Disclosure Report Cover	
Use this form for general report and committee information	

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
Committee to Ele	et Tom	Gamble	
b, Mailing Address (include City, State and Zip Code)			d. Date Filed
1824 Laurie Driv	e		1/11/2017
Haw River, NC &	27258		e. Phone Number 336 - 578 - 363
2 Panoid Vanc 2 and a server construction	8		
2. Report Year 3. Period Start Date (mm/dd/y	12/31/		ert Thomas Gamble
			report from one category)
	s rype or xeport Iunicipal	State/County	Referendum
PAC Referendum	Organizational	Organizational	Organizational
☐ Independent Expenditure ☐ Joint Fundraiser	Thirty-five day	Quarterly	Pre-referendum
Legal Expense Fund	Pre-primary	First	Final
	Pre-election	Second	Supplemental Final
7. Type of Fund (if applicable, check one)	Pre-runoff	Third	Annual
Booster Fund	Semi-annual	Fourth	Special
☐ Building Fund	Mid Year	Semi-annual	
·	Year End	Mid Year	10. Special Report Name
Other:	Final	Year End	
8. Number of Fundraisers this Report	Special	Final	
		☐ Special	
11. Account Information	111	Account Information	
a. Financial Institution Full Name	ACT TO A CONTRACT OF THE PARTY	Financial Institution Full Nam	le .
Fidelity Bank of A	M I	Control of the Contro	
b. Purpose c. Account Code		Purpose	c. Account Code
#1	6 - pto 15-40-9-188,19 188	and the second second second second second	
d. Period Begin	Ralance		d. Period Begin Balance
\$ 30.			\$
CERTIFICATION			
I certify that the Committee or Fund is in complian	ace with all applical	ale provisions of Article 22 A	22B & 22D-22M of Chanter 163
of the NC General Statutes and that no funds are c			
report is complete, true and correct and that I have	-		-
	\mathcal{N}_{n}	Xh oo	
Robert Thomas Camble		Kanble	1/11/201/
Printed Name of Signer	// Signati	re of Appointed Treasurer	Date
FOR OFFICE USE ONLY			
Mila	7	F1/C	Delivery Method
Date Received:	l Employee		☐ Normal Mail
Date Postmarked:	Employee		Registered Mail
The state of the s	1 Limployee		Hand Delivered
Date Scanned: 1/19/201	Employee	: <u> </u>	☐ Electronically Filed
Date Data Entered:	Employee	Masa samana di Jamasa	☐ Signer has not received mandatory training
Please Note: This form cannot be used to	o amend committe	ee information such as the	committee address, treasurer,
		formation, or account inf	2
You must amend the Statement			•
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CRO-1000

NC State Board of Elections

August 2008

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

Amendment

Yes No

1. Committee Full Name (and Fund if applicable)		Report	3.	ID Number
Committee to Elect Tom G	emble		Qtr	
Start of Election Cycle: January 1, 2016		•	Total this orting Period	Total this Election Cycle
4) Cash on Hand at Start		يسأهننا والبسال	30.75	\$ 30.75
RECEIPTS	Service Servic			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$		\$
6) Contributions from Individuals	(CRO-1210)	\$	75.0D	\$1510,49
7) Contributions from Political Party Committees	(CRO-1220)	\$		\$ 600.00
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	over readmentalizada para Sar veren esse utilizado reserv			
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)	\$	75.00	\$2110,49
<u>EXPENDITURES</u>			San Garage Control of the Control of	
13) Disbursements	II HOOMIS DAY VASSANIA SOA OO			
13a) Operating Expenditures	(CRO-1310)	\$ ~	<u> 158,73</u>	\$1923,30
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)	\$		\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1				\$
19) Cash on Hand at End (Add lines 4 and 12 together, then sut	otract line 18)	\$ \	87.19	1 187, 19
ADDITIONAL INFORMATION 20) Non Monotony Ciffs Civen to Other Committees	(GR)			
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-2220)	\$		\$
28) Contributions to be Refunded	(CRO-1215)	\$	Carrier Statement Section 1999	\$

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	ame, Mailing Addro e city, state, & zip)	ess & Phone		b. Job Title/Profes	sion	d. Co	omments
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	•			c. Employer's Nan	ie/Specific Pleid		
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		ton, NC			/	\$	150.00
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committees and	d coordinated party e	xpenditures	November 1984	er en				
1. Committee	Cull Name (and cun	d if applicable)					2: ID Number	
Comm	vittee to	thect	Lav	n Ga	mb	le		
3. Type of Dis		e use separate CI					sement)	
Operating Ex	penses Co	ntributions to Candid	ates/Politi	cal Committee	S	9-7	nated Party Expenditures	1
4. Payee Infor				'Add /	Remove			1
a. Full Name, N (include city, state	Mailing Address & Pl	ióne		b. Coordinat	ed Commi	ttee Name	d. Comments	
							The payee is	
Rober	t Thomas	Gamble	3	c. Level Regi	stered (Sne	erify)	The payee is the candidate	
1824	Laurie D	rive		☐ Federal	4 4 4	County:	1/100 02-10-1	
	River No		į.	☐ State		Municipality	e. Election Sum to Date	
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. Total only th	is Page						\$ 758.73	
. Total of ALL	CRO-1310 Pages						130115	
(This line goes in	line 13a of Detailed Sum	mary Page CRO-110	0 if Oper	ating Expense	s)		75077	
(This line goes in	line 13b of Detailed Sum	mary Page CRO-110	0 if Conti	rib to Candida	tes/Politica	l Comm)	\$ 758.73	
こうでもなりからない 田田 はないとのできっているかった	line 13c of Detailed Sum				Expenditure	es)		l
	odes (List detailed)	The Court of the Party of the Court of the C	THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.	CALL STREET, SALES OF THE STREET, SALES				
* - Media - Salaries	B* - Printin	Y., 23		ndraising			other Candidate	
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Codes require	e detailed explanation	n in required re	marks	field (k)				İ

Disbursements

Amendment

Yes



North Carolina

State Board of Elections 441 N Harrington Street

441 N Harrington Street Raleigh, NC 27603

Kim Westbrook Strach Executive Director Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173

Certification of Inactive Status

This certification is used by Candidate, Party, PACs and Referendum Committees to declare their intent to be inactive, which is not raising or spending any money on behalf of the campaign.

This Certification is filed at the Board of Elections office where the committee's campaign reports are filed.

FILED BY:	
Committee Name:	Committee to Elect Tom Gamble
Treasurer Name:	Robert Thomas Gamble
Treasurer Address:	1824 Laurie Drive
(include city, state, & zip)	Haw River, NC 27258
Treasurer Phone:	336-578-3632

I certify that the above named candidate/political committee intends to receive no contributions, nor make any expenditures, until the committee resumes activity.

I understand that if the above circumstances change, it will be necessary for the person responsible for filing financial disclosure reports to file an amended Statement of Organization and the Certification to Return to Active Status form (CRO-3300) within ten days.

1/11/2017 Date Signed

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01-11-17P05:33 RCVD