Am	endm	ent
X	Yes	No

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.

Do not use tins		c information.		STORES IN FISHER AND INTEREST				- a destal and the local and the local	
1. Committee In	formation								T
a. Full Name									c. ID Number
COMMITTEE	TO ELECT N	MEREDITH ED	WARI	OS					
b. Mailing Addre	ss (include Ci	ity, State and Zij	p Code	700					d. Date Filed
123 BAUMAN			17	ECE	IVI	CD			01/10/2019
GRAHAM, NC	27253		A COLUMN TO THE PERSON TO THE	JAN 1	1) 201	n			e. Phone Number
				10	0 201	9			(919) 428-6779
			BY	0 000000000000000	-				
2. Report Year	3. Period Sta	rt Date (mm/dd/	yy)	4. Period	End Dat	e (mm	/dd/yy)		urer Full Name
2018	1	0/21/2018			12/31/2	018		JOSEPH	BRIAN GLAZE
6. Type of Comn				e of Repor	t (ch	eck of	nly one	type of re	port from one category)
X Candidate Cam	npaign 🔲 Pa	rty	Munic	ipal		State/	County		Referendum
Joint Fundraise	er 🔲 PA	AC .		Organizatio	onal	Or	ganizatio	nal	Organizational
Referendum	Le Le	gal Expense Fund		Thirty-five	e day	Qu	arterly		Pre-referendum
7. Type of Fund	(if applicab	le, check one)		Pre-primar	y		First		Final
☐ "Booster Fund	!!			Pre-electio	n		Second		Supplemental Final
Building Fund				Pre-runoff		П	Third		☐ Annual
Presidential El	ection Year Car	ndidates Fund	No.	Semi-annua	al		Fourth		Special
NC Public Cam				Mid Ye	ear	Ser	ni-annua	1	
hand		•		Year E	ind	П	Mid Ye	ar	10. Special Report Name
Other:				Final		H	Year E		To, Special Report Name
8. Number of Fu	ndraisars this	e Paport		Special	1	Fin			
5. I dilloct of Fu		s Report	ш	орести					
	0						ecial		
3. Account Infor						-	formati	on on Full Na	
a. Financial Insti		ime			a. rinar	iciai ii	asututio	on Full Na	me
CAPITAL BAN	K								
b. Purpose		c. Account Cod	e		b. Purp	ose			c. Account Code
COMMITTEE U	USE	J2	2911						
		d. Period Begin	Balan	ce					d. Period Begin Balance
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		\$ 12,91	52.	<i>e</i> 1					\$
CERTIFICATIO									
-			_			-			22A, 22B & 22D-22M of
-						_	-		other non-disclosed
funds. I furthe	er certify that t	this report is cor	mplete,	true and c	orrect ar	that	t I have	been train	ned by the NC State Board
T 1 2	. 01				>	1()			
Joseph E	prian G	192e		CX	4	th			01/10/2019
Pri	inted Name of S	Signer		Sign	ature of A	opoin	ted Treas	surer	Date
FOR OFFICE US	EONLY					V			
Date Receive	d:	1/10/19		Emplo	vee:	UE	5	De	elivery Method
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D . D . E				г. 1					Signer has not received
Date Data En	tered:		-	Employ	yee: _				mandatory training
Plassa Nota	. This farm	annot be used to	o amar	d committe	e inform	nation	guob ac	the com	nittee address, treasurer,
1 ICASE TIULE									
		nt treasurer, cus							
Yo	ou must amen	d the Statement	of Org	anization (	CRO-210	00A-E	to mak	e committe	ee changes.

**Detailed Summary**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 Re			IDA	lumber
COMMITTEE TO ELECT MEREDITH EDWARDS	2018 Fourth			• 110 1	umer
		<u> </u>		<del></del>	
Start of Election Cycle: January 1,		Rei	Total this porting Period		Total this Election Cycle
4) Cash on Hand at Start		\$	12,952.61	_	0.00
RECEIPTS				<b>I</b>	
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	155.00	\$	7,678.31
6) Contributions from Individuals	(CRO-1210)	\$	2,015.00	\$	58,158.89
7) Contributions from Political Party Committees	(CRO-1220)	\$	0.00	\$	0.00
8) Contributions from Other Political Committees	(CRO-1230)	\$	0.00	\$	2,446.00
9) Loan Proceeds	(CRO-1410)	\$	0.00	\$	0.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	260.00	\$	1,224.96
11) 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	\$	50.01
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)	\$	2,430.00	\$	69,558.17
EXPENDITURES		Military	ar kultu-lene, eksepeet essine	one policiestes	
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$	14,217.93	\$	58,655.27
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)	\$	161.15	\$	1,047.32
15) Loan Repayments	(CRO-1420)	\$	0.00	\$	0.00
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$	0.00	\$	0.00
17) In-Kind Contributions	(CRO-1510)	\$	0.00	\$	8,852.05
<b>18) TOTAL EXPENDITURES</b> (Add lines 13a, 13b, 13c, 14, 15,	, 16 and 17)	\$	14,379.08	\$	68,554.64
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18)	\$	1,003.53	\$	1,003.53
ADDITIONAL INFORMATION	ı				
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	0.00		
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	0.00		
2) Debts and Obligations owed by the Committee	(CRO-1610)	\$	0.00		
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
6) Forgiven Loans	(CRO-1440)	\$	0.00	\$	0.00
77) 48-Hour Notice Reports Sum	(CRO-2220)	\$	0.00	\$	0.00
(8) Contributions to be Refunded  NC State Board	(CRO-1215)	\$	0.00	\$	0.00 August 2008

Aggreg	ated Contril	hutians from I	ndividuals Page	1	1	Amendm	
Optional fo	orm used to reno	rt NC Contributions	From Individuals of \$	1 of		X Yes	☐ No
1. Committe	ee Full Name (and	Fund if applicable)	s 110ili fildividuais of 5	30 or less	2 ID	Number	
		IEREDITH EDWAR	DS .		2.10	vuinitei	
3. Contribut	tor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/d	d/yyyy)	f. Amount	i
☐ Add ☐ Remove	J2911	Check		10/30/20		\$	20.00
☐ Add ☐ Remove	J2911	Check		10/29/20	18	\$	40.00
Add Remove	J2911	Check		10/30/20	18	\$	25.00
Add Remove	J2911	Check		10/24/20	18	\$	50.00
Add Remove	J2911	Check		10/22/20	18	\$	20.00
4. Total or	ly this Page	<u> </u>		<u> </u>	\$		\$155.00
	ALL CRO-12 ust be on line 5 of D	05 Pages etailed Summary Page (	CRO-1100)		\$		\$155.00
CRO-1205			State Board of Elections		L	·	April 2007

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$\mathbf{-}$	<i>,</i> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	JULIOII	0 11 011		11111113

				Amendme	ent
Pg	1	of	4	X Yes	☐ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Com	mittee Full Name	e (and Fund if applicab	ole)			2.	ID Numbe	er
		ECT MEREDITH ED		·	· · · · · · · · · · · · · · · · · · ·	T		/1
3. Conf	tri butor Informati	tion	Angles D	Add 🔲 R	Remove	<u></u>		
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	ude city, state, & z			RETIRED		+		
	H BRADY					_		
	STONEY MTN R				s Name/Specific Field	4		
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				İ	ı	\$		2,470.00
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a. Full N	Name, Mailing Add	ldress & Phone		b. Job Title/Pr		d. (	Comments	s
(inclu	ide city, state, & zi	.ip)		EXECUTIV!	E DIRECTOR			
	DANIELEY	_	1			1		
	IMMY BOWLES	3 RD	1		Name/Specific Field	1		
ELON,	NC 27244		!	1	TON-ALAMANCE	-	Taction S	um to Date
			,	REGIONAL	AIRPORT	<b> </b>	Jection 54	
			!		1	\$		75.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	cription	j. Date (mm/dd/yyyy)	<del>, </del>	k. Amoun	at
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	de city, state, & zi	<u>ip)</u>		ATTORNEY	,	ĺ		
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	UNNYBROOK D NGTON, NC 272		F		Name/Specific Field	ł		I
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	J2911	CHECK			10/31/2018	_	\$	250.00
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I. Tota	l only this Pag	ge				\$		825.00
	l of ALL CRC					\$		2,015.00
(This li	ne must be on line (	6 of Detailed Summary Po	age CRO-1100)			Ψ.		2,013.00

## **Contributions from Individuals**

Amendment Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used X Yes No

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		e (and Fund if applical ECT MEREDITH ED				2.	. ID Num	ber
	tributor Informati Name, Mailing Ad				Remove			
	ude city, state, &:				e/Profession	d.	Comme	nts
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l .	RUITT DR	.N		c. Employe	er's Name/Specific Field	$\dashv$		
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			· · · · · · · · · · · · · · · · · · ·		V0/43/4V10		\$	40.00
	J2911	Check			10/30/2018	_	\$	200.00
						_	Ψ	200.00
							\$	
Total	only this Pag							200.00
	of ALL CRO					\$		800.00
		7-1210 Fages of Detailed Summary Pa	pe CRO-1100)			\$		2,015.00

Amendment X Yes

**Contributions from Individuals** ☐ No 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 MEREDITH EDWARDS 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) HAIR & MAKEUP ARTIST NADIA PICKENS c. Employer's Name/Specific Field 114 FLORENCE ST GRAHAM, NC 27253 Health and Personal Care Stores e. Election Sum to Date \$ 380.00 h. Form of Payment f. Prior g. Account Code i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Check J2911 10/28/2018 \$ 50.00 \$ \$ 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) ATTORNEY AMANDA TONKIN c. Employer's Name/Specific Field 11013 EAGLE CREEK LN KNOXVILLE, TN 37932 **SELF** e. Election Sum to Date \$ 100.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Check J2911 10/30/2018 \$ 100.00 \$ \$ 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) RETIRED **DAVID VAUGHN** c. Employer's Name/Specific Field 105 TURNBURY PL ELON, NC 27244 RETIRED e. Election Sum to Date 240.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Check J2911 10/28/2018 \$ 40.00 \$ \$ 4. Total only this Page

5. Total of ALL CRO-1210 Pages

(This line must be on line 6 of Detailed Summary Page CRO-1100)

190.00

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Con	itribi	utions	irom	Inai	vidua	a is

Pg 4 of 4 X Yes No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Com	mittee Full Name	e (and Fund if applical	de)			2.1	D Numbe	
COMN	MITTEE TO ELF	ECT MEREDITH ED	WARDS					
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	Name, Mailing Ad			b. Job Title	/Profession	d. C	Comments	
(inclu	ide city, state, & 2	zip)		HEAD OF	SCHOOL			
i .	IE WALL					1		
	EADOWOOD D				r's Name/Specific Field	-		
BUKL	INGTON, NC 2	/215		THE BUR	LINGTON SCHOOL	e. F	lection Su	ım to Date
						<u> </u>	Tection Su	
						\$		300.00
f. Prior	g. Account Code		i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amoun	t
	J2911	Check			10/24/2018		\$	100.00
							\$	
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3. Conti	ributor Informati	ion		Add 🔲 I	Remove			
	ame, Mailing Ad		· · · · · · · · · · · · · · · · · · ·	b. Job Title/	Profession	d. C	omments	
(inclu	de city, state, & z	ip)		FINANCIA	L ADVISOR			
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	OMPTON CT	7016			's Name/Specific Field			
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						\$		150.00
f. Prior		h. Form of Payment	i. In-Kind Desc	ription	j. Date (mm/dd/yyyy)		k. Amoun	t
X	J2911	Check			01/24/2018		\$	50.00
	J2911	Check			10/30/2018		\$	100.00
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4. Tota	l only this Pa	ge				\$	-	200.00
		O-1210 Pages						
		6 of Detailed Summary 1	Page CRO-1100)			\$		2,015.00

## 

J	se tl	is:	formto	report	refunds	received	by	the	committee	or reimh	oursements	for a p	revious	expenditu	re

Description   Description	1. Committee Fu								2.	ID Number	
A Super of Committee	COMMITTEE	TO ELE	CT MEREDI	TH EDWAR	DS						
A. Puel Name, Mailing Address & Phone (include dicty, state, & zip)	3. Contributor In	formati	on		П	Add	П	Remove			
Candidate city, state, & zip	a. Fuli Name, Ma	ling Add	dress & Phone		<u> </u>				g. (	Comments	
CAPITAL BANK   CAPI	(include city, s	tate, & z	ip)						-		
	CAPITAL BAN	K				☐ Ref	eren dun	n 🔲 Party	ł		
State	227 S MAIN ST	•				e. Leve	Regis	tered (Specify)	h. (	Original Expenditu	re Date
S   5.00	GRAHAM, NC	27253				!=			ality:	10/31/2018	
Description   Computer   Comput									i. O	riginal Expenditu	re Amt
REFUND OF MONTHLY   SERVICE CHARGE   S. 242									\$		5.00
SERVICE CHARGE   SERVICE CHARGE   S. 62.42	b. Job Title/Profes	sion	c. Employer's	Name/Specif	ic Field	l f. Purpo	se		j. E	ection Sum to Dat	e
Account Code   I. Form of Payment   m. In-Kind Description   Date   Da									\$		62.42
J2911	k. Account Code	l. Form	of Payment	m. In-Kind	Descri		JE CH		ldd hywny	) lo A	
3. Contributor Information   Add   Remove   B. Comments   Candidate   PAC   PAC   Candidate   PAC   PAC   Candidate   PAC   Candidate   PAC   PAC   Candidate   PAC   Candidat	J2911			1	205011	ption				) o. Amount	
A. Full Name, Mailing Address & Phone (include city, state, & zip)								10/31/2	2018	\$	5.00
A Type of Committee						Add		Remove			
Referendum   Party   Pederal   County   I1/30/2018   Sate   Municipality   Pederal   County   I1/30/2018   Sate   Municipality   Party   Part						d. Type			g. C	omments	·····
C. Level Registered (Specify)   h. Original Expenditure Date   Federal   County:   11/30/2018     Sate   Municipality:   11/30/2018     S.00     00     S.	(include city, sta	ate, & zi	p)			<b>-</b>				- M	
Federal		ζ.						Renal - 1 J			
Sate   Municipality:   11/30/2018									h. O	riginal Expenditui	re Date
Solution   Section   Sec	GRAHAM, NC 2	27253				1=			lity:	11/30/2018	
C. Employer's Name/Specific Field   C. Purpose   D. Date (mm/dd/yyyy)   O. Amount									i. O	riginal Expenditur	e Amt
REFUND OF MONTHLY SERVICE CHARGE    REFUND OF MONTHLY SERVICE CHARGE									\$		5.00
SERVICE CHARGE   SERV	b. Job litle/Profess	ion	c. Employer's l	Name/Specific	c Field				j. E	ection Sum to Date	
J2911 Draft 11/30/2018 \$ 5.00  COntributor Information						SERVIC	D OF M E CHA	MONTHLY ARGE	\$	-	62.42
Contributor Information Add Remove    Full Name, Mailing Address & Phone (include city, state, & zip)		l. Form		m. In-Kind l	Descrip	tion		n. Date (mm/	dd/yyyy)	o. Amount	
Account Code   I. Form of Payment   Debit Card   Debit					·			11/30/2	018	\$	5.00
Candidate   PAC   Referendum   Party   Party   Pack   Pa					]	Add [	] F	Remove			
Referendum		_							g. Co	mments	<u> </u>
HACKER WAY MENLO PARK, CA 94205    Federal   County:   11/06/2018     State   Municipality:   County:   11/06/2018     State   Municipality:   County:   11/06/2018     State   Municipality:   11/06/2018     State		<del></del>	))	12		1 =					
Federal   County:   11/06/2018   State   Municipality:   11/06/2018     10   11/06/2018     11											
State   Municipality:   11/06/2018			05						h. O	riginal Expenditure	e Date
S   250.00	VIENLO PARK, (	JA 9421	03			1=			<u> </u>		
									i. Or	iginal Expenditure	Amt
REFUND DOUBLE CHARGE   \$ 763.64	I I M I I								\$		250.00
Account Code   I. Form of Payment   m. In-Kind Description   n. Date (mm/dd/yyyy)   o. Amount	. Job little/Professi	on c	c. Employer's N	ame/Specific	Field		7773		j. De	ction Sum to Date	
J2911   Debit Card   11/09/2018   \$ 250.00						REFUND	DOUE	BLE CHARGE	\$		763.64
J2911   Debit Card   11/09/2018   \$ 250.00	. Account Code	l. Form o	of Payment	m. In-Kind D	escript	ion	<u> </u>	n. Date (mm/c	ld/yyyy)	o. Amount	
Total of ALL CRO-1240 Pages	J2911	De	ebit Card							\$	250.00
Total of ALL CRO-1240 Pages	. Total only th	s Page	•						\$		260.00
1 STONE PROPERTY OF THE REPORT OF THE PROPERTY OF THE PARTY OF THE PAR					0.110	2)			1		260.00

