Disclosure	Report	Cover
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Amendmen	t	 	
☐ 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 Information					
a. Full Name					c. ID Number
The Committee	e to Elect	Justin 1	Hall	-	5 D44P4
b. Mailing Address (include City, S	tate and Zip Code)				d. Date Filed
5254 S no	Hwy62				1/29/16
5254 S NO Bullington,	nc Ítais	-			836-643-0563
2. Report Year 3. Period Sta	rt Date (mm/dd/vv)	4 Period F	nd Daté (mm/dd/v	v) 5. Treasure	
2015 12/17			31/15	Justi	A
6. Type of Committee (Checl	k One) 9.7	Type of Rep	ort (check only o		ort from one category)
= : =	·	nicipal	State/Coun		Referendum
	Referendum	Organizationa		izational	Organizational
= · · -	oint Fundraiser	Thirty-five da	1—	-	Pre-referendum
Legal Expense Fund	片	Pre-primary	<u> </u>	irst	Final
7. Type of Fund (if applicat		Pre-election	 	econd	Supplemental Final
Booster Fund (1) applicate	ne, eneck one)	Pre-runoff Semi-annual		'hird 'ourth	Annual Special
Building Fund	l _—	Mid Yea	ı—		Special
	IH	Year End	I—	iid Year	10. Special Report Name
Other:		Final	1=	ear End	10, 5 poom 10 po 1
8. Number of Fundraisers th	nis Report 🔲		Final		
			Specia	.1	
11. Account Information			11. Account Info	rmation	
a. Financial Institution Full Name	<u> </u>	2	a. Financial Institut		<u> </u>
American National	Bank				
b. Purpose	c. Account Code		b. Purpose		c. Account Code
	j				
Campaign Account	d Pariod Pagin Pa	longo			d Davied Design Delegas
		d. Period Begin Balance			d. Period Begin Balance
	\$, 0,0				\$
CERTIFICATION					
I certify that the Committee or					
of the NC General Statutes and		-	-		unds. I further certify that this
report is complete, true and cor	rect and that I have b	een trained by	the NC State Board	of Elections.	
1. (1) 11 11			000		1/20/5
Printed Name of S	N:		nature of Appointed T		<u> 1/ 28/16</u>
FOR OFFICE USE ONLY	orgner	/o1g	nature of Appointed 1	reasurer	, Date
1	2011		17	Da	Lucius Mathad
Date Received:	-29-16	Emplo	yee: <u> </u>	<u> </u>	<u>livery Method</u> Normal Mail
Date Postmarked:		Emplo	yee:	— 🛱	Registered Mail Hand Delivered
Date Scanned:	2-8-16	Emplo	yee: <u>JG</u>		Electronically Filed
Date Data Entered:		Emplo	yee:		Signer has not received mandatory training
Please Note: This form	cannot be used to	amend comn	nittee information	such as the cor	nmittee address, treasurer.
	ant treasurer, custo				
	nd the Statement of				
					<u> </u>

CRO-1000

NC State Board of Elections

August 2008

Detailed SummaryUse this form to summarize all disclosure reporting forms and to total monetary information

Amendment

Yes No

1. Committee Full Name (and Fund if applicable) 2. Type of		Report	3. ID Number			
The Committee to Elect Unstin Hall	Yew E		-			
Start of Election Cycle: January 1, _2013		Total this Reporting Period	Total this Election Cycle			
4) Cash on Hand at Start		\$ 0.00	\$ 0.00			
RECEIPTS						
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$			
6) Contributions from Individuals	(CRO-1210)	\$ 305.00	\$ 305.00			
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$			
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$			
9) Loan Proceeds	(CRO-1410)	\$	\$			
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	\$			
11) Other Receipt Sources						
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)	\$	\$			
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$			
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,	11d and 11e)	\$ 305.00	\$ 305.00)			
EXPENDITURES						
13) Disbursements						
13a) Operating Expenditures	(CRO-1310)	\$ 168.91	\$ 168.91			
13b) Contributions to Candidates/Political Committees	(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)	\$ 105.00	\$ 105.00			
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1	5, 16 and 17)		\$ 273.91			
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	btract line 18)	\$ 31.09	\$ 31.09			
ADDITIONAL INFORMATION	***************************************					
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)					
21) Outstanding Loans (incl. ones from other campaigns)	and the state of t	<u> </u>				
22) Debts and Obligations owed by the Committee	(CRO-1610)					
23) Debts and Obligations owed to the Committee	(CRO-1620)		r.			
24) Account Transfers Within the Committee	(CRO-1720)		A. C.			
25) Administrative Support	(CRO-1710)	\$	\$			
26) Forgiven Loans	(CRO-1440)	<u> </u>	\$			
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$	\$			
28) Contributions to be Refunded	(CRO-1215)	\$	\$			

		rom Individua ndividual contributio		Pg ontributions und		_ RO 1	Amendment Yes No 205 is not used	
		ne (and Fund if appl				_	D Number	
	and property to a series of the series of	Hee to Ele	et Justi			5	504UP4	
	ributor Inform	and the state of t			move			
	ame, Mailing Addr			b. Job Title/Profe	ssion	d. C	omments	
(include city, state, & zip) USTIN Hall				c. Employer's Name/Specific Field				
	5254 5	1 C Hwy 62		Mark Ha	U Elador			
	12 .11 .1	16 17wy 6 2		100000	Inc	e. El	lection Sum to Date	
6 Duian		1, MC 27215	li In Wind Descrip				\$ 305.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	Juon	j. Date (mm/dd/yyy	(y)	k. Amount	
		Electronic Transfer Check	,		12/30/15		\$ 200.00	
		Check	Filing Fe	ح	12/17/15		\$ 105.00	
							\$	
3. Cont	ributor Inform	ation		Add 🔲 Rei	nove			
a. Full N	ame, Mailing Addro			b. Job Title/Profe	ssion	d. C	omments	
(includ	le city, state, & zip)							
				a Employer's Nov	no/Enocific Field	-		
				c. Employer's Nar	ne/Specific Field	ł		
						e. El	lection Sum to Date	
						\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yyy	(y)	k. Amount	
							\$	
							\$	
							\$	
	tributor Inform			Add 🔲 Rei	nove			
	ame, Mailing Addre			b. Job Title/Profe	ssion	d. C	omments	
(includ	le city, state, & zip)			-				
				c. Employer's Nar	ne/Specific Field			
						e. El	lection Sum to Date	
						\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yy)	yy)	k. Amount	
							\$	
							\$	
							\$	
4. Tot	al only this P	age				\$	305.00	
5. Tot	al of ALL CI	RO-1210 Pages 6 of Detailed Summary Po	age CRO-1100)			\$	305.00	

Dish	ursements	
מפועב	uiscillenes	

			1	Amendment	
Pg	\perp	of		☐ Yes	☐ No

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

	full Name (and Fun					2. ID Number
The C	ommittee.	to Elect 1	1/1/57	40 Hal	4	5D4UP4
	ursement (Please		O-1310	forms for e	ach type of Disb	ursement.)
Operating Exp	Personal Property and	ntributions to Candida				rdinated Party Expenditures
4. Payee Inform	nation			Add 🔲	Remove	
a. Full Name, M	Iailing Address & Ph	one		b. Coordinate	ed Committee Name	d. Comments
(include city, state	, & zip)					1
Har	land Clark	_		c. Level Regis	stered (Specify) County:	
1595	5 La Canten	Pkwy		State	Municipa	dity: e. Election Sum to Date
San F	5 La Canten Antonio, TX	78256				\$ 19.60
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Bank Deatt	K	12/	30/15	\$ 19.60	Check Oider
	DUNK DINGT		100,7	-01	\$	- Consideration of the constant of the constan
4. Payee Inform				Add 🔲	Remove	
Control of Second Section Control of the Control of	nauon ling Address & Phone				ed Committee Name	e d. Comments
(include city, sta	J			2. Con umau	Cu Commette Hame	
()	1 ,,				stered (Specify)	
Gol						
144	55 N. Hayder	Rd Suite	277	Federal State	☐ County: ☐ Municipa	e. Election Sum to Date
500+	Isdale, AZ 8	Color College	146			
						\$ 149,31
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	Debit Card	I A	12/	31/15	\$ 69.85	Webste Expenses
)	Debit Lard	A	12/	31/15	\$ 79.46	Website Expenses
4. Payee Infort				Add 🔲	Remove	
a. Full Name, Mai	ling Address & Phone	<u> </u>		b. Coordinat	ed Committee Name	e d. Comments
(include city, sta	ite, & zip)					
1				7 10	1 (0 16.)	
				c. Level Regi		
				State	County: Municipa	ality: 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
					\$	
				-· · · · · · · · · · · · · · · · · · ·	\$	
5. Total only t	his Page					\$ 168.91
AND SACROTHER SERVICES	L CRO-1310 Pages	A vice of the				
。 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	n line 13a of Detailed Su	mmary Page CRO-11	100 if Ope	erating Expens	tes)	\$ 168.91
	n line 13b of Detailed Su					i) \$ 100,511
(This line goes i	n line 13c of Detailed Su	mmary Page CRO-11	100 if Cod	ordinated Party	Expenditures)	
7. Purpose C	Codes (List detaile	d expenditure cod	e in (h.)	above)		
A* - Media	B* - Print	ing	C* - F	undraising		Another Candidate
E - Salaries	F* - Equip			litical Party		olding Public Office Expenses
I - Postage	J - Penalt	ies	K* - (Office Exper	nses Q* - D	onation to Legal Expense Fund
O* Other * Codes requi	re detailed explana	tion in required :	remark	s field (k)		

In-Kind Contributions Use this form to report non-monetary contributions, donations, goo	nds or	servic	Pg es provi	ded to t	of _	1	Amendment Yes fund.	No No
Use CRO-1215 if In-Kind Contributions were or will be refu	inded	withi	n 7 day	S.				Janes J. Denner at St.
1. Committee Full Name (and Fund if applicable)						2. 11) Number	STANT STREET
The Committee to Elect dus		H	ال	4 - 1 - 1 - 1	Talente in Roll (1)		<u>504u</u>	P4
3. Contributor Information L	Ad	A 200 A 1	Ren	5 10 15		3.3		
a. Full Name, Mailing Address & Phone			Contrib	utor		c. Co	mments	
(include city, state, & zip)		Indivi Cand				ŀ		
Justin Hall .	Ä	Party	luate					
52545NC Huy 62	眉	PAC Refer	endum			d. El	ection Sum t	o Date
Bullington, MC 27215		Other	Receipt	Source		\$	305	5.00
e. Description				f. Date	(mm/dd/y	ууу)	g, Fair Marl	cet Amount
Paid Aling fee				12/	17/15		\$ 103	5.00
7 7							\$	
							\$	
3. Contributor Information	Ad	2.00		nove				
a. Full Name, Mailing Address & Phone	b. 7	Type of Indiv	Contrib	utor		c. Co	omments	
		:		Source		d. E	lection Sum t	o Date
e. Description				f. Date	(mm/dd/y	ууу)	g. Fair Mar	ket Amount
							\$	
							\$	
	-	A Sec. V		a Arren		k i daa	Ψ	
3. Contributor Information] A		Contril	nove		1.6	omments	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		Indiv Cand Party	idual lidate	<u>Julioi</u>			Olimicats	
	E	PAC Refe	rendum			d. E	lection Sum	to Date
		=	r Receipt	Source		\$		
e. Description				f. Date	(mm/dd/y	уууу)	g. Fair Mar	ket Amount
							\$	
							\$	
							\$	
4. Total only this Page						\$	10	5.00
5. Total of ALL CRO-1510 Pages						\$	10	5 m =

(This line must be on line 17 of Detailed Summary Page CRO-1100)

105.00