Disclosure Re Use this form for get Do not use this form	port Cover neral report and committee in to update information	nformation	ı, must be siş	gned and sub	mitted along with	Yes No No other detailed forms.		
1. Committee Infor								
a. Full Name	matios					c. ID Number		
Dobson for City Co	uncil					4D4W45		
b. Mailing Address (incl	ude City, State and Zip Code)					d. Date Filed		
4010 Cullen Court Burlington, NC 272	15					10/21/2015		
Durington, 110 21						e. Phone Number		
						703-244-2930		
2. Report Year	3. Period Start Date (mm/d	d/vv)	4. Period Er mm/dd/yy)	nd Date	5. Treasurer Fu			
2015	7/10/15		10/19		Matthew D Dob			
6. Type of Commit	tee (Check One)	9. Type	of Report	(check or	nly one type of repo	ort from one category)		
Candidate Camp		Municipal			County	Referendum		
PAC	Referendum		rganizational		Organizational	Organizational		
Independent Expenditure Legal Expense F	Joint Fundraiser	Т	hirty-five day		Quarterly	Pre-referendum		
7. Type of Fund	(if applicable, check one)	I P	re-primary		First	Final		
"Booster Fund"	(g apprendict) critically		re-election		Second	Supplemental Final		
Building Fund			re-runoff		Third	Annual		
		S	emi-annual		Fourth	Special		
			Mid Year		Semi-annual			
Other:			Year End		Mid Year	10. Special Report Name		
		☐ F	inal		Year End			
8. Number of Fund	Iraisers this Report	s s	pecial		Final Special			
11. Account Inform	nation			11. Account	Information			
a. Financial Institution				a. Financial In	stitution Full Name			
Wells Fargo								
b. Purpose	c. Account Code			b. Purpose		c. Account Code		
Campaign Acc	1	1						
Receipts and								
Expenditures	d. Period Begin Balanc	d. Period Begin Balance				d. Period Begin Balance		
	\$ 0					\$		
CERTIFICATION	1							
I certify that the Co	mmittee or Fund is in completutes and that no funds are c	ommingle	d with prohi	bited or othe	r non-disclosed fur	2B, & 22D-22M of Chapter 163 of ads. I further certify that this report		
	d correct and that I have been	en trained b	by the NC St	ate Board of	riections.	10/20/15		
Matthew I			- 0:-	gnature of Appo	inted Treasurer	Date		
	Printed Name of Signer		218	gnature of Appo	micu iicasuici	Duto ,		
FOR OFFICE USE Date Received	17 7 15	_]	Employee:	•	JG	Delivery Method Normal Mail		
Date Postmark		_]	Employee:			Registered Mail Hand Delivered		
Date Scanned:	12-7-15	_ 1	Employee:		G	☐ Electronically Filed ☐ Signer has not received		
Date Data Ente	ered:	_	Employee:			mandatory training		
Please Note: T	his form cannot be used to a custod	mend com lian of boo	ks informati	on, or accou	as the committee and information.	ddress, treasurer, assistant treasurer,		

AMANCE COUNTY

Amenamen

Amename

Yes

N

Use this form to summarize all disclosure reporting forms and to total monetary information 2. Type of Report 3. ID Number 1. Committee Full Name (and Fund if applicable) 4D4W45 Pre-Election Dobson for City Council Final Total this **Total this** 2015 January 1, **Start of Election Cycle: Election Cycle Reporting Period** \$ \$ 0 Cash on Hand at Start RECEIPTS \$ \$ **Aggregated Contributions from Individuals** (CRO-1205) 5) \$ 1923.36 1923.36 \$ (CRO-1210) **Contributions from Individuals** 6) \$ \$ **Contributions from Political Party Committees** (CRO-1220)7) \$ \$ **Contributions from Other Political Committees** (CRO-1230) \$ \$ (CRO-1410) 9) **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 \$ 1923.36 \$ 1923.36 **TOTAL RECEIPTS** (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e) **EXPENDITURES** 13) Disbursements \$ 1917.65 \$ 1917.65 (CRO-1310) 13a) Operating Expenditures \$ 13b) Contributions to Candidates/Political Committees (CRO-1310) \$ \$ \$ (CRO-1310) 13c) Coordinated Party Expenditures \$ \$ (CRO-1315) **Aggregated Non-Media Expenditures** \$ (CRO-1420) \$ Loan Repayments 15) \$ \$ Refunds/Reimbursements From the Committee (CRO-1320) \$ \$ (CRO-1510) **In-Kind Contributions** 17) \$ TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) \$ 18) \$ 0 Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) \$ 0 19) ