Use this form for general r Do not use this form to upo									
1. Committee Informatio									
a. Full Name	a. Full Name								
Pamela Tyler Thomppson	Pamela Tyler Thomppson For County Commissioner								
b. Mailing Address (include Cit	ty, State and Zip Code)				d. Date Filed				
2222 Delaney Drive, Burl					12/12/2019				
Burlington, NC 27215 e. Phone Number									
					336-213-8788				
2. Report Year 3. Pe	riod Start Date (mm/d	d. Period (mm/dd/yy)	End Date	5. Treasurer Full N	ame				
2019	07/01/2019	12/	31/2019	Joshua Hook Stone					
6. Type of Committee (C	heck One)	9. Type of Repor	t (check on	y one type of report fr	om one category)				
Candidate Campaign	Party	Municipal	State/Co	ounty	Referendum				
PAC	Referendum	Organizationa	ıl 🗌 (Organizational	Organizational				
Independent Expenditure	Joint Fundraiser	Thirty-five da	y	Quarterly	Pre-referendum				
Legal Expense Fund 7. Type of Fund (if ap	oplicable, check one)	Pre-primary		First	Final				
"Booster Fund"	pricavie, check one)	Pre-election		Second	Supplemental Final				
Building Fund		Pre-runoff		Third	Annual				
Dunding Fund		Semi-annual		Fourth	Special				
		Mid Yes	Mid Year Semi-annual						
Other:		Year En	d 🔲	Mid Year	10. Special Report Name				
_		Final		Year End					
8. Number of Fundraiser	rs this Report	8. Number of Fundraisers this Report Special Final							
		1	LJ *	Titel					
				Special					
N/A 11. Account Information				Special					
N/A			11. Account I	Special					
N/A 11. Account Information			11. Account I	Special nformation					
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Amendment

Disclosure Report Cover

Amendment

'es

No

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 Pamela Tyler Thompson For County Commissioner Organizational Total this Total this **Start of Election Cycle:** January 1, 2019 **Election Cycle** Reporting Period Cash on Hand at Start \$ \$ 0 RECEIPTS **Aggregated Contributions from Individuals** (CRO-1205) \$ 290 \$ 290 **Contributions from Individuals** (CRO-1210) \$ 3,530 \$ 3,530 \$ **Contributions from Political Party Committees** (CRO-1220) \$ \$ **Contributions from Other Political Committees** (CRO-1230) \$ **Loan Proceeds** (CRO-1410) \$ (CRO-1240) \$ \$ 10) Refunds/Reimbursements To the Committee 11) Other Receipt Sources \$ 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) \$ \$ \$ 11 e) Exempt Purchase Price Sales (CRO-1265) **TOTAL RECEIPTS** (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e) \$ \$ 3,820 3,820 EXPENDITURES : * Disbursements 1,638.61 13a) Operating Expenditures (CRO-1310) \$ \$ 1,638.61 13b) Contributions to Candidates/Political Committees (CRO-1310) \$ \$ \$ 13c) Coordinated Party Expenditures (CRO-1310) \$ \$ Aggregated Non-Media Expenditures (CRO-1315) \$ 14) \$ 15) Loan Repayments (CRO-1420) \$ \$ \$ 16) Refunds/Reimbursements From the Committee (CRO-1320) \$ \$ 17) **In-Kind Contributions** (CRO-1510) 105 105 \$ \$ **TOTAL EXPENDITURES** (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) 18) 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) \$ 2,076.39 \$ 2,076.39 ADDITIONAL INFORMATION 20) Non-Monetary Gifts Given to Other Committees (CRO-1330) \$ (CRO-1430) \$ 21) Outstanding Loans (incl. ones from other campaigns) \$ Debts and Obligations owed By the Committee 22) (CRO-1610) \$ **Debts and Obligations owed To the Committee** (CRO-1620) 23) \$ **Account Transfers Within the Committee** (CRO-1720) 24) 25) **Administrative Support** (CRO-1710) \$ \$ \$ \$ **Forgiven Loans** (CRO-1440) 26) \$ \$ 48-Hour Notice Reports Sum (CRO-2220) 27)

28)

Contributions to be Refunded

\$

(CRO-1215)