Die	hiii	ree n	ients	
1715	1741	Sell	ICHES	i

				Amenom e	ent
Pg	1	of	6	X Yes	☐ No

1. Committee F	ull Name (and Fund	if applicable)			<del></del>			2. ID Number
COMMITTEE	TO ELECT MERE	DITH EDWARD	S					
3. Type of Dis b	ursement (Please	use separate CR	0-1310	forms for eac	h tvn	e of Dish	rsem	ont )
Operating Ex		ributions to Candida						ted Party Expenditures
4. Payee Inforn				Add $\square$	7.57	nove		
	ailing Address & Ph	One	<u> </u>	b. Coordinate			ame	d. Comments
(include city, st	_	one			-			
	VERTISING COMP	ANY	· · · · · · · · · · · · · · · · · · ·	1				
3290 VANS D		AIVI		c. Level Regis	ste re d	(Specify)		
BURLINGTO				☐ Federal		County		
				☐ State		☐ Munici	pality:	e. Election Sum to Date
								\$ 26,416.59
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Ar	nount	k. Re	quired Remarks
J2911	Debit Card	0	10	0/29/2018	\$	99.28	VEI	HICLE MAGNETS
J2911	Debit Card	I	1	1/01/2018	\$	4,962.15		
4. Payee Inform				Add 🔲	Ren	юvе		
a. Full Name, M	ailing Address & Ph	one		b. Coordinate	d Co	nmittee N	ame	d. Comments
(include city, sta	ite, & zip)							
	VERTISING COMP	ANY		. 1 1 70 1	4 4	(0		
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BURLINGTON	I, NC 27215			State		Municip		e. Election Sum to Date
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<del></del>	g. Form of Payment	h. Purpose Code	<del> </del>		+	-		quired Remarks
J2911	Debit Card	В	1)	1/18/2018	\$	3,918.47	MA	LER CARDS
					\$			
4. Payee Inform	ation			Add 🔲	Rem	ove		
	ailing Address & Pho	one		b. Coordinate	d Con	nmittee Na	ame	d. Comments
(include city, sta	te, & zip)							
ALAMANCE C	CHAMBER OF CON	<b>MERCE</b>						
610 S LEXING				c. Level Regist				
BURLINGTON	I, NC 27215			☐ Federal☐ State		County:		e. Election Sum to Date
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					,			\$ 900.00
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J2911	Debit Card	O	12	2/04/2018	\$	300.00	СНА	MBER DUES
					\$			
5. Total only thi	s Page							\$ 9,279.90
6. Total of ALL	CRO-1310 Pages							
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	n line 13b of Detailed S		_				omm)	Ψ 14,217.93
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	des (List detailed							
A* - Media	B* - Printin	~		ındraising				ner Candidate
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I - Postage O* Other	J - Penalties	•	w O	ffice Expenses	•	Ų" - D(	лияПО	n to Legal Expense Fund
	e detailed explanation	n in required rem	arks fi	eld(k)				
CRO-1310				d of Elections	<del></del>	<del></del>		December 2009

