Disclosure Re		C	. 1		1 1.			Yes No
	neral report and committee in to update information	niormati	on, must be	signea	and sub	mitted along with	1 otner	detailed forms.
1. Committee Info	mation							
a. Full Name							- 1	c. ID Number
Committee to Elect	James G. McClue III							
b. Mailing Address (include City, State and Zip Code)							d. Date Filed	
P.O. Box 665			k.	£.	CEI	VED		7/29/2016
Graham, NC, 2725	3			, skinder	0	<b>VED</b>		e. Phone Number
				7,	JL Z o			336-266-2802
2. Report Year	3. Period Start Date (mm/c	ld/yy)	4. Period [mm/dd/yy)	and De	ite	5. Treasurer F		
2016	1/1/2016		6/30	James G		James Griffin	fin McClure III	
6. Type of Commit	tee (Check One)	9. Typ	e of Report	(0	(check only one type of rej			
Candidate Camp	and the same of th	Municip			State/C			Referendum
PAC	Referendum		Organizational			Organizational		Organizational
Independent Expenditure Legal Expense F	Joint Fundraiser		Thirty-five day		(	Quarterly		Pre-referendum
7. Type of Fund	(if applicable, check one)		Pre-primary			First		Final
Booster Fund"			Pre-election			Second		Supplemental Final
Building Fund			Pre-runoff			Third		Annual
			Semi-annual Mid Year		١⊔ .	Fourth Semi-annual		Special
Other:			Year End			Mid Year		10. Special Report Name
Other.			Final			Year End		10. Special Report Fame
8. Number of Fund	Iraisers this Report		Special			Final		
						Special		
11. Account Inform	nation					Information		
a. Financial Institution	Full Name			a. Fina	ncial Inst	itution Full Name		
Wells Fargo Bank	1			h Door	200			c. Account Code
b. Purpose	c. Account Code			b. Pur	pose			c. Account Code
Campaign	1							
	d. Period Begin Balanc	e				d. Period Begin Balance		
	\$ 2.09							\$
CERTIFICATION								
I certify that the Co	mmittee or Fund is in compl	iance wi	th all applica	ble pro	visions	of Article 22A, 2	2B, &	22D-22M of Chapter 163 of
							nds. I	further certify that this report
	d correct and that I have bee	n trained	by the NC S	nate H	oard our	A Elections.	7/	29/2016
<u> </u>	AcClure Printed Name of Signer		- <del>-</del>	gnature	o Appoin	ited Treasurer		Date
FOR OFFICE USE				8	- 11			
Date Received:	4 00 11		Employee:			) G	De	elivery Method ] Normal Mail
Date Postmark	ed:		Employee:					Registered Mail Hand Delivered
Date Scanned:	8-3-16		Employee:		<u></u> <u>J</u>	6		Electronically Filed Signer has not received
Date Data Ente	red:		Employee:					mandatory training
Please Note: Th		ian of bo	oks informat	ion, or	account	information.		s, treasurer, assistant treasurer,

Amendment

Amendment No **Detailed Summary** Yes Use this form to summarize all disclosure reporting forms and to total monetary information. 3. ID Number 1. Committee Full Name (and Fund if applicable) 2. Type of Report Mid Year Report Committee to Elect James G. McClure III **FINAL Total this Total this** 2012 **Start of Election Cycle:** January 1, **Election Cycle Reporting Period** 2.09 \$ 0 \$ Cash on Hand at Start RECEIPTS \$ 364 \$ **Aggregated Contributions from Individuals** (CRO-1205) 5) \$ 7050 \$ (CRO-1210) **Contributions from Individuals** \$ (CRO-1220) \$ **Contributions from Political Party Committees** \$ (CRO-1230) **Contributions from Other Political Committees** \$ (CRO-1410) **Loan Proceeds** \$ Refunds/Reimbursements To the Committee (CRO-1240) **Other Receipt Sources** \$ (CRO-1250)\$ 11a) Interest on Bank Accounts \$ 11b) Contributions from Not-for-Profit Organizations (CRO-1250) \$ (CRO-1250) \$ 11c) Outside Sources of Income \$ (CRO-1270) \$ 11d) Legal Expense Fund – Other Sources \$ (CRO-1265) \$ 11 e) Exempt Purchase Price Sales 0 \$ 7414 **TOTAL RECEIPTS** (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e) **EXPENDITURES** 13) Disbursements 7404 \$ 2.09 \$ 13a) Operating Expenditures (CRO-1310) \$ 13b) Contributions to Candidates/Political Committees (CRO-1310) \$ \$ (CRO-1310) \$ 13c) Coordinated Party Expenditures \$ 14) Aggregated Non-Media Expenditures (CRO-1315) \$ \$ \$ (CRO-1420) Loan Repayments 15) \$ \$ **Refunds/Reimbursements From the Committee** (CRO-1320) 16) \$ 10 (CRO-1510) \$ **In-Kind Contributions** 17) \$ 7414 2.09 TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) 18)

