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 Ir	ıformation							
a. Full Name								c. ID Number
COMMITTEE	TO ELECT A	MY GALEY						
b. Mailing Addre	ess (include Ci	ty, State and Zij	p Code)					d. Date Filed
233 DOCTOR BURLINGTON							<del></del>	10/28/2018
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								(336) 380-8038
2. Report Year	3. Period Star	rt Date (mm/dd/j	уу)	4. Period	End Da	te (mm/dd/yy)	5. Treasur	er Full Name
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Referendum		gal Expense Fund		Thirty-five	day	Quarterly		Pre-referendum
7. Type of Fund	(if applicab	le, check one)		Pre-primar	у	First		☐ Final
☐ "Booster Fund				Pre-election	n	☐ Second	ļ	Supplemental Final
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								her non-disclosed
funds. I furthe	er certify that t	his report is con	nplete,	true and co	orrect as	nd that I have	been trained	d by the NC State Board
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Pri	inted Name of Si	igner		Signa	ature of A	Appointed Treas	urér	Date
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	assistan	nt treasurer, cust	todian (	of books ir	ıformati	ion, or account	t information	n.
Vo	ou must ameno	d the Statement	of Orga	anization ((	CRO-21	00A-E) to make	e committee	changes.

Use this form to summarize all disclosure reporting forms and to total monetary information 1. Committee Full Name (and Fund if applicable) 2. Type of Report 3. ID Number COMMITTEE TO ELECT AMY GALEY 2018 Third Quarter Total this Total this Start of Election Cycle: January 1. 2017 Reporting Period **Election Cycle** 4) Cash on Hand at Start 12,447.69 \$ 4,823.12 \$ RECEIPTS 5) Aggregated Contributions from Individuals (CRO-1205) 125.00 \$ 1,190.00 6) Contributions from Individuals (CRO-1210) 3,950.00 \$ \$ 23,156.55 7) Contributions from Political Party Committees (CRO-1220) \$ 0.00 0.00 8) Contributions from Other Political Committees (CRO-1230) 450.00 \$ 1,450.00 9) Loan Proceeds (CRO-1410) \$ 0.00 0.00 0) Refunds/Reimbursements to the Committee (CRO-1240)\$ 0.00 0.00 1) Other Receipt Sources 11a) Interest on Bank Accounts (CRO-1250) 0.00 \$ 0.00 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 2) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e) 4,525.00 25,796.55 **EXPENDITURES** 3) Disbursements 13a) Operating Expenditures (CRO-1310) 11,557.44 24,664.05 (CRO-1310) 13b) Contributions to Candidates/Political Committees \$ 500.00 500.00 13c) Coordinated Party Expenditures (CRO-1310) \$ 0.00 0.00 (CRO-1315) 4) Aggregated Non-Media Expenditures 0.00 83.82 15) Loan Repayments (CRO-1420) 0.00 0.00 16) Refunds/Reimbursements from the Committee (CRO-1320) \$ 0.00 0.00 (CRO-1510) 7) In-Kind Contributions 0.00 456.55 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) \$ 12,057.44 25,704.42 9) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) \$ 4,915.25 4,915.25 ADDITIONAL INFORMATION (CRO-1330) 20) Non-Monetary Gifts Given to Other Committees 0.00 21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430) \$ 0.00 (CRO-1610) 0.00 22) Debts and Obligations owed by the Committee \$ (CRO-1620) 0.00 23) Debts and Obligations owed to the Committee (CRO-1720) 24) Account Transfers Within the Committee \$ 0.00 (CRO-1710) \$ 0.00 25) Administrative Support 0.00 (CRO-1440) 26) Forgiven Loans \$ 0.00 \$ 0.00 (CRO-2220) 27) 48-Hour Notice Reports Sum \$ 0.00 \$ 0.00 28) Contributions to be Refunded (CRO-1215)