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Pg	2	of	6	X Yes	□ No			

1. Committee F	Full Name (and Fun	ıd if applicable)						2. ID Num	aber
		REDITH EDWARD	S			, <u></u>			104-
3. Type of Disb	ersement (Pleas	se use separate CR(	n-1310	forms for ea	ch tyr	of Disbi	reem	out)	
Operating Ex		ontributions to Candida						i <b>ent.)</b> ated Party Exp	penditures
4. Payee Inform						nove	10. A. A.		JOHNS
	Iailing Address & P	Phone	<u> </u>	b. Coordinate			lame	d. Comme	nts
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ALAMANCE N	NEWS								
114 W ELM ST	T			c. Level Regis				1	
GRAHAM, NC	27253			Federal		County			
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!						·· <del>·</del>		\$	2,332.65
	g. Form of Paymen	<del></del>			) j. Ar		<del></del>	equired Rem	ıarks
J2911	Check	A	10	0/29/2018	\$	350.80	AD		
J2911	Debit Card	A	12	2/18/2018	\$	105.00	AD		
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870 NORTH M			,	c. Level Regis	stered			1	
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	<u> </u>				\$				
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	ailing Address & Pl	hone		b. Coordinated			ame	d. Commen	ıts
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ROSE BROWN				l				ı	
1706 SYKES ST	T			c. Level Regist	tered (			i	
BURLINGTON,	, NC 27215		]	Federal	Ļ	County:		L	
			<b> </b>	☐ State	<u>L</u>	Municipa	ality:	e. Election S	Sum to Date
				_				\$	210.04
		t h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Am	ount	k. Rec	quired Rema	arks
J2911	Check	0	11	1/18/2018	\$	53.57	BAG	S & CAND	Υ
			i		\$		<del></del>	<del></del>	
5. Total only this	Page							\$	592.48
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		Summary Page CRO-1 Summary Page CRO-1				m-listenal Co	)	\$	14,217.93
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Pg	3	of	6	X Yes	□ No		

	uli Name (and Fund					2. ID N	umber
COMMITTEE	TO ELECT MERE	DITH EDWARD	S				
3. Type of Disbu	ırsement ( <u>Please</u>	use separate CR	O-1310 forms for eac	ch type of Disb	ursem	ent.)	
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	ailing Address & Ph	ione		ed Committee N	Name	d. Com	ments
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3102 GARDEN	RD			stered (Specify)		1	
BURLINGTON			☐ Federal	☐ County	-	<u> </u>	·
			☐ State	☐ Munici	pality:	e. Electi	on Sum to Date
					,	\$	134.50
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	· i		120012012	\$ 134.30	11	NLV	DMID
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a. Full Name, Ma (include city, stat	~	one	D. Coordinate	d Committee is	ame	d. Com n	ients
	te, & zip) IOMAS EDWARDS				1		
BENJAMIN TH		S	c. Level Regis	stered (Specify)			
GRAHAM, NC			Federal	County			
Ultrimit,	21233		☐ State	☐ Municip		e. Electic	on Sum to Date
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		1	i. Date (mm/dd/yyyy)		+	quired Re	
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1 HACKER WA				tered (Specify)			
MENLO PARK,	CA 94205		Federal State	County:	-		
			☐ State	☐ Municip	ality:	e. Dectio	on Sum to Date
						\$	763.64
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A* - Media	B* - Printing		m (n.) above)  C* - Fundraising	D - To	Anoth	er Candio	data
	F* - Equipme	~	G - Political Party				office Expenses
₹ - Salaries	" LAULDING.		4		Allena.	Lawie -	HILL LADORDOS .
E - Salaries  I - Postage	J - Penalties		•		_		-
			K* - Office Expenses		_		l Expense Fund
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Amendment
Pg 4 of 6 X Yes No

	ull Name (and Fund		2. ID Nun	nber					
COMMITTEE	TO ELECT MERE	DITH EDWARD	S						
3. Type of Disbu	ursement (Please	use separate CRO	0-1310	forms for eac	ch type of	Dishu	reem	ont)	
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J2911	Debit Card	A	1	1/06/2018	\$ 25	50.00	AD		
J2911	Debit Card	A	1	1/30/2018	\$ 24	19.32	AD		
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231 Herbert Ave	e.		1	c. Level Regis				]	
CLOSTER, NJ	07624		ļ	Federal		County:			·····
			ŀ	State	<u> </u>	<b>Aunicip</b>	ality:	e. Election	Sum to Date
			ļ				١	\$	179.00
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J2911	Debit Card	Н	11	1/19/2018	\$ 17	9.00	ROB	3E	
					\$				
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(include city, stat	-	<b>7.1.C</b>			<del></del>			<u> </u>	
MEBANE ENT							1		
106 N FOURTH			-	c. Level Regist	tered (Spe	cify)			
MEBANE, NC				Federal		county:	1		
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J2911	Debit Card	A	<del></del>	)/28/2018	\$ 40	7.92	AD	<u>, ī.a </u>	· · · · · · · · · · · · · · · · · · ·
					<del> </del>				
			- 1.4.85		\$	37.17	F 1714		
5. Total only this								\$	1,086.24
	CRO-1310 Pages								
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A* - Media	B* - Printing			indraising	D	- To /	Anoth	ner Candida	-4-0 (1) (1) (1) (1) (1)
E - Salaries	F* - Equipme	0		itical Party					ice Expenses
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	detailed explanation	a in required rem	arks fic	eld(k)	3.4				

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Pg	5	of	6	X Yes	□ N	(

	ull Name (and Fund							2. ID N	lumber	
COMMITTEE	TO ELECT MERE	DITH EDWARD	S							
3. Type of Disbu	rsement (Please	use separate CRO	0-1310	forms for eac	h type	of Dichi	ircom	ont)		
Operating Ex		ributions to Candida							Expenditu	res
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	ailing Address & Ph	one	<del></del> -	b. Coordinate			ame	d. Com	ments	
(include city, sta	te, & zip)									
TIMES-NEWS								_		
PO BOX 481				c. Level Registered (Specify)				]		
BURLINGTON	I, NC 27215			☐ Federal		County				
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								\$	7	,717.68
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Am	ount	k. R	equired I	Remarks	
J2911	Debit Card	A	10	)/24/2018	\$ 1	,540.00	AD			
J2911	Debit Card	A	10	)/29/2018	\$	355.00	AD	. <del></del>		
4. Payee Inform	ation			Add 🔲	Remo	ve				
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TIMES-NEWS								1		
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BURLINGTON	, NC 27215			Federal	Ļ	County				
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J2911	Debit Card	A	12	/17/2018	\$	75.00	AD			
					\$					
4. Payee Informa	tion			Add 🔲	Remo	ve		Sale Line		r saga will V
	iling Address & Pho	one		b. Coordinate			me	d. Com	nents	<u> </u>
(include city, stat	e, & zip)				******	***************************************				
USPS										
112 S MARSHA	LL ST		L	c. Level Registered (Specify)						
GRAHAM, NC	27253			Federal						
(800) 275-877				State	<u>L</u>	Municip	ality:	e. Electi	on Sum to	Date
								\$	1,	600.00
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J2911	Debit Card	I	12/	/14/2018	\$	300.00				
					\$					
5. Total only this	Page		V V S.					\$	2.1	270.00
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	line 13b of Detailed Si					Political Co	mm)	\$	14,2	217.93
	line 13c of Detailed Su						,			
. Purpose Co	des (List detailed e	xpenditure code i	n (h.) al	oove)						
A* - Media	B* - Printing		C* - Fu	ndraising		<b>D</b> - To A	Anoth	er Cand	idate	
E - Salaries	F* - Equipme	nt	G - Polit	tical Party		Н* - Но	lding	Public (	Office Exp	enses
- Postage	J - Penalties	]	K* - Of	fice Expenses					al Expens	
)* Other	La companya da managan	and the second	3 13							
* Codes require	detailed explanation	in required rema	ırks fie	ld(k)						

Di	sb	urse	me	ents
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				ent	
Pg	6_	of	6	X Yes	□ No

1. Committee I	Full Name (and Fund	if applicable)						2. ID N	umber
COMMITTEE	TO ELECT MERE	DITH EDWARD	S				· · · · · · · · · · · · · · · · · · ·		
2 Trans entire	(DI	CD.	0.1010						
3. Type of Dis b  Operating Ex		use separate CR	<u>U-1310 j</u>	forms for eac	h typ				
·		ributions to Candida		cal Committees	3	∐ Co	ordina	ted Party I	Expenditures
4. Payee Inforn				Add 🔲	Rei	nove			
a. Full Name, Mailing Address & Phone b. Coordinated Committee Name							d. Comments		
(include city, sta	ate, & zip)					·-			
VISTA PRINT	•								
95 HAYDEN A	AVE			c. Level Regis	te re	d (Specify)		1	
LEXINGTON,	MA 02421-7942			Federal		County	:	1	
(866) 614-8002	?		<u> </u>	State		Municip	pality:	e. Hection Sum to Date	
							-	\$	483.02
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J2911	Debit Card	В	11/	1/19/2018 \$ 288.22 II		INV	VITATIONS		
					\$				
5. Total only thi	s Page							\$	288.22
6. Total of ALL	CRO-1310 Pages								
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A* - Media	B* - Printin	g	C* - Fu	ndraising		D - To	Anoth	ner Candi	date
E - Salaries	F* - Equipme	_					g Public Office Expenses		
I - Postage	J - Penalties								d Expense Fund
O* Other				•		•		23 <b>-</b>	por runu
* Codes require	e detailed explanation	in required rem	arks fie	ld (k)					
CRO-1310				of Elections					December 2009

Aggregated	Non-Media	<b>Expenditures</b>
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 Page 1 of 1
 Amendment

 X Yes □ No

Optional form used to report NC Non-Media Expenditures of \$50 or less.

	rmation  b. Account Code	c Form of Poyma	at d Burnaga Coda	e. Date (mm/dd/yyyy)	12.00	
Add				e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
Remove	J2911	Draft	О	10/31/2018	\$ 5.00	MONTHLY SERVICE CHARGE
Add Remove	J2911	Draft	О	11/30/2018	\$ 5.00	MONTHLY SERVICE CHARGE
Add Remove	J2911	Draft	О	12/31/2018	\$ 5.00	MONTHLY SERVICE CHARGE
Add Remove	J2911	Debit Card	В	12/03/2018	\$ 39.24	PROGRAMS FOR SWEARING IN
Add Remove	J2911	Debit Card	О	12/03/2018	\$ 29.97	REFRESHMENTS
Add Remove	J2911	Debit Card	0	11/05/2018	\$ 24.96	DRINKS
Add Remove	J2911	Debit Card	О	12/02/2018	\$ 4.08	ICE
Add Remove	J2911	Debit Card	О	12/02/2018	\$ 47.90	REFRESHMENTS
Total on	ly this Page				\$	161.15
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CRO-1315

NC State Board of Elections

December 2009