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 Info	1. Committee Information						
a. Full Name							
Committee to	Committee to elect waxar Beam Alamane Loudy						
b. Mailing Address (include City, State and Zip Code)						d. Date Filed	
IIII Mac Phonesoulkono						110/11	
13	in told.	Nil. 77	110			76	11 0/10
1111 Mc PhensonRoad 13 un lington, N. 1. 27215						e. Phone Number	
336-437-384							
2. Report Year 3. Period Start Date (mm/dd/yy) 4. Period End Date (mm/dd/yy) 5. Treasurer Full Name							
2015	/2/21/ 1:			115			wax Ne Beey
6. Type of Commi		THE PARTY OF THE PROPERTY OF THE PARTY OF TH	The state of the s	O'COSE BOLDON CONTUITS ED-MUNION	SEASON SEPTEMBERS		rt from one category)
X Candidate Campai		23,00,000	icipal		te/County		Referendum
PAC	limencol.	rendum	Organizational		Organizati	ional	Organizational
Independent Expen		Fundraiser	Thirty-five day	'	Quarterly		Pre-referendum
Legal Expense Fur	nd		Pre-primary		First		Final
			Pre-election	닏	Seco		Supplemental Final
7. Type of Fund	(if applicable, o	check one)	Pre-runoff		Third		Annual
Booster Fund			Semi-annual		Fourt		Special
Building Fund		ᄩ	Mid Year Year End		Semi-annı Mid		10. Special Report Name
Other:		片	Final		Year		10. Speciai Keport Ivame
8. Number of Fun	droicore this l	Poport H	Special		Final	Eliu	
o. Indiliber of Full	nuraisers uns i	Xeport	эрестаг	片			¥.
C	/				Special		
11. Account Infor				11. Accou			
a. Financial Institution				a. Financial	Institution	Full Name	
Capital	isaur						
b. Purpose		c. Account Code		b. Purpose			c. Account Code
Ca mpaig	14	\bigcirc					
Ca if is	, ,	d. Period Begin Ba				d. Period Begin Balance	
		-					
		\$ 0					\$
CERTIFICATIO	N						
I certify that the Co	ommittee or Fun	d is in compliance	with all appl	icable provis	sions of Ar	ticle 22A, 221	B & 22D-22M of Chapter 163
of the NC General	Statutes and tha	t no funds are com	mingled with	prohibited of	or other no	n-disclosed fu	ands. I further certify that this
report is complete, true and correct and that I have been trained by the NC State Board of Elections.							
117/1/							
Maul	JayneD	ally	assa	1 Way	me 150	being	11, 1110
CONTRACTOR OF THE PARTY OF THE	ited Name of Signe	er Tarangan	Sig	nature of App	ointed Treas	surer	Date
FOR OFFICE US	SE ONLY	0111			10		
Date Received	l: <u>//</u>	8116	Employ	/ee:	16	— <u>De</u> j	<u>livery Method</u> Normal Mail
Date Postmark	red:		Employ	/ee:		_ 🖁	Registered Mail Hand Delivered
	1_	19-16			16	X	Electronically Filed
Date Scanned:	1	19-14	Employ	/ee:	00	_ "	
Date Data Ente	ered:		Employ	/ee:		_ □	Signer has not received 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.							
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CRO-1000

NC State Board of Elections

August 2008

Amendment Detailed Summary
Use this form to summarize all disclosure reporting forms and to total monetary information ☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)	2. Type of	Report 3	. ID Number
Comm. to Elect wayne Begy ongar		2.91'64a	
Start of Election Cycle: January 1, 20/2		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 0	\$ 0
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$ 105.00	\$ 105.00
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	HONOLOGICAL ACTIVITY CACCOLLICATIVI COM ANY ANY CACCOLLICA		
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)	\$ 105.00	\$ 105.00
<u>EXPENDITURES</u>			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$	\$
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)	\$	\$
19) Cash on Hand at End (Add lines 4 and 12 together, then su	otract line 18)	\$ 0	\$ 0
ADDITIONAL INFORMATION	****		
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)	\$	and the second second
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)	\$	\$

Contributions from Individuals Use this form to report individual contributions over \$50 or contributions.				Pg	of Ler \$50 if form CF		nendment Yes No 5 is not used	
SECTION AND ADDRESS.	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							
Cou	Committee To Elect wakke Beam County Comm.							
3. Cont	ributor Inform	ation		Add Re	nove			
	ame, Mailing Addr			b. Job Title/Profe	1	d. Com	ments	
(include city, state, & zip)				Retined				
Alan waxye Beam Road				c. Employer's Name/Specific Field				
Han warre Beam Road 1111 McPhenson Road Bunlington, 11. (. 27215)				A.B.S.S.				
1	20.11.191	7					ion Sum to Date	
							05.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descri	otion	j. Date (mm/dd/yyy		Amount	
	D	check	Filing Fe	e.e	12/2//18	\$	105.00	
						\$	3	
						\$)	
3. Cont	ributor Inform	ation		Add Re	nove			
	ame, Mailing Addr			b. Job Title/Profe	ssion	d. Com	ments	
(includ	e city, state, & zip)			<u>-</u>				
				c. Employer's Na	ne/Specific Field			
			*			e. Elect	ion Sum to Date	
						\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descri	ption	j. Date (mm/dd/yy	yy) k.	Amount	
						\$	3	
						\$	3	
					,	\$	5	
Lesson Della Property (Control of Control of	ributor Inform			Add Re				
	ame, Mailing Addr e city, state, & zip)			b. Job Title/Profe	ssion	d. Com	ments	
(includ	e city, state, & zip)			á I				
				c. Employer's Na	me/Specific Field			
						e. Elect	tion Sum to Date	
						\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descri	ntion	j. Date (mm/dd/yy		Amount	
	6. Account Code	n. Polin of Payment	i. In-Ixina Descri	hmair	J. Date (min/du/yy	yy) K. \$		
						\$		
						\$	8	
4. Tot	al only this P	age	I			\$	105.00	
5 Total of ALL CDO 1210 Degree								
AND THE PARTY OF T		6 of Detailed Summary 1	Page CRO-1100)			\$	103.	

In-Kind Contributions Use this form to report non-monetary contributions, donations, Use CRO-1215 if In-Kind Contributions were or will be a	goods or services pro	g 1 of or	1	Amendment Yes No r fund.	
1. Committee Full Name (and Fund if applicable) Committee To Elect wayne Born			2.	ID Number	
3. Contributor Information	Add R	emove			
a. Full Name, Mailing Address & Phone	b. Type of Contr	ributor	c. C	Comments	
(include city, state, & zip)	Individual				
Alan Wayne Beam III McPhenson Road Bunlington, N. (. 27215	Candidate Party PAC				
Bunlington, N. (. 27215	Bun (49 +04, N. (, 27215 Referendum			Election Sum to Date	
	Other Recei	pt Source	\$	105.00	
e. Description		f. Date (mm/d	ld/yyyy)	g. Fair Market Amount	
Filiug Fee		12/2//	15	\$ 105.00	
				\$	
				\$	
3. Contributor Information	Add Re	emove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Conti			d. Election Sum to Date	
e. Description		f. Date (mm/d	d/yyyy)	g. Fair Market Amount	
				\$	
				\$	
				\$	
3. Contributor Information		emove			
a. Full Name, Mailing Address & Phone	b. Type of Contr	ibutor	c. C	omments	
(include city, state, & zip)	☐ Individual ☐ Candidate ☐ Party ☐ PAC				
	Referendum		d. E	d. Election Sum to Date	
	Other Receip	ot Source	\$	\$	
e. Description		f. Date (mm/d	d/yyyy)	g. Fair Market Amount	
		AP - 40 - 50 - 50 - 50 - 50 - 50 - 50 - 50		\$	
				Δ.	

4. Total only this Page

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