0.00

0.00

IXI No

Amendment **Contributions from Individuals** 2 X No of ☐ Yes 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 COMMITTEE TO ELECT AMY GALEY 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) ATTORNEY AMY SCOTT GALEY 233 DOCTOR FLOYD SCOTT LANE c. Employer's Name/Specific Field BURLINGTON, NC 27217 SELF e. Election Sum to Date 16,156.55 f. Prior g. Account Code h. Form of Payment j. Date (mm/dd/yyyy) i. In-Kind Description k. Amount GAL Check 07/31/2018 \$ 1,000.00 Check **GAL** 08/29/2018 \$ 1,000.00 Check GAL \$ 09/26/2018 1,000.00 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) RETIRED CAROLYN HINSHAW c. Employer's Name/Specific Field 4337 SOUTH NC HWY 49 BURLINGTON, NC 27215 **RETIRED** e. Election Sum to Date 200.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Check GAL 10/13/2018 200.00 \$ \$ 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) RETIRED WILLIAM LASHLEY c. Employer's Name/Specific Field 2212 COY ST BURLINGTON, NC 27215 LORILLARD e. Election Sum to Date 800.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Check GAL 09/04/2018 \$ 300.00 \$

CRO-1210 NC State Board of Elections April 2007

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5. Total of ALL CRO-1210 Pages

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Use this form to report individual contributions over \$50 or contribution	ıs un	der \$50	if for	m CRO 120	5 is not use	ed

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CRO-1230

NC State Board of Elections

April 2007

Disbursem	ients			Pg	<u>l</u> of	1	_	No 🔀 No
Use this form to	report expenditures	from the committee	tee for operating exp	enses, con	 ıtributi	ons to	candidate/	political
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1. Committee Fu	ıll Name (and Fund	if applicable)					2. ID Num	ber
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Amendment

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\* Codes require detailed explanation in required remarks field (k) CRO-1310 NC State Board of Elections December 2009

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Amendment

Pg 2 of 4 Yes No

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

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Amendment Pg 3 of 4 YesX No

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

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Operating E	xpenses Co	ntributions to Condi	RO-1310 forms for e lates/Political Commit				**
4. Payee Infor		iterious to Candi		<del></del>	Coordina	ated Party Ex	penatures
	Mailing Address & I	Phone	Add _	Remove ated Committee	None	d. Comme	
(include city, s		none	b. Coordin	ateu Committee	Name	u. Comme	:1118
MARKELL II							
PO BOX 668			c. Level Re	gistered (Specify	y)	1	
BURLINGTO	N, NC 27215		Federal	Coun	-	7	
			☐ State	☐ Muni	cipality:	e. Election	Sum to Date
			İ			\$	4,986.8
f. Account Cod	e g. Form of Paymen	t h. Purpose Code	i. Date (mm/dd/yyy	v) i. Amount	k. Re	equired Ren	
GAL	Debit Card	В	10/05/2018	\$ 1,103.24		RD SIGNS	
77.			10/03/2010	<del></del>	1173	KD SIGNS	
C. C. Parla Tari C. Seria	**************************************			\$			
4. Payee Inform			□ Add □	Remove			
	Iailing Address & Pl	none	b. Coordina	ted Committee	Name	d. Comme	nts
include city, st							
MEBANE EN 106 N 4TH ST			c Level Reg	istered (Specify	<del></del>	-	
MEBANE, NO			Federal	Count		1	
	27302		☐ State	☐ Munic	•	e. Election	Sum to Date
					-		
						\$	2,175.2
			i. Date (mm/dd/yyyy	) j. Amount	k. Re	quired Rem	arks
GAL	Debit Card	A	10/03/2018	\$ 1,243.20	NEV	VSPAPER A	ADS
				\$			
. Payee Inforn	ation		□ Add □	Remove			
	ailing Address & Ph	one		ed Committee N	lame	d. Commen	ts
nclude city, sta	•						
IMES NEWS				<u> </u>			
IC				stered (Specify)			
			Federal	County	Ĺ		
			State	∐ Munici	pality:	e. Election S	Sum to Date
						\$	2,675.00
Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy	li. Amount	k. Rec	quired Rema	arks
GAL	Debit Card	A	09/21/2018	\$ 2,675.00	<del> </del>	SPAPER A	
			03/21/2010	· <del> </del>	INLW	SI AI LICA	
				\$	<u> </u>		
Total only thi	s Page				I	\$	5,021.44
Total of ALL	CRO-1310 Pages						
(This line goes in	n line 13a of Detailed S	ummary Page CRO-	1100 if Operating Expe	enses)	# 6 M.S.	<b>ው</b>	11 557 44
			1100 if Contrib to Cand		Comm)	\$	11,557.44
(This line goes in	ı line 13c of Detailed S	ummary Page CRO-	1100 if Coordinated Pa	rty Expenditures)			
Purpose Co	des (List detailed	expenditure code	in (h.) above)				
- Media	B* - Printin	g	C* - Fundraising	D-To	Anoth	er Candidat	e
- Salaries	F* - Equipme		G - Political Party				ce Expenses
Postage	J - Penalties	3	K* - Office Expense	s Q* - D	onation	to Legal E	xpense Fund
Other	Tale 2 de maio del 1100 de la comita 2010.	Bradenski i sam sammer	eg garana a kilon	e e esta e e esta a un como de la br>La como de la como de			
	detailed explanation						
RO-1310		NC St	ate Board of Elections				December 200

