Disclosure Report Cove	Disc	losure	Report	Cover
------------------------	------	--------	--------	-------

Amen	dment	
☐ Ye	s X	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.

	y was a service of the service of th								
1. Committee In	iormation							c. ID Number	
a. Full Name								c. ID Number	
PATRICK MIL	LS FOR CITY	COUNCIL						7)	,
b. Mailing Addre	ess (include Ci	ty, State and Zi <sub>l</sub>	p Code)					d. Date Filed	
1981 GLENKII BURLINGTON		1.0	70	17410.	11 0	01/0		10/29/20	)17
BORBINGTO	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	10	1-50-	17A10:	11 1	CVD		e. Phone Numb	er
							x	(336) 263-	8710
2. Report Year	3. Period Star	t Date (mm/dd/	yy)	4. Period	End Da	te (mm/dd/yy)	5. Treasur	er Full Name	
2017			10/23/2	2017	PATRICK	MILLS			
6. Type of Comm		One)	9. Тур	e of Repor	t (cl	PATRICIPATION AND AND AND AND AND AND AND AND AND AN	type of rep	ort from one cat	egory)
X Candidate Can	npaign 🔲 Par	ty	Munic			State/County		Referendum	
☐ Joint Fundraise	er 🔲 PA	C		Organizatio	nal	Organizatio	nal	Organization	al
Referendum	☐ Leg	gal Expense Fund		Thirty-five	day	Quarterly		Pre-referend	ım
7. Type of Fund		le, check one)		Pre-primary	v	☐ First		☐ Final	
"Booster Fund			X	Pre-election		Second		☐ Supplemental	Final
Teampel .				Pre-runoff	•	Third		Annual	
		F1.4. F. 1	ᆫ		1	found		bood	
Beened	lection Year Can		_	Semi-annua		Fourth		Special	
☐ NC Public Can	npaign Financing	g Fund		Mid Ye		Semi-annua			
				Year E	nd	☐ Mid Ye		10. Special Re	ort Name
Other:				Final		Year E	nd	4	
8. Number of Fu	ndraisers this	Report		Special		☐ Final			
	0					☐ Special			
3. Account Infor	3. Account Information								
a. Financial Insti		me			a. Fina	ncial Institutio	n Full Nam	e	
TRULIANT FO	CU				TRUL	IANT FCU	WANTED TO THE CONTROL OF THE CONTROL		
b. Purpose		c. Account Cod	le		b. Purp	oose		c. Account Code	
CHECKING			A		SAVI	NGS ACCT TO	O OPEN	В	
					CHEC	KING			
		d. Period Begin	n Balan	ce				d. Period Begin	Balance
		\$		925.86				\$	5.00
CERTIFICATIO	N								
		or Fund is in co	mpliand	ce with all a	pplicab	ole provisions	of Article 2	2A, 22B & 22D-	22M of
								ther non-disclo	
1								ed by the NC Sta	
iulius. Tiuliuli	er certify that t	ins report is co	приси,	truc and c	officet a	ird that I have	occi tranc	d by the Ne st	ite Bould
DL.	100	2.1/2		1/1-	1/	bul		10/29/20	017
TOTTICI	(c ), /	7.715		fan	Auro of	Appointed Trea	annon.	Date	
FOR OFFICE US	rinted Name of S	agner		/ Sign	ature or	Appointed Trea	Sui ei	Date	
TORGITTEE		0/0-11				NG	Del	livery Method	
Date Receive	ed: <u>(</u>	0130117	_	Emplo	yee: _	00		Normal Mail	
Date Postma	rked:			Emplo	yee: _		- 片	Registered Mai Hand Delivered	
		111-11				16	4	Electronically F	
Date Scanne	ed:	11/15/17	_	Emplo	yee: _	70	- "	Electronically 1	neu
Date Data Er	atarad:			Emplo	vee'			Signer has not	received
Date Data El	noicu			ыфю	,		-	mandatory train	ing
Please Not	e: This form c	annot be used	to amer	nd committe	ee infor	mation such as	s the comm	ittee address, tro	easurer,
		nt treasurer, cus							
Y		d the Statemen							