	MICHAEL STREET	ena como de la como de	
ADDITIO	NIAT IN	JEORM	ATION
ADDITIO		AL OLIVIATE	TILLI

Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)

Non-Monetary Gifts Given to Other Committees

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-2200)	\$ \$
28)	Contributions to be Refunded	(CRO-1215)	\$ \$

0

\$

\$

(CRO-1330)

\$

0

19)

20)

				Amendment	
Disbursements	Pg	1	of <u>4</u>	Yes	[
			o to condid	oto/political	

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 Fund if applicable)  2. ID Number					2. ID Number
	lect James G. McClu				
3. Type of Disbu	rsement (Plea	se use separate C	RO-1310 forms for each ty		
Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures					
4. Payee Information			Add	Remove	
	ng Address & Phone		b. Coordinated Committee Na	me	d. Comments
(include city, state,	-				
J. Griffin McClu					
501 Grandview	Drive		c. Level Registered (Specify)		
Graham, NC 27	253		Federal	County:	<u> </u>
•			State	Municipality:	e. Election Sum to Date
					\$ 2.09
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
n recount code	g, r orm or r uy ment				Reimbursement
1	Cash	О	01/31/2016	\$2.09	to Close Acct.
				\$	
4. Payee Inform	ation	<u> </u>	Add	Remove	
			b. Coordinated Committee Na		d. Comments
	ng Address & Phone		D. Coordinated Commettee 1.15		
(include city, state,	& zip)	<del></del>	1		
			c. Level Registered (Specify)		
			Federal	County:	
			State	Municipality:	e. Election Sum to Date
			State	wumerpanty.	C. Biccion Sum to Buto
					\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1				\$	
1				\$	
4. Payee Inform	ation		Add	Remove	
		<del>_</del>	b. Coordinated Committee Name		d. Comments
	ng Address & Phone		D. Cool diffactor Committee 11.		
(include city, state,	& zip)		-{		
			a Lavel Degistered (Specify)		
			c. Level Registered (Specify)	County:	
			Federal	· +	e. Election Sum to Date
			State	Municipality:	e. Election Sum to Date
					\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1				\$	-
1				\$	
5. Total only th	is Page				\$
	CRO-1310 Pages				
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)					\$ 2.09
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)				\$ 2.07	
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)					
	es (List detailed ex				
A* - Media B* - Printing C* - Fund				D - To Anothe	
E - Salaries F* - Equipment G - Politic			cal Party		Public Office Expenses
I - Postage	J - Penalties	K* - Offi	ice Expenses	Q* - Donation	n to Legal Expense Fund
O* - Other	e detailed evnlanat	tion in waariwad -	omarks field (k)		



## North Carolina

## State Board of Elections

441 N Harrington Street Raleigh, NC 27603

Kim Westbrook Strach Executive Director Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173

## **Certification to Close Committee**

This Certification is used to express the intent to close the committee after all funds have been properly disbursed.

This Certification is filed at the Board of Elections office where the committee's campaign reports are filed.

FILED BY:		
Committee Name:	Committee to Elect James G. McClure III	mentos
Treasurer Name:	James Griffia Mc ClurcIII	
Treasurer Address:	501 Grandview Dr.	
(include city, state, & zip)	Graham NC 27253	
Treasurer Phone:	336. 266. 280Z	
	301 Grandview Dr. Graham NC 27253 336.266.2802	

I certify that the above mentioned Committee intends to close and cease existence. Upon signing this certification, I declare that all funds have been distributed and reported (if required). In addition, no contributions will be accepted or disbursements made after the "Final Report" is filed or this form is signed. If the Committee at any future time intends to accept or spend funds in support or opposition of any candidate or ballot issue, a new political committee must be formed and registered with the Board of Elections before such activities may commence.

Committees that have filed under the \$1,000 threshold will only be required to sign this Certification. No "Final Report" will be required for committees meeting this criterion. Any Committee that did not file under the \$1,000 threshold must submit a "Final Report" with this Certification. This report must have a zero balance with no outstanding loans or debts.

7 29 16 Date Signed

08-03-16P04:26 RCVD