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 Information									
a. Full Name c. ID Number									
Bob Ward for b. Mailing Address (include City, St	ND47GO								
	d. Date Filed								
2205 Woodridg	09/01/2015								
Burlington, NC	e. Phone Number								
•	336-227-1954								
2. Report Year 3. Period Start Date (mm/dd/yy) 4. Period End Date (mm/dd/yy) 5. Treasurer Full Name									
2015 07/14/2015 09/01/2015 8					Marion Ward				
6. Type of Committee (Check					rt from one category)				
	· I	nicipal	State/County		Referendum				
	eferendum	Organizationa		ional	Organizational				
	int Fundraiser	Thirty-five da	·		Pre-referendum				
Legal Expense Fund		Pre-primary	First		Final				
7 Trans of Frank (10 miles to		Pre-election	Seco	f	Supplemental Final				
7. Type of Fund (if applicable Booster Fund	е, спеск опе)	Pre-runoff Semi-annual	Thire	į.	Annual				
Building Fund		Mid Yea	Four	1	Special Special				
- Building Pand	片	Year End			10. Special Report Name				
Other:	ᄩ	Final			10. Special Report Ivame				
8. Number of Fundraisers thi	s Report	Special	Final	Esta					
or ranger of Landingers in	S Report	орсскаг	<del> </del>						
			Special						
11. Account Information a. Financial Institution Full Name			11. Account Inform						
			a. Financial Institution	Full Name					
SunTrust Ban b. Purpose			2 7		16.1				
	c. Account Code		b. Purpose		c. Account Code				
Campaign	#1								
Aecount	-	d. Period Begin Balance			d. Period Begin Balance				
	\$ 1,500.00				\$				
CERTIFICATION									
I certify that the Committee or F	und is in compliance	with all appl	icable provisions of Ar	ticle 22A, 22B	& 22D-22M of Chapter 163				
of the NC General Statutes and t									
report is complete, true and corre					· ·				
		(1) D	-1 M L.	Λ	, ,				
Kobert M. W.	ard	120 H	40 M. Wars	<u> </u>	09/01/2015				
Printed Name of Sig	gner	Sig	nature of Appointed Treas	surer	Date				
FOR OFFICE USE ONLY									
Date Received:	1-1-15	Employ	/ee: <u>JG</u>		<u>very Method</u> Normal Mail				
Date Postmarked:		Employ	/ee:		Registered Mail Hand Delivered				
Date Scanned:	1-3-15	Employ	vee: JG		Electronically Filed				
Date Data Entered:		Employ			Signer has not received mandatory training				
Plagga Notos This s-	annot ha and to -								
Please Note: This form o					3				
assistant treasurer, custodian of books information, or account information.									
You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.									

CRO-1000

NC State Board of Elections

August 2008

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 Report 3. ID Number BobWard for City Council Thirty-live day ND47GO Total this Total this 2012 Start of Election Cycle: January 1. Reporting Period **Election Cycle** 4) Cash on Hand at Start -0-1,500.00 RECEIPTS 5) Aggregated Contributions from Individuals (CRO-1205) \$ 6) Contributions from Individuals (CRO-1210) \$ \$ 1.000.00 2,500,00 7) Contributions from Political Party Committees (CRO-1220) 8) Contributions from Other Political Committees (CRO-1230) \$ 9) Loan Proceeds (CRO-1410) \$ 10) Refunds/Reimbursements to the Committee (CRO-1240) \$ 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) 11e) Exempt Purchase Price Sales (CRO-1265) \$ \$ 12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e) <u> 2,500.00</u> 000.00 EXPENDITURES 13) Disbursements 13a) Operating Expenditures (CRO-1310) 1,203.46 1,203.46 13b) Contributions to Candidates/Political Committees (CRO-1310) \$ 13c) Coordinated Party Expenditures (CRO-1310) 14) Aggregated Non-Media Expenditures (CRO-1315) \$ \$ 15) Loan Repayments \$ (CRO-1420) \$ 16) Refunds/Reimbursements from the Committee (CRO-1320) 17) In-Kind Contributions (CRO-1510) \$ \$ 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) 203.46 1203,46 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18 \$ 696.54 696.54 ADDITIONAL INFORMATION 20) Non-Monetary Gifts Given to Other Committees (CRO-1330) \$ 21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430) 22) Debts and Obligations owed by the Committee (CRO-1610) 23) Debts and Obligations owed to the Committee (CRO-1620) \$ 24) Account Transfers Within the Committee (CRO-1720) 25) Administrative Support (CRO-1710) \$ 26) Forgiven Loans (CRO-1440) \$ \$ 27) 48-Hour Notice Reports Sum \$ (CRO-2220) 28) Contributions to be Refunded (CRO-1215) \$