N. 1		Amendment
Disbursements	Pg 4 of 4	☐ Yes 2
	- * * ·	

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

COMMINICOUS AME	coordinated party	сфенициеѕ								
1. Committee F	ull Name (and Fun	d if applicable)			. ** .			2. ID N	lumber	
COMMITTEE	TO ELECT AMY	GALEY							·	
	But in the second of the property of the second	ware a straight and the straight		·						
3. Type of Disb		e use separate CR								
								ted Party	Expendi	itures
4. Payee Inform	ALAST TO THE RESERVE TO THE PARTY OF THE PAR					Remove				
a. Full Name, M		b. Coordinated Committee Name				d. Comments				
(include city, sta				4						
VFW POST 10				c. Level Regi	ato	d (Spacify)		-		
634 WEST WE BURLINGTON		Federal	ISLE	County	,.	-				
DUKLINGIO		State Municipality:				e. Electi	ion Sun	n to Date		
							P y	<b>†</b>		
								\$		1,000.00
f. Account Code	unt Code g. Form of Payment h. Purpose Code i. Da			te (mm/dd/yyyy) j. Amount			k. Required Remarks			
GAL	Check	Check O		7/10/2018	\$ 1,000.00		CH.	ARITAB	LE DO	NATION
			İ —		\$		<u> </u>			
4 DAMA (F.C.)				owa i i za oma a sa		audosente de l'esta et s	80 E 20 10 2	ng galiya langlay	Taerda A	er fat ek kalende
4. Payee Inform	ation tiling Address & Pl	ano.	Ш	Add  b. Coordinate	100	emove		d. Com	4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
(include city, sta	_	ione		b. Coordinate	euc	ommittee N	<u> </u>	u. Comi	Hents	
		I FTIC BOOSTER	25					[		
WESTERN HIGH SCHOOL ATHLETIC BOOSTERS INC				c. Level Registered (Specify)				į		
C/O TREASURER				☐ Federal ☐ County:						
PO BOX 204				☐ State ☐ Municipality:				e. Election Sum to Date		
ELON, NC 272						\$		1,050.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy) j.		Amount	mount k. Re		quired Remarks	
GAL	Check	A		//12/2018	\$	1,050.00		REBOARD AD		
					\$					
					1-0					
5. Total only this Page								\$		2,050.00
6. Total of ALL (	CRO-1310 Pages									
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)								\$	1	1,557.44
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)								Ψ	•	1,557.77
(This line goes in	line 13c of Detailed S	Summary Page CRO-	1100 if C	Coordinated Pa	rty I	Expenditures)				
7. Purpose Co	des (List detailed	expenditure code i	in (h.) a	bove)						
A* - Media	B* - Printing					Anoth	ther Candidate			
E - Salaries	F* - Equipment						Holding Public Office Expenses			
- Postage	J - Penalties		K* - Office Expenses Q* - D			onation to Legal Expense Fund				
)* Other		ning diselekt wan sugar sinturs	in significação.	arakwe e	ey z.	ng tinggang panakana		angel mana dis		
Codes require	detailed explanatio	n in required rema	arks fic	eld (k)	113		4,515			