\$

Aggregated Contributions from Individuals

Page

<u>1</u> of

Amendment

☐ Yes
☐

No

Optional form used to report NC Contributions From Individuals of \$50 or less

1.	1. Committee Full Name (and Fund if applicable) 2. ID Number								
Pamela Tyler Thompson For County Commissioner									
3	. Conti	ributor Inforn		<u> </u>	d. In-Kind	e. Date			
a.	. Amend		b. Account Code	c. Form of Payment	Description	(mm/dd/yyyy)	f. Amount		
Ī		Add	2	Check		12/04/2019	\$ 50		
Ţ		Remove							
Ļ	╅	Add	2	Check		12/5/2019	\$ 50		
누	_	Remove Add				10/00/2012	Ф 25		
卡	_	Remove	2	Check		12/09/2019	\$ 25		
Ī	<u></u>	Add	- 2	Check		12/10/2019	\$ 50		
		Remove		CHECK		12/10/2019			
Ē		Add	2	Check		12/11/2019	\$ 25		
Ļ	╡	Remove							
누		Add Remove	2	Check		12/30/2019	\$ 50		
F	1	Add	12	Charle		12/31/2019	\$ 40		
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	4 75	Remove	<u> </u>			1	\$ 290		
		al only this					ψ 270		
	5. Total of ALL CRO-1205 Pages (This line must be on line 5 of Detailed Summary Page CRO-1100)						\$ 290		

_							Amendmen	t	
		n Individuals		Pg	_1 of	3_	☐ Yes	No No	
				or contributions unde	er \$50 if form CR	O 1205 is no	t used		
1. Comm	ittee Full Name (and Fund if applica	ble)			2. ID Num	ber		
Pamela T	yler Thompson Fo	or County Commissio	ner						
3. Contri	butor Informatio)n		Add Ren	nove				
a. Full Nan	ne, Mailing Address é	& Phone		b. Job Title/Profession		d. Comments	s		
	city, state, & zip)			Legal Assistant		Candidate			
	yler Thompson								
	aney Drive			c. Employer's Name/Spe	ecific Field	1			
Burlingto	n, NC 27215			Craig Thompson					
						e. Election Sum to Date			
						\$	2,105		
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Aind Description	j. Date (mm/dd/yy	уу)	k. Amount		
		In-kind	Filin	g Fee	12/02/2	019	\$	105	
	2	Check			12/02/2	2019	\$	2000.	
							\$		
3. Contri	butor Informatio	n		Add Rem	ove				
a. Full Nan	ie, Mailing Address &	Phone		b. Job Title/Profession		d. Comments			
	city, state, & zip)			Not Working					
Syvia C. 1									
	ips Chapel Road			c. Employer's Name/Spe					
Haw River, NC 27258				Retired	FI (1 0				
						e. Election Su	im to Date	<u> </u>	
						\$	250		
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/yy	yy)	k. Amount		
	2	Check			12/05/20	019	\$	250	
							\$		

Ш							\$	
3. Contr	ibutor Informati	on		Add 🗍 R	emove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	n	d. Commer	nts		
				RN				
Rhonda l	Bennett							
1128 Rav	venwood Drive			c. Employer's Name/	Specific Field			
Graham,	NC 27253			Duke Urgent Car	e			·-
				Hillsborough		e. Election	Sum to Date	
						\$	100	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/y	ууу)	k. Amount	
	2	Check			12/07/2	019	\$	100
							\$	
							\$	
4. Tota	l only this Pag	e e				\$		2,455
5. Tota	l of ALL CRO	-1210 Pages				\$		3.430

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

~ .	·1 4·	T 10 01 1						Amendm	ent
		m Individuals	ovon C51		Pg	2 of	<u>3</u>		es No
		vidual contributions (and Fund if applica		or contributions u	nder \$:	SO IT form CR	2. ID No		
		or County Commission					2. ID N	annoci	<u> </u>
	ibutor Informatio			A23 🗐 😙	•	1			
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ı	city, state, & zip)	x I none		Not Working	on		u. Comme	ents	
Katheryn				1 Not Working					
	res Chapel Road			c. Employer's Name	/Specific	e Field	1		
Graham,	NC 27253			Retired					
							e. Election	Sum to Date	
			,				\$	200	
f. Prior	g. Account Code	h. Form of Payment	i. In-H	Kind Description	j.	Date (mm/dd/yy	уу)	k. Amoun	ıt
	2	Check	ļ			12/14/2	019	\$	100
	2	Check				12/14/2	2019	\$	100
								\$	
3. Contr	ibutor Informatio	n 💮		Add 🔲 R	Remove	,		1	
a. Full Nar	ne, Mailing Address &	& Phone		b. Job Title/Profession	on		d. Comme	nts	
	city, state, & zip)			Not Working					
Gerald W	•						1		
1147 Haz				c. Employer's Name/Specific Field Retired			-		
Burningto	on, NC 27215						e. Election Sum to Date		
İ									., .,
							\$	125	
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Kind Description	j.]	Date (mm/dd/yy	уу)	k. Amoun	t
	2	Check				12/29/2	019	\$	125
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	city, state, & zip)			Not Working					
Kathy Fu									
ı	ttie Florence Drive	;		c. Employer's Name/	Specific	Field			
Granam,	NC 27253						a Flaction	Sum to Date	
	1		1				\$	150	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	j. I	Date (mm/dd/yy		k. Amoun	
\square	2	Check		·		12/30/20	019	\$	150
								\$	
								\$	
4. Tota	l only this Page	e		100			\$		475