Amendment

☐ No

☐ Yes

Con	tributions f	rom Individua	als	Pg	g of	_	Yes No
Use th	nis form to report i	individual contribution	ions over \$50 or c			RO 1	1205 is not used
1. Committee Full Name (and Fund if applicable)						2. J	ID Number
	Bob War	nd for City	· Couneil			$\perp$	ND47GO
	ntributor Inform				move	T	
	Name, Mailing Addro ude city, state, & zip)			b. Job Title/Profe		d. C	Comments
	Robert M			AHorn	ey		
	,		1.	c. Employer's Name/Specific Field			
		Voodridge (		Solf-e	m ployed	e. E	lection Sum to Date
	Bur lingte	on, NC 272	215		/ μ μ - y -	\$	2,500.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	ption	j. Date (mm/dd/yyy	уу)	k. Amount
	#1	Check			08/25/20	015	\$ 1,000.00
							\$
							\$
	tributor Informa				move		
	Name, Mailing Addre de city, state, & zip)			b. Job Title/Profes	ssion	d. C	comments
(	ie eitj, state, ee z.p,			-	I		
				c. Employer's Nan	ne/Specific Field		
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- 11 1 1 1	T				·	\$	
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							\$
	tributor Informa	<u> Alamana da Arabana d</u>			nove		
	lame, Mailing Addres de city, state, & zip)	ss & Phone	ļ	b. Job Title/Profes	sion	d. Co	omments
(0000	conj, siano, co z-p,					1	
			- 1	c. Employer's Nam	ne/Specific Field		
İ			!			e. El	ection Sum to Date
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							\$
							\$
		<u> </u>					\$
	al only this Pa	age RO-1210 Pages				\$	1,000.00
S. LUU	41 OI ALL UK	O-1210 rages	일보다 나는 얼마를 가게			( C	

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

1,000.00

\$

Amendment

Disburser	nents				Pg /	Amendment of 2	No
Use this form	to report expenditure:	s from the commi	ttee for	operating ex		utions to candidate/political	
	d coordinated party e Full Name (and Fu					2. ID Number	· · · · · ·
	_		<u></u>				
	Vard for C					ND47GC	<u>'</u>
3. Type of Dis  Operating Ex		e use separate Contributions to Candid					
. Payee Infor		minutions to Candic	lates/Pont	Add	Remove	oordinated Party Expenditures	146.7
	Mailing Address & Pl	hone			ted Committee Na	me d. Comments	
include city, stat	e, & zip)						
SunTr	ust Bank			- Tarrito	·		
2405	S. Church ST	<del>)</del> ,		Federal	istered (Specify)  County	······································	
Burling	ston, NC 2.	7215		State	Munici		
, •	229-3000					\$ 16.95	
Account Code	g. Form of Payment	h. Purpose Code	i. Date (	mm/dd/yyyy)	j. Amount	k. Required Remarks	
# 1	Bank Statement	- 0	07/3	1/2015	\$ 16.95	campaign check	5
				7	\$	Carrier Su Curren	
. Payee Infor	mation			Add 🔲	Remove		
	iling Address & Phone		at .	b. Coordinat	ed Committee Nar	me d. Comments	
(include city, sta							
Alamane	e County Boar	d of Electic	0115	c. Level Regi	stered (Specify)		
115 Ma	ple Street			☐ Federal	County	:	
Grahan	A, NC 2725	<i>3</i>		State	Munici	pality: e. Election Sum to Date	
(336)-	570-6755					\$ 25,60	
Account Code	g. Form of Payment	h. Purpose Code	i. Date (	mm/dd/yyyy)	j. Amount	k. Required Remarks	
#1	Check		07/1	3/2015	\$ 25.60	elections 2011420	13
					\$	Elections doll :-	
Payee Inform	nation			Add 🔲	Remove		
	ling Address & Phone			b. Coordinat	ed Committee Nar	ne d. Comments	
(include city, sta	ite, & zip)						
				c Level Regi	stered (Specify)		
				Federal	County:	:	
				☐ State	☐ Municip	pality: e. Election Sum to Date	
						\$	
Account Code	g. Form of Payment	h. Purpose Code	i. Date (ı	l nm/dd/yyyy)	j. Amount	k. Required Remarks	
					\$		
· · · · · · · · · · · · · · · · · · ·					\$		—
	1	i .	1		1,	i	