Amendment

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

1. Committee Full Name (and Fund if applicable)	2. Type of Re			D Nun	ıber
PATRICK MILLS FOR CITY COUNCIL	2017 Pre-Ele				
Start of Election Cycle: January 1,		Total the Reporting		l .	Total this ection Cycle
4) Cash on Hand at Start			930.86	\$	486.79
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	50.00	\$	1,003.00
6) Contributions from Individuals	(CRO-1210)	\$	500.00	\$	1,515.86
7) Contributions from Political Party Committees	(CRO-1220)	\$	0.00	\$	0.00
8) Contributions from Other Political Committees	(CRO-1230)	\$	0.00	\$	0.00
9) Loan Proceeds	(CRO-1410)	\$	0.00	\$	0.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	0.00	\$	0.00
11) Other Receipt Sources					
11a) Interest on Bank Accounts	(CRO-1250)	\$	0.04	\$	0.45
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$	0.00	\$	0.00
11c) Outside Sources of Income	(CRO-1250)	\$	0.00	\$	0.00
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	0.00	\$	0.00
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	0.00	\$	0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,	11d and 11e)	\$	550.04	\$	2,519.31
<u>EXPENDITURES</u>	·	V2.019670		***********	
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$	972.57	\$	2,205.16
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	0.00	\$	0.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$	0.00	\$	0.00
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	39.99	\$	166.74
15) Loan Repayments	(CRO-1420)	\$	0.00	\$	0.00
6) Refunds/Reimbursements from the Committee	(CRO-1320)	\$	100.00	\$	100.00
17) In-Kind Contributions	(CRO-1510)	\$	100.00	\$	265.86
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15	, 16 and 17)	\$ 1,2	212.56	\$	2,737.76
(9) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18)	\$ :	268.34	\$	268.34
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	0.00		
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	0.00		
22) Debts and Obligations owed by the Committee	(CRO-1610)	<u> </u>	702.90		
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$	0.00		
24) Account Transfers Within the Committee	(CRO-1720)	\$	0.00		
25) Administrative Support	(CRO-1710)	\$	0.00	\$	0.00
26) Forgiven Loans	(CRO-1440)	\$	0.00	\$	0.00
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$	0.00	\$	0.00
28) Contributions to be Refunded  NC State Board	(CRO-1215)	\$	0.00	\$	0.00 August 2008

00 0		outions from I		of	1	Amendme	nt 🛛 No	
			From Individuals of \$	50 or less	I			
1. Committe	I. Committee Full Name (and Fund if applicable)  2. ID Number							
PATRICK I	MILLS FOR CITY	Y COUNCIL						
3. Contribut	or Information							
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (m m/do	l/yyyy)	f. Amount		
☐ Add ☐ Remove	A	Check		09/29/20	17	\$	50.00	
4. Total or	nly this Page				\$		\$50.00	
	ALL CRO-12  oust be on line 5 of D	205 Pages Detailed Summary Page	CRO-1100)		\$		\$50.00	
CRO-1205		N	C State Board of Elections				April 2007	

## Contributions from Individuals

Amendment 2 Yes No

Contributions from marviduais	Pg _	of		⊥ Yes	Z N
Use this form to report individual contributions over \$50 or contributions	tions unde	er \$50 if for	n CRO 12	05 is not use	d