5. Total of ALL CRO-1210 Pages

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

3,430

\$

		m Individuals			Pg <u>3</u> of	3	Yes	☐ No
F		vidual contributions		or contributions un	nder \$50 if form CR	O 1205 is r 2. ID Nu		
		(and Fund if application or County Commission)				2. ID Nu	mder	
	•	•		F				
	ibutor Informations. Mailing Address of the control of the contro			· · · · · · · · · · · · · · · · · · ·	lemove	d. Comme	nto	
E .	city, state, & zip)	x ruone		b. Job Title/Profession Retail store Own		u. Comme	nts	
Paul Cro				Retail store Own	CI			
	rel Ridge Drive			c. Employer's Name/	Specific Field	1		
1	mp, NC 27253			Graham Furnitur		1		
	•					e. Election	Sum to Date	
						\$	500	
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	2	Check			12/31/2	019	\$	500
							\$	
							\$	
3. Contr	ibutor Informatio)n		Add 🔲 R	emove			
a. Full Nan	ne, Mailing Address &	& Phone		b. Job Title/Profession	on .	d. Comme	nts	
	city, state, & zip)			Not Working				
William 1	•							
	field Road			c. Employer's Name/	Specific Field			
Snow Ca	mp, NC 27349			Retired		a Floation	Sum to Date	
							Sum to Date	
						\$	100	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Kind Description	j. Date (mm/dd/yy	yy)	k. Amount	
	2	Check			12/30/20	019	\$	100
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(include	city, state, & zip)							
				c. Employer's Name/	Specific Field			
						e Election	Sum to Date	
						\$	Julii to Date	
f. Prior	g. Account Code	h. Form of Payment	i, In-K	ind Description	j. Date (mm/dd/yy	yy)	k. Amount	
	0						\$	
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	only this Pag					\$		500
5. Tota	l of ALL CRO	-1210 Pages				\$		3,430

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

Amendment

Disbursements			Pg	1	of	<u>1</u>	Amen	idment Yes	No
Use this form to report expenditure committees and coordinated party		ee for; operating exp	enses,	contributi	ions to	candida	ate/politi	ical	
1. Committee Full Name (and Fu	ınd if applicable)						2. ID I	Number	
Pamela Tyler Thompson For Cou	nty Commissioner	_							
3. Type of Disbursement (Pl	lease use separate C	RO-1310 forms for	each t	pe of Dis	bursem	ent.)			
Operating Expenses	Contributions to Can	didates/Political Commit	tees		Co	ordinate	d Party Ex	penditures	
4. Payee Information		Add		Remove	,				
a. Full Name, Mailing Address & Phone		b. Coordinated Comm	ittee Na	ıme		d. Co	mments]
(include city, state, & zip)									
Markell Printing									ı
718 E. Davis Street	i	c. Level Registered (S	pecify)			1			
Burlington, NC 27215		Federal State		County:		a Fla	ection Sun	. to Data	

i. Date (mm/dd/yyyy)

b. Coordinated Committee Name

12/5/2019

Add

j. Amount

\$1,638.61

Remove

\$

h. Purpose Code

g. Form of Payment

Check

1,638.61

k. Required Remarks

Campaign Signs

d. Comments

f. Account Code

4. Payee Information

(include city, state, & zip)

a. Full Name, Mailing Address & Phone

2

In-Kind	Contributions	
III-IXIIIU	Comminuments	

				Amendment	
Pg	1	of	1	Yes	☐ No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund. Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable) 2. ID Number Pamela Tyler Thompson For County Commissioner 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Type of Contributor c. Comments (include city, state, & zip) Individual \boxtimes Pamela Tyler Thompson Candidate 2222 Delaney Drive Party PAC Burlington, NC 27215 d. Election Sum to Date Referendum Other Receipt Source 2,105 g. Fair Market Amount e. Description f. Date (mm/dd/yyyy) Candidate Filing Fee \$ 105 12/2/2019 \$ \$ Add Remove 3. Contributor Information c. Comments a. Full Name, Mailing Address & Phone b. Type of Contributor Individual (include city, state, & zip) Candidate Party PAC d. Election Sum to Date Referendum Other Receipt Source g. Fair Market Amount f. Date (mm/dd/yyyy) e. Description \$ \$ \$ 3. Contributor Information Add Remove b. Type of Contributor c. Comments a. Full Name, Mailing Address & Phone Individual (include city, state, & zip) Candidate Party PAC d. Election Sum to Date Referendum Other Receipt Source \$ g. Fair Market Amount f. Date (mm/dd/yyyy) e. Description \$ \$ \$ 105 4. Total only this Page 5. Total of ALL CRO-1510 Pages \$ 105 (This line must be on line 17 of Detailed Summary Page CRO-1100)