(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures) 7. Purpose Codes (List detailed expenditure code in (h.) above)

\$ 1,203.46

A." •	Media	
E -	Salaries	

5. Total only this Page

6. Total of ALL CRO-1310 Pages

B\* - Printing

C\* - Fundraising

D - To Another Candidate

I - Postage

F\* - Equipment

G - Political Party

H\* - Holding Public Office Expenses

J - Penalties

K\* - Office Expenses

Q\* - Donation to Legal Expense Fund

O\* Other

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

<b>Disbursements</b>
DISTURBUIGHTS

Amendment Pg 2 of 2 Tyes 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	Full Name (and Fun	nd if applicable)				2. ID Number
	Jard for Ci					ND47G0
3. Type of Disl	bursement ( <i>Please</i>	e úse separate C		oforms for	each type of Disl	bursement.)
Operating Exp	penses Cor	ntributions to Candid				ordinated Party Expenditures
4. Payee Inform				Add	Remove	
	Mailing Address & Ph	none	******	b. Coordinat	ted Committee Nam	e d. Comments
(include city, state						
Signara	ma of Burling	gton NC		ļ		
	Afman Mill				istered (Specify)	
Bur ling	ton, NC 27.	215		Federal State	County:  Municipa	ality: e. Election Sum to Date
	792-1030	1	<del></del>		<b></b>	\$ 320.24
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (	mm/dd/yyyy)	j. Amount	k. Required Remarks
# 1	Check	B	1	22/2015	1.	Vinyl Graphic Decals
# /	Check	<u> </u>	08/2	0/2015	\$ 160.12	Vinyl Graphic Decals
4. Payee Inform			П	Add 🔲	Remove	
a. Full Name, Mail (include city, sta	ing Address & Phone te, & zip)			b. Coordinate	ed Committee Name	d. Comments
Sienara	ma of Burling	ton NC				
_	Uman Mill R			c. Level Regi	stered (Specify)	
				Federal	County:	
	iton, NC 27	72/5		State	Municipa Municipa	lity: e. Election Sum to Date
	792-1030				·	\$ 1,160.91
	g. Form of Payment	h. Purpose Code	i. Date (1	mm/dd/yyyy)	j. Amount	k. Required Remarks Bullons/Banners
# /	Check	B	08/	25/2015	\$ 840.67	Window Stickers
				/	\$	STICKETS
4. Payee Inform	nation			Add	Remove	
	ing Address & Phone			b. Coordinate	ed Committee Name	d. Comments
(include city, stat	e, & zip)					
1000					stered (Specify)	
اريمانية ا				Federal State	County:	lity: e. Election Sum to Date
	·			State	≥ j watacipa	
						\$
	g. Form of Payment	h. Purpose Code	i. Date (r	nm/dd/yyyy)	j. Amount	k. Required Remarks
į.				-	<b>d</b>	
				,	\$	t and the second
5. Total only thi	s Page					\$ 1,460,91
6. Total of ALL	CRO-1310 Pages					1,160,11
and are published that in our like		marv Page CRO-11i	OO if Oper	atina Evnança	시간 : 12 - 12 12 12 12 12 12 12 12 12 12 12 12 12	9) N
5. Total only this Page  6. Total of ALL CRO-1310 Pages  (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)  (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)  \$ 1,760,91						
(This line goes in	line 13c of Detailed Sum	mary Page CRO-110	00 if Coor	dinated Party l	Expenditures)	
	odes (List detailed e					
A* - Media	B* - Printin	g		ndraising	<b>D</b> - To A	Another Candidate
E - Salaries F* - Equipment G - Political Party H* - Holding Public Office Expenses						
- Postage J - Penalties K* - Office Expenses Q* - Donation to Legal Expense Fund						
O* Other * Code	litario de la composición dela composición de la composición de la composición dela composición dela composición dela composición de la composición dela composición del	ta site i to su le ev	5 & 1 & 2 & 5 C	Mariana de la composición dela composición de la composición de la composición de la composición de la composición dela composición dela composición dela composición de la composición dela composición de la composición dela composición dela compo		
Coues require	e detailed explanatio	on in required re	emarks	neid (k)		<u> </u>