1. Com	mittee Full Name	(and Fund if applicab	le)			2.	ID Number	
PATR	CK MILLS FOR	CITY COUNCIL						
3. Cont	ributor Informati	ion		Add 🔲 Re	move			
	Name, Mailing Ad			b. Job Title/Profession			Comments	
(inclu	ıde city, state, & z	ip)		READY MD	CONCRETE			
ROBE	RT CHANDLER					1		
	OVENTRY PL				Name/Specific Field	1		
BURL	INGTON, NC 27	7215		CHANDLER CONCRETE CO			D .42 C	4- D-4-
				INC		e.	Dection Sum	10 Date
						\$		200.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)	)	k. Amount	
	A	Check			10/08/2017		\$	100.00
							\$	
							\$	
3. Cont	ributor Informati	on		Add □ Re	move			
a. Full Name, Mailing Address & Phone				b. Job Title/Pr	ofession	d. e	Comments	
(inclu	de city, state, & z	ip)		SELF-EMPL	OYED			
	IENRY				N. 101 101 N. 14			
	ASS MOUNTAI				Name/Specific Field	1		
SNOW CAMP, NC 27349				TS DESIGN	S		Dection Sum	to Date
						<del> </del>	action bum	
						\$		100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount	
	Α	Check			10/16/2017		\$	100.00
							\$	
							\$	
3. Conti	ibutor Informatio	on		Add 🔲 Rei	move			
	ame, Mailing Add			b. Job Title/Profession			d. Comments	
	de city, state, & zi	ip)		CPA		ĺ		
	CK MILLS		:	o Employants	Name/Specific Field	1		
	LENKIRK DR	215						
BUKLI	NGTON, NC 27	213		PARRISH &	MILLS, P.A.	e. I	lection Sum	to Date
						\$		165.86
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)	_	k. Amount	
		In-Kind	SHRINERS AI	OVERTISING	09/29/2017		\$	100.00
							\$	
							\$	
	ıl only this Pag		• · · · · · · · · · · · · · · · · · · ·			\$		300.00
	5. Total of ALL CRO-1210 Pages  (This line must be on line 6 of Detailed Summary Page CRO-1100)							500.00

•					Amenum	cut
Contributions from Individuals	Pg	2	of	2	☐ Yes	X No
Use this form to report individual contributions over \$50 or contribution	ons und	ler \$50	if for	m CRO 120	5 is not use	ed

2. ID Number 1. Committee Full Name (and Fund if applicable) PATRICK MILLS FOR CITY COUNCIL 3. Contributor Information ☐ Add ☐ Remove b. Job Title/Profession d. Comments a. Full Name, Mailing Address & Phone (include city, state, & zip) AUTOMOTIVE DEALER **DALE STEARNS** c. Employer's Name/Specific Field 711 N GURNEY ST BURLINGTON, NC 27215 STEARNS FORD e. Election Sum to Date 200.00 k. Amount f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) Check Α 09/30/2017 \$ 200.00 \$ \$ 200.00 4. Total only this Page \$ 5. Total of ALL CRO-1210 Pages \$ 500.00 (This line must be on line 6 of Detailed Summary Page CRO-1100)

CRO-1210

NC State Board of Elections

April 2007

								Amendme	ent
Other Rec	eipt Sources			Pg	_1_	of	1	☐ Yes	X No
Use this form to	report income not rep	orted on another fo	orm. i.e. i	nterest	incom	e, not for	prof	it contribut	ions etc.
1. Committee F	ull Name (and Fund if a	applicable)					2.	ID Number	•
PATRICK MIL	LS FOR CITY COUN	ICIL				<del>-</del> .			
3. Type of Recei	ipt Source <i>(Please u</i> s	se separate CRO-1	250 for	ms for e	ach ty	pe of Rec	<u>ceipt</u>	Source.)	
X Interest	☐ Contrib	outions from Not-for-	Profit Or	ganizatio	ns 🗌	Outside S	ource	s of Income	
4. Contributor I	Information		Add	Rem	ove				
a. Full Name, Ma	ailing Address & Phone	!	b. Not-f	or-Profi	ofit Federal ID # d. Comments				
(include city,	state, & zip)								
TRULIANT FO	CU						_		
PO BOX 26442	2		c. Outside Source Explanation						
WINSTON-SA	LEM, NC 27114						<b>L</b> ,	D 41 0	
			l				e.	Dection Su	m to Date
							\$		0.45
f. Account Code	g. Form of Payment	h. In-Kind Descrip	ption	j	. Date	(mm/dd/y	ууу)	j. Amount	:
Α	Electric Funds Tran				09	/30/2017	•	\$	0.04
								\$	
5. Total only	this Page			<b></b>			\$		0.04
6. Total of A	LL CRO-1250 Pag	ges							

CRO-1250 NC State Board of Elections December 2007

0.04

\$

(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest)

(This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution) (This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)

D	ic	hu	re	Δm	ents	
IJ	18	Du	IIS	еш	ems	

				Amendment						
Pg	_1_	of	2_	☐ Yes	X	No				

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

1. Committee F	ull Name (and Fund	if applicable)					2. ID Numb	er
	LLS FOR CITY CO							
3. Type of Disb	ursement <i>(Please</i>	use separate CR	0-1310	forms for eac	h type of Disb	ursem	ent.)	<del></del>
Operating Ex		ributions to Candida					ted Party Expe	enditures
4. Payee Inform	ation			Add □	Remove			
a. Full Name, M	ailing Address & Ph	one		b. Coordinate	ed Committee N	lam e	d. Commen	ts
(include city, sta	ate, & zip)							
BISCUITVILL	E						1	
669 HUFFMAI	N MILL RD				stered (Specify)		1	
BURLINGTON	N, NC 27215			☐ Federal	County		<u> </u>	
				☐ State	Munici	ранту:	e. Dection S	um to Date
							\$	86.41
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. Re	quired Rema	ırks
Α	Debit Card	О	1	0/07/2017	\$ 86.41	FOC	)D	
					\$			
4. Payee Inform	ation			Add 🔲	Remove			
a. Full Name, Ma	ailing Address & Pho	one		b. Coordinate	d Committee N	ame	d. Commen	ts
(include city, sta	te, & zip)			<u> </u>				
FACEBOOK							_	
1 HACKER WA					tered (Specify)	<del></del>		
MENLO PARK	C, CA 94025		Federal	County		- FD - 4' 6	4. D. 4.	
				☐ State	☐ Munici	panty:	e. Dection S	um to Date
							\$	35.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. Re	quired Rema	rks
A	Debit Card	A	10	0/23/2017	\$ 35.00	ADV	VERTISING	
					\$			
4. Payee Inform	ation			Add 🔲	Remove			
	ailing Address & Pho	one		b. Coordinate	d Committee N	am e	d. Comment	:s
(include city, sta	te, & zip)							<u></u>
THE TIMES N	EWS							
<b>707 S MAIN ST</b>	Γ				tered (Specify)			
BURLINGTON	, NC 27215			Federal State	County		- Fl 0	4 D. (
				☐ State	Municip	oanty:	e. Dection S	um to Date
							\$	386.16
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. Re	quired Rema	rks
Α	Debit Card	A	09	0/28/2017	\$ 386.16	ADV	ERTISING	
					\$			****
5. Total only this	s Page				<del></del>		\$	507.57
	CRO-1310 Pages						Ψ	
	n line 13a of Detailed S	ummar Paga CPA	1100 is	Oneratina Evner	meas)			
-	r tine 13a of Detailed Si n line 13b of Detailed Si		-		•	(mm'	\$	972.57
	n line 13c of Detailed Si		•					
7. Purpose Co	des (List detailed	expenditure code	in (h.) a	ibove)				
A* - Media	B* - Printing		· · · ·	ındraising	<b>D</b> - To	Anoth	ner Candidate	
E - Salaries	F* - Equipme	_		itical Party			Public Offic	
I - Postage	J - Penalties	3	K* - O	ffice Expenses			n to Legal E	
O* Other							-	
* Codes require	detailed explanation	in required rem	arks fi	eld (k)				

$\mathbf{r}$	•	3.				4
1,	118	ÐU	ırs	eı	ne	nts

				Amendan.	CHC
Pg	2_	of	2	☐ Yes	X No

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

	The Continued party Ca						2. ID Numbe	0 P	
	ull Name (and Fund i						2. ID Numb	21	
PATRICK MIL	LS FOR CITY COL	JNCIL							
3. Type of Disbu	rsement (Please)	use separate CRC	)-1310	forms for each	h type of Dis	bursem	ent.)		
X Operating Exp		ibutions to Candidat	es/Polit	ical Committees		Coordina	ted Party Expe	aditures	
4. Payee Inform	ation			Add 🔲	Remove				
	ailing Address & Pho	one		b. Coordinate	d Committee	Name	d. Comment	s	
(include city, sta	•						Ţ		
THE TIMES N	EWS								
707 S MAIN S		c. Level Regis			4				
BURLINGTON	I, NC 27215			☐ Federal	Cour	-	<u> </u>	t. D. t.	
				☐ State	Mun	cipality:	e. Election S	um to Date	
							\$	390.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. R	equired Rema	rks	
A	Debit Card	A	10	0/23/2017	\$ 390.0	0 AD	VERTISING		
					\$				
4. Payee Inform	ation			Add 🔲	Remove				
	ailing Address & Pho	one		b. Coordinate	d Committee	Name	d. Comment	s	
(include city, sta	te, & zip)								
WOMEN'S RES	SOURCE CENTER	IN ALAMANCE					]		
COUNTY				c. Level Regist			_		
411-B W FIFTI	I ST			Federal County: State Municipality: e. Election Sum to Da					
BURLINGTON	I, NC 27215			State	☐ Mun	cipality:	e. Election S	um to Date	
							\$	75.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. Re	k. Required Remarks		
A	Check	A	10	0/23/2017	\$ 75.0	0 AD	VERTISING		
					\$				
5. Total only thi	s Page		•				\$	465.00	
6. Total of ALL	CRO-1310 Pages								
	n line 13a of Detailed S	ummary Page CRO	-1100 if	Operating Expen	nses)		•	972.57	
	n line 13b of Detailed S					l Comm)	\$	912.31	
	n line 13c of Detailed S								
7. Purpose Co	odes (List detailed	expenditure code	in (h.)	above)	· · · · · · · · · · · · · · · · · · ·				
A* - Media B* - Printing C* - Fundraising D - To Another Candidate									
E - Salaries F* - Equipment G - Political Party							g Public Offic		
I - Postage J - Penalties K* - Office Expenses Q* - Donation to Legal Expense Fun						xpense Fund			
O* Other									
	e detailed explanatio						· · · · · · · · · · · · · · · · · · ·	December 2009	
CRO-1310		NC S	tate Boa	ard of Elections			ı	Jecember 2009	

-		<b>Media Expendi</b> ort NC Non-Media			1_ of	<u> </u>	Amendme ☐ Yes	nt No
1. Committe		d Fund if applicable)			2. ID N	Number		
3. Payee Inf								
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amo	unt	g. Required Re	emarks
Add Remove	Α	Draft	K	10/01/2017	\$	5.00	EMAIL	
☐ Add☐ Remove	A	Debit Card	В	10/18/2017	\$	7.4 7.9	HANDOUT MATERIAL	
☐ Add ☐ Remove	A	Debit Card	О	10/07/2017	\$	10.70	SUPPLIES	
4. Total o	nly this Page				\$			39.99
5. Total of ALL CRO-1315 Pages (This line must be on line 14 of Detailed Summary Page CRO-1100)					\$			39.99
6. Purpos		detailed expenditur			SESSION CONTRACTOR			
E - Salar		- Printing - Equipment		Party <b>H*</b> -	STANCE OF THE PARTY OF	other Car ing Publ	ndidate lic Office Ex	penses
I - Posta	ge J-	Penalties	K* - Office	Expenses Q*	- Dona	tions to	Legal Expe	nse Fund

\* Codes require detailed explanation in required remarks field (g) CRO-1315

O\* - Other

NC State Board of Elections

December 2009

Refunds/Re	l	Amendment  Yes X No							
			sements, including co	_					
1. Committee Ful							D Number		
PATRICK MILI									
3. Payee Informa	tion			Add 🔲 Re	move	<b></b>			
a. Full Name, Mailing Address & Phone (include city, state, & zip)				d. Type of Comn	nittee PAC	g. C	Comments		
PATRICK MILL		P)		Referendum	Party				
1981 GLENKIR				e. Level Registered (Specify)			h. Original Receipt Date		
BURLINGTON, NC 27215				Federal County: State Municipality:			09/29/2017		
						i. O	riginal Receipt Amount		
						\$	100.00		
b. Job Title/Profes	sion	c. Employer's	Name/Specific Field	f. Purpose Code j. Election S			ection Sum to Date		
СРА		PARRISH & MI	ILLS, P.A.	P			165.86		
k. Account Code	l. Form	of Payment	m. Required Remar	ks	n. Date (mm/dd/yy	ууу)	o. Amount		
A	Check		ADVERTISING EXPE	ENSE 10/04/2017			\$ 100.00		
4. Total only this Page						\$	100.00		
5. Total of ALL CRO-1320 Pages (This line must be on line 15 of Detailed Summary Page CRO-1100)						\$	100.00		
6. Purpose Cod	les (List	detailed disbu	rsement code in (f) at	oove)					

\* Codes require detailed explanation in required remarks field (m)

CRO-1320 NC State Board of Elections July 2007

N - Exceeded Contibution Limit

M - Overpayment for Service

L - Returned to Contributor

P\* - Reimbursement of In-Kinc O\* Other

						Amendm	ent
In-Kind Contributions		Pg	1_	of	1	☐ Yes	X No
Use this form to report non-monetary contributions, donation	ons, go	oods or ser	vices pro	vided to	the cor	mmittee or f	und.
Use CRO-1215 if In-Kind Contributions were or will be	refun	nded within	n 7 days				
1. Committee Full Name (and Fund if applicable)					2. ID	Number	
PATRICK MILLS FOR CITY COUNCIL				,			
3. Contributor Information	Ado	d 🔲 Re	move				
a. Full Name, Mailing Address & Phone	b. T	ype of Con	tributo	•	c. Con	nments	-
(include city, state, & zip)	X	Individual					
PATRICK MILLS		Candidate					
1981 GLENKIRK DR	☐ Party						
BURLINGTON, NC 27215	☐ PAC ☐ Referendum ☐ Other Receipt Source						
BOKEMOTON, NO 27213				d. Election Sum to Date			
				e	\$		165.86
e. Description			f. Date	(mm/dd	/yyyy)	g. Fair Ma	arket Amount
SHRINERS ADVERTISING	-	-	09	/29/20	17	\$	100.00
						\$	
			-			\$	
4. Total only this Page					\$	•	100.00
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO	0-110	00)			\$		100.00

CRO-1510

NC State Board of Elections

December 2007

Debts and Obligations Owed By the Committee Pg 1 of 1 Pves No
Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card purchases.

1. Committee Full Name (and Fund if applicable)

1. Committee Full Name (an	d Fund if applicable	)				2. ID Number	r
PATRICK MILLS FOR CIT	TY COUNCIL						
3. Creditor Information			Add Rem	nove		,	
a. Full Name, Mailing Addres	s & Phone		Note: All payments made toward debts should be listed on				
(include city, state, & zip)			form CRO-131				
PATRICK MILLS			b. Description of C	re di tor			· · · · · · · · · · · · · · · · · · ·
1981 GLENKIRK DR BURLINGTON, NC 27215	LINE OF CREDIT						
c. Beginning Balance	d. Total Amount Pa	id	e. Total Amount Inc	curred		f. Remaining	Balance
\$ 1,702.90	\$	0.00	\$		0.00	\$	1,702.90
g. Incurred Debts (what the co					4		
g1. Purchase Place Full Name	, Mailing Address &	: Phone	g2. Date (mm/dd/yy	уу)	g3. Am	ount	
(include city, state, & zip)					\$		
			g4. Purpose Code	g5.	Require	ed Remarks	
g1. Purchase Place Full Name	, Mailing Address &	Phone	g2. Date (mm/dd/yy	уу)	g3. Am	ount	
(include city, state, & zip)					\$		
			g4. Purpose Code	g5.	Require	ed Remarks	
			-		•		
g1. Purchase Place Full Name	, Mailing Address &	Phone	g2. Date (mm/dd/yy	уу)	g3. Am	ount	
(include city, state, & zip)					\$		
			g4. Purpose Code	g5.	Require	ed Remarks	
g1. Purchase Place Full Name	, Mailing Address &	Phone	g2. Date (mm/dd/yy	yy)	g3. Am	ount	
(include city, state, & zip)					\$		
			g4. Purpose Code	g5. Required Remarks			
g1. Purchase Place Full Name	, Mailing Address &	Phone	g2. Date (mm/dd/yy	yy)	g3. Am	ount	
(include city, state, & zip)					\$		
			g4. Purpose Code	g5.	Require	ed Remarks	
4. Total only this Page			•	•	\$		1,702.90
(This should be the sum of a	<del></del>	s page)			Ψ		
5. Total of ALL CRO-1	_	u Daga CDO 1	100)		\$		1,702.90
(This line must be on line 22)		<del></del>					
6. Pupose Codes (List of A* - Media B*	<u>etaned expend</u> - Printing		n (24.) Indraising	n	To An	other Candida	te
	- Equipment		itical Party			ng Public Offi	
	- Equipment - Penalties		ffice Expenses		- Other	•	evenum v
* Codes require detailed expl				•	- trivi	-	