Amendment

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 In	formation									
a. Full Name								c. ID Number		
BALTUTIS FO	R BURLING	ГОИ								
b. Mailing Addre	ss (include Cit	ty, State and Zip	Code)					d. Date Filed		
2516 S MAURY BURLINGTON				00 04	4.5.5			08/31/2017		
BUKLINGTON	9		09-01-	17PC	3:07 RCV	D	e. Phone Number			
(763) 218-0266										
2. Report Year	3. Period Star	t Date (mm/dd/y	/y)	4. Period	End Da	te (mm/dd/yy)	5. Treasur	er Full Name		
2017		7/01/2017		1	08/29/2		IAN BAL			
6. Type of Comm		One)	9. Typ	e of Repor	t (ci		type of rep	ort from one category)		
X Candidate Cam	ipaign 🔲 Par	ty	Munic			State/County		Referendum		
Joint Fundraise	Description			Organizatio		☐ Organizatio	onal	Organizational		
Referendum	Control	gal Expense Fund		Thirty-five		Quarterly		Pre-referendum		
7. Type of Fund		le, check one)	X	Pre-primar		First		Final		
Booster Fund	- 1			Pre-election Pre-runoff	n	Second Third		Supplemental Final Annual		
Building Fund	ection Year Can	didates Fund		Semi-annua	1	Fourth		Special		
Record .	ipaign Financing		П	Mid Ye		Semi-annua	1	Б брески		
I Ne i done cam	ipaign i maneme	, r unu		Year E		Mid Ye		10. Special Report Name		
Other:				Final		Year E		10. Special Report Laure		
8. Number of Fu	ndraisers this	Report	П	Special		Final				
or remove or re-		2.0 po	Encode .	Special						
	0									
3. Account Infor				•		ount Informat				
a. Financial Insti		me			a. Fina	ncial Institutio	on Full Nam	e		
WELLS FARGO)									
b. Purpose		c. Account Cod	e		b. Purp	oose		c. Account Code		
CAMPAIGN			1		1					
			1							
		d. Period Begin	Balan	ce				d. Period Begin Balance		
		\$		4,094.51				\$		
		Ψ		1,05 1.51				*		
Chapter 163 of	ne Committee of Tthe NC Gener	al Statutes and	that no	funds are	commi	ngled with pro	hibited or o	2A, 22B & 22D-22M of ther non-disclosed ed by the NC State Board		
Lan	Caltul	13			n	W/		09/01/2017		
	inted Name of S	igner	_	Sign	ature of	Appointed Trea	surer	Date		
FOR OFFICE US		9-1-17				de	Del	ivery Method		
Date Receive	ed:	. , , , ,		Emplo	yee: _	00		Normal Mail		
Date Postmai	rked:			Emplo	yee: _		- 6	Registered Mail Hand Delivered		
Date Scanne	d:	9/13/17		Emplo	yee: _	16	_	Electronically Filed		
Date Data En	itered:		_	Emplo	yee: _			Signer has not received mandatory training		
	assista	annot be used to treasurer, cused the Statement	todian	of books i	nformat	tion, or accour	nt information			

	Total This Period	Total This Election
Cash on Hand at Beginning	\$4,094.51	\$160.21
RECEIPTS	\$0.00	\$0.00
Aggregated Contributions from Individuals	\$82.00	\$82.00
Contributions from Individuals	\$9,405.43	\$13,501.43
Political Party Committees	\$0.00	\$0.00
Other Political Committees (such as PACs)	\$0.00	\$0.00
Loan Proceeds	\$0.00	\$0.00
Refunds/Reimbursements To the Committee	\$0.00	\$0.00
Interest on Bank Accounts	\$0.08	\$0.08
Contributions from Not-For-Profit Organizations	\$0.00	\$0.00
Outside Sources of Income	\$0.00	\$0.00
Legal Expense Fund - Other Sources	\$0.00	\$0.00
Exempt Purchase Price Sales	\$0.00	\$0.00
Total Receipts	\$9,487.51	\$13,583.51
EXPENDITURES	\$0.00	\$0.00
Operating Expenditures	\$538.30	\$590.00
Contributions to Candidates/Political Committees	\$0.00	\$0.00
Coordinated Party Expenditures	\$0.00	\$0.00
Aggregated Non-Media Expenditures	\$144.13	\$144.13
Loan Repayments	\$0.00	\$0.00
Refunds/Reimbursements From the Committee	\$49.00	\$49.00
In-Kind Contributions	\$215.43	\$325.43
Total Expenditures	\$946.86	\$1,108.56
Cash on Hand at End of Reporting Period	\$12,635.16	\$12,635.16
ADDITIONAL INFORMATION	\$0.00	\$0.00
Non-Monetary Gifts Given to Other Committees	\$0.00	\$0.00
Outstanding Loans (incl. ones from other campaigns)	\$0.00	\$0.00

	Total This Period	Total This Election
Debts and Obligations owed BY the Committee	\$0.00	\$0.00
Debts and Obligations owed TO the Committee	\$0.00	\$0.00
Account Transfers Within the Committee	\$0.00	\$0.00
Administrative Support	\$0.00	\$0.00
Forgiven Loans	\$0.00	\$0.00
48-Hour Notice Reports Sum	\$0.00	\$0.00
Contributions to be Refunded	\$0.00	\$0.00

RECEIPTS

Date Pr	And Complete Mailing	Re Type Pur De	Ac Code	Form Am Sum Of Of To Paym Receil Date
08/	Aggregated Individual Contribution	Indi Contril	1	Ele Funds \$3 \$3 Transf
08/	Aggregated Individual Contribution	Indi Contril	1	Ele Funds \$2 \$2 Transf
08/	Aggregated Individual Contribution	Indi Contril	1	Ele Funds \$2 \$2 Transf
08/	DAVID ASHER PROJECT MANAGER AT&T 2251 SUNBERRY DR GRAHAM, NC 27253	Indi Contri	1	Ch \$2 \$2

ls Date Pri	And Complete Mailing	Re Type	ΠΔ	Ac Code	Of	Am Of Recei _l	То
07/	IAN BALTUTIS BUSINESS ADMINISTRATION Management of Companies and Enterprises 2516 S MAURY ARCH BURLINGTON, NC 27215	Indi Contri∣	FA ADS	1	In Kind	\$1	\$2
07/	IAN BALTUTIS BUSINESS ADMINISTRATION Management of Companies and Enterprises 2516 S MAURY ARCH BURLINGTON, NC 27215	Indi… Contri∣	FIR CLAS! STAM - 100 PCS	1	In Kind	\$4	\$2
08/	IAN BALTUTIS BUSINESS ADMINISTRATION Management of Companies and Enterprises 2516 S MAURY ARCH BURLINGTON, NC 27215	Indi Contril	FA ADS	1	In Kind	\$1	\$2
08/	IAN BALTUTIS BUSINESS ADMINISTRATION Management of Companies and Enterprises 2516 S MAURY ARCH BURLINGTON, NC 27215	Indi Contri	FA ADS	1	In Kind	\$0.16	\$2

Date Pr	And Complete Mailing	Re Type	De	Ac Code	Form Am Of Of Paym Recei	То
08/	IAN BALTUTIS BUSINESS ADMINISTRATION Management of Companies and Enterprises 2516 S MAURY ARCH BURLINGTON, NC 27215	Indi Contri	FA ADS	1	In \$5 Kind	\$2
07/	HAROLD BATES HR MANAGER GLEN RAVEN INC 2204 TEAL CT BURLINGTON, NC 27215	Indi Contri [‡]		1	Ch \$2	\$2
07/	ELAINE BIXBY IMMUNOLOGY SALES MANAGER INVENTIV HEALTH 1022 W FRONT ST BURLINGTON, NC 27215	Indi Contri		1	Ele Funds \$1 Transf	\$1
07/	KATIE CHUNG SALES MANAGER SOUTHLAND ELECTRIC 2431 HICKORY AVE BURLINGTON, NC 27215	Indi Contril		1	Ch \$1,	\$1,
07/	SCOTT FOWLER ACCOUNTANT UNICHEM INC 604 WOODVALE DR GREENSBORO, NC 27410	Indi Contri		1	Ch \$2	\$2

Date Pr	And Complete Mailing	Re Type Pur De	Ac Code	Form Am Sum Of Of To Paym Receil Date
07/	CLAIRE HASLAM Community Entrepreneur Self Employed PO BOX 118 SAXAPAHAW, NC 27340	Indi… Contri∣	1	Ele Funds \$6 \$6 Transf
08/	JEFFERSON HOLT REAL ESTATE INVESTOR SELF EMPLOYED PO BOX 1029 CARRBORO, NC 27510	Indi Contri	1	Ele Funds \$8 \$8 Transf
07/	SAM HUNT CHAIRMAN HUNT ELECTRIC SUPPLY 1218 W DAVIS ST BURLINGTON, NC 27215	Indi Contri	1	Ele Funds \$2, \$2, Transf
07/	JOSEPH KALO ATTORNEY PITTMAN & STEELE PLLC 2104 WESTOVER TERRACE BURLINGTON, NC 27215	Indi Contri	1	Ch \$2 \$2
07/	SEAN MCMAHON PROFESSOR ELON UNIVERSITY 948 TREMORE CLUB DR BURLINGTON, NC 27215	Indi Contri	1	Ele Funds \$1 \$1 Transf

Date	Is And Complete Mailing Address	Re Type Pur De	Ac Code	Form Am Sum Of Of To Paym Receil Date
08/	WILLIAM MONER PROFESSOR ELON UNIVERSITY 2510 S MAURY ARCH BURLINGTON, NC 27215	Indi Contril	1	Ch \$2 \$2
07/	BEBE O'DONNELL SALES SELF EMPLOYED 30 BENT TREE CT GIBSONVILLE, NC 27249	Indi Contri	1	Ch \$7 \$7
07/	CLINT PORTERFIELD OWNER WOW SERVICES 1529 WHITES KENNEL RD BURLINGTON, NC 27215	Indi Contri∣	1	Ele Funds \$5 \$6 Transf
	CLINT PORTERFIELD			
08/	OWNER WOW SERVICES X 1529 WHITES KENNEL RD BURLINGTON, NC 27215	Indi Contril	1	Ele Funds \$1 \$6 Transf
07/	DEVA REECE PRINTING SIR SPEEDY 3005 WESTON CT BURLINGTON, NC 27215	Indi Contri	1	Ch \$5 \$5
07/	PHILLIP SMITH OWNER THE OAK HOUSE PO BOX 652 ELON, NC 27244	Indi Contri	1	Ch \$2 \$2

Date	Is And Complete Mailing Address	Re Type Pur De	Ac Code	Form Am Sum Of Of To Paym Recei Date
07/	JEREMY TEETOR CHIEF FINANCE OFFICER CASWELL COUNTY SCHOOLS 516 PEELE ST #A BURLINGTON, NC 27215	Indi Contri⊦	1	Ele Funds \$5 \$5 Transf
07/	RAJESH WADHWANI PRESIDENT RAJ APPAREL INC 409 BRICKWALK CT ELON, NC 27244	Indi Contril	1	Ch \$5 \$5
08/	WELLS FARGO 2832 S CHURCH ST BURLINGTON, NC 27215	Int Earne	1	Ele Funds \$0.08 \$0.08 Transf
07/	RAY WOMACK CEO WOMACK ELECTRIC SUPPLY CO 2310 HICKORY AVE BURLINGTON, NC 27215	Indi Contri	1	Ch \$1, \$1,
				\$9,
1 - 28 Of 28	3 Records	Pre	·v <u>1</u>	. Next

EXPENDITURES

Form Am... Sum In-Name Of Payee And Acc... То Date Of Of Kind Complete Mailing Address Type Code Payme Expend Date Descrip Aggregated Non-Media Ope... FILI... 07/... 1 Check \$20.... \$25... Expenditure ExpensFEE

Date	Name Of Payee And Complete Mailing Address	Exp Type	Pur	In- Kind Descrip	Acc Code	Of	Am Of Expend	Sum To Date
07/	Aggregated Non-Media Expenditure	Ope Expens	PA PROC FEE	i E	1	Elec Funds Transfe		\$18
07/	Aggregated Non-Media Expenditure	Ope Expens	PA PROC FEE	E	1	Elec Funds Transfe	\$30	\$18
07/	Aggregated Non-Media Expenditure	Ope Expens	PA PROC FEE	E	1	Elec Funds Transfe	\$3.20	\$18
08/	Aggregated Non-Media Expenditure	Ope Expens		E	1	Elec Funds Transfe	\$42	\$18
08/	Aggregated Non-Media Expenditure	Ope Expens	PA PROC FEE	E	1	Elec Funds Transfe	\$2.06	\$18
08/	Aggregated Non-Media Expenditure	Ope Expens			1	Check	\$40	\$40
	IAN BALTUTIS	-						
07/	BUSINESS ADMINISTRATION 2516 S MAURY ARCH BURLINGTON, NC 27215	from the	REI FOR STAMI		1	Elec Funds Transfe	\$49	\$27
	IAN BALTUTIS							
07/	BUSINESS ADMINISTRATION Management of Companies and Enterprises 2516 S MAURY ARCH BURLINGTON, NC 27215 IAN BALTUTIS	In- Kind Contrib		FIRST CLASS STAMF - 100 PCS			\$49	\$27
07/	Management of Companies	In- Kind Contrib		FA ADS			\$16 \$	\$27

	Date	Name Of Payee And Complete Mailing Address	Exp Type	Pur	In- Kind Descri	Acc Code	Of	Am Of Expend	Sum To Date
	08/	IAN BALTUTIS BUSINESS ADMINISTRATION Management of Companies and Enterprises 2516 S MAURY ARCH BURLINGTON, NC 27215	In- Kind Contrib		FA ADS			\$10	\$27
	08/	IAN BALTUTIS BUSINESS ADMINISTRATION Management of Companies and Enterprises 2516 S MAURY ARCH BURLINGTON, NC 27215	In- Kind Contrib		FA ADS			\$0.16	\$27
(08/	IAN BALTUTIS BUSINESS ADMINISTRATION Management of Companies and Enterprises 2516 S MAURY ARCH BURLINGTON, NC 27215	In- Kind Contrib		FA ADS			\$50	\$27
(08/	WAYNE DRUMHELLER WRITER SELF EMPLOYED 2722 KINGSBURY CT BURLINGTON, NC 27215	Ope	CA BOOK LAYOL		1	Check	\$75	\$75
()7/	PAYPAL , NC		PA PROCE FEE		1	Elec Funds Transfe	\$58	\$18
()7/	SHARP CONNECTIONS LLC 21109 W 81ST TERR LENEXA, KS 66220	Ope Expens			1	Check	\$35	\$35
()8/	COUNTY	Ope Expens			1	Elec Funds Transfe	\$55	\$55

Date	Name Of Payee And Complete Mailing Address	Exp Type	Pur	In- Kind Descri	Acc Code	Form Of Payme	Am Of Expend	To
							\$94	
1 - 17	Of 17 Records				Prev	1	Next	

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