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  1. Committee Information									
a. Full Name	nation				c. ID Number				
	oson For School Board				C 12 Manual				
	ide City, State and Zip Code)				d. Date Filed				
2222 Delaney Dr.	10-26-2016								
Burlington, NC 2721	e. Phone Number								
		01-05-	-17P02:45						
336-675-3479									
2. Report Year	3. Period Start Date (mm/d	dd/yy) 4. Period (mm/dd/yy)	End Date	5. Treasurer Ful					
2016	10/23/2016	Nacistry Manual Co.	1/2016	Joshua Hook Sto					
6. Type of Committee		9. Type of Report			t from one category)				
Candidate Campa PAC	ign Party Referendum	Municipal Organizational	State/C	County Organizational	Referendum Organizational				
Independent	Joint Fundraiser	Thirty-five day		Ouganizational Ouarterly	Pre-referendum				
Expenditure Legal Expense Fu		Timity-nve day		Quarterry	Tre-referendam				
7. Type of Fund	(if applicable, check one)	Pre-primary		First	Final				
Booster Fund"		Pre-election		Second	Supplemental Final				
Building Fund		Pre-runoff		Third	Annual				
		Semi-annual Mid Year	.   🗀 :	Fourth Semi-annual	Special				
Other:		Year End		Mid Year	10. Special Report Name				
		Final		Year End					
8. Number of Fundr	aisers this Report	Special Special		Final					
44 4 14 0		V200, 17.2 % 3 40 2 1 40 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Special					
11. Account Informa			11. Account l	Information itution Full Name					
Fidelity Bank	an rame		a. Pinanciai inst	itution Fun Ivanic					
b. Purpose	c. Account Code		b. Purpose		c. Account Code				
Contribution Expenditures	1								
-	d. Period Begin Balance				d. Period Begin Balance				
	\$ 407.35	-			\$				
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 Ecctions.									
Joshua H. St	Printed Name of Signer		ignature of Appoint	ted Treasurer	01/05/2017 Date				
FOR OFFICE USE O		J	V Appoint	icu i i casurci	Date				
Date Received:	1/5/17	Employee:	_5	5H_	Delivery Method Normal Mail				
Date Postmarked		Employee:			Registered Mail Hand Delivered				
Date Scanned:									
Date Data Entere	ed:	Employee:	<u></u>		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

Amendment

**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.			S. ID Number
	uarterly		<u> </u>
Start of Election Cycle: January 1,	2016	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 407.35	\$ 193.40
RECORD			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 0	\$ 570.00
6) Contributions from Individuals	(CRO-1210)	\$ 100.00	\$ 2,075.00
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0	\$ 500.00
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$ 100.00
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)	\$	\$
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 1	ld and 11e)	\$ 100.00	\$ 3,245.00
EXPERIOUTURES CAPACITY OF THE PROPERTY OF THE	e e e e e e e e e e e e e e e e e e e		
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 275.00	\$ 3,206.05
13b) Contributions to Candidates/Political Committee	s (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)	\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 1	6 and 17)	\$ 0	\$
19) Cash on Hand at End (Add lines 4 and 12 together, then subtrac	t line 18)	\$ 232.35	\$ 232.35
<u>AND)DITTI (ONTANLITE ROTRINI KATULONE ERE</u>			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) 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)	\$	\$
28) Contributions to be Refunded	(CRO-1215)	\$	\$

		m Individuals	0.5			Retire of	1 1 2 2 5 :	Amendme Yes	E	
		ividual contributions (  (and Fund if applica		or contributions u				t used i <b>ber</b>		
	Tyler Thompson Fo				2.80				<u></u>	
N BESTERN STATE STATE OF THE ST	ibutor Informatio	ence and the second		Add 🗌 F	lemo	ve	724.79			
1	me, Mailing Address	& Phone		b. Job Title/Professi	on		d. Comment	s		
Buddy B	city, state, & zip) aker			Retired						
3264-A N NC Hwy 62			c. Employer's Name	fic Field						
Burlingto	on, NC 27215			Retired			Black Control			
336-226-	-1898						e. Election Sum to Date			
							\$	100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description		j. Date (mm/dd/yy	yy)	k. Amount		
	1	Check				11/07/20	016	\$	100.00	
								\$		
								\$		
3. Contr	ibutor Informatio	on		Add 🔲 R	Remov	ve			, e	
	ne, Mailing Address	& Phone		b. Job Title/Profession	on		d. Comment	S		
(include	city, state, & zip)			_						
				c. Employer's Name	/Specif	fic Field	<u> </u> 			
							e. Election Sum to Date			
							\$	<del>-</del>		
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Description	j	. Date (mm/dd/yy	yy)	k. Amount		
								\$		
								\$		
	:							\$		
33 - 2 - 30 17 39 L T. KAR	ibutor Informatio	20, 20, 20, 20, 20, 20, 20, 20, 20, 20,		1	lemov	ve		ta transfer		
I	ne, Mailing Address & city, state, & zip)	& Phone		b. Job Title/Profession	on		d. Comment	s		
(	010,10000,000			1						
				c. Employer's Name	Specif	ic Field				
							e. Election S	um to Date		
							\$			
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Description	j	. Date (mm/dd/yyy	yy)	k. Amount		
								\$		
								\$		

4. Total only this Page

5. Total of ALL CRO-1210 Pages

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

\$

100.00

100.00

\$

\$

					Ameno	lment		
Disbursements	Pg	1	of	1		Yes	$\mathbf{X}$	ľ
Is this form to report expenditures from the committee for exercting over					data/maliti	I		

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)  Pamela Tyler Thompson For School Board							
			PO 1210 Come Con acc				
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)  Operating Expenses Coordinated Party Expenditures							
	nation *			Remove	ordinated 1 arty Exponentials		
	ing Address & Phone		b. Coordinated Committe		d. Comments		
(include city, state,	_						
Alamance New							
114 W. Elm Str	eet		c. Level Registered (Speci	fy)			
Graham, NC 27	'253		Federal \( \sum \)	County:	7		
			State	Municipality:	e. Election Sum to Date		
336-228-7851					\$ 1,093.12		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Check	A	10/31/2016	\$275.00	Newspaper Ads		
				\$			
4 Pavee Inform	 nation		Add	Remove			
	ing Address & Phone		b. Coordinated Committee		d. Comments		
(include city, state,			2. 2001 11.11.00				
<u> </u>	<u></u>						
			c. Level Registered (Specia	fy)			
			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		
				\$			
				\$			
/ h.		en e	Sano 1 1 3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2				
	nation		Add b. Coordinated Committee	Harrison + Called All Assault 1	J. C		
	ing Address & Phone		b. Coordinated Committee	e ivame	d. Comments		
(include city, state,	& zipj						
			c. Level Registered (Specif	fv)	1		
			Federal	County:	1		
			State	Municipality:	e. Election Sum to Date		
					\$ 1,341.39		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
				\$			
				\$			
5. Total only th	is Page				\$ 275.00		
	CRO-1310 Pages	en e		24.7 Jan 1997	\$ 273.00		
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)							
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)  \$ 275.00							
(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						
E - Salaries I - Postage	F* - Equipment J - Penalties	G - Politic	al Party ee Expenses		Public Office Expenses		
O* - Other	J - I charnes	A" - UHIC	e expenses	Q^ - Donatio	n to Legal Expense Fund		
	e detailed explanati	on in required re	marks field (k)				