bank Accounts (CRO-1250) \$ 11b) Contributions from Not-for-Profit Organizations (CRO-1250) \$ \$ 11c) Outside Sources of Income \$ (CRO-1250) 11d) Legal Expense Fund - Other Sources \$ \$ (CRO-1270) 11 e) Exempt Purchase Price Sales (CRO-1265) \$ \$ \$ **TOTAL RECEIPTS** (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e) .06 <u>EXPENDITURES</u> 13) Disbursements \$ 13a) Operating Expenditures \$ 96.00 (CRO-1310) \$ 13b) Contributions to Candidates/Political Committees \$ (CRO-1310) \$ 13c) Coordinated Party Expenditures \$ (CRO-1310) \$ 14) Aggregated Non-Media Expenditures (CRO-1315) \$ \$ (CRO-1420) 15) Loan Repayments \$ \$ 16) Refunds/Reimbursements From the Committee (CRO-1320) **In-Kind Contributions** \$ \$ 17) (CRO-1510) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) \$ 18) 96.00 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) 104.06 ADDITIONAL INFORMATION 20) Non-Monetary Gifts Given to Other Committees \$ (CRO-1330) Outstanding Loans (incl. ones from other campaigns) (CRO-1430) 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) \$ \$ Contributions to be Refunded 28) (CRO-1215)

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) 2. ID Number											
	uii Name (and Fun	а и аррисавіе)	—	71.0			2. ID Number				
Brian Feeley 2. Through Pichard Control of											
	3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.) Operating Expenses Coordinated Party Expenditures Coordinated Party Expenditures										
4. Payee Inform		Contributions to Car		Add		Remove	ordinated Farty Expenditures				
•			1	. Coordinated Committee	Na		d. Comments				
(include city, state,	ng Address & Phone		H	. Coordinated Committee	11a	<u> </u>	u. Comments				
Squarespace, In		1									
459 Broadway											
							,				
New York, NY 10013				c. Level Registered (Specify)							
,				Federal County:							
				State		Municipality:	e. Election Sum to Date				
							\$ 96.00				
							\$ 96.00				
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)		j. Amount	k. Required Remarks				
1	Online Debit	A		02/01/2016		\$	Campaign				
1	Omme Beat	**		02/01/2010		y	Website				
			,			\$					
. 			لـــ								
4. Payee Inform	ation	<u> </u>	$\overline{}$	Add		Remove					
a. Full Name, Maili	ng Address & Phone		b.	. Coordinated Committee I	Na	me	d. Comments				
(include city, state,	& zip)		-								
			ļ								
_			c.	c. Level Registered (Specify)							
			╽╞	Federal County:		· ·					
			├ └	State		Municipality:	e. Election Sum to Date				
							\$				
f. Account Code	g. Form of Payment	h. Purpose Code	Ц-	i Data (mm/dd/mm)		j. Amount	ly Deguined Demonto				
1. Account Code	g. Form of Payment	iii r ur pooc couc	\dashv	i. Date (mm/dd/yyyy)	\dashv	j. Amount	k. Required Remarks				
						\$					
					-						
						\$					
4. Payee Inform	ation			dd 🔲	L	Remove	<u> </u>				
*	ng Address & Phone		Т****	b. Coordinated Committee Name			d. Comments				
(include city, state,			-				u. comments				
(include city, state,	ω ειρ)										
c. Level Registered (Specif						· · · · · · · · · · · · · · · · · · ·					
				Federal County:							
			▎፟፟፟	State		Municipality:	e. Election Sum to Date				
			_								
							\$				
f. Account Code	g. Form of Payment	h. Purpose Code	П	i. Date (mm/dd/yyyy)		j. Amount	k. Required Remarks				
					T	ø					
			ļ			\$					
			П			\$					
						D					
5. Total only thi					\$ 96.00						
	CRO-1310 Pages										
	line 13a of Detailed Sum						\$ 96.00				
_	line 13b of Detailed Sum	•									
(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											
A* - Media E - Salaries					Public Office Expenses						
I - Postage	F* - Equipment J - Penalties	K* - Offic		·							
O* - Other											
* Codes require detailed explanation in required remarks field (k)											

Disbursements

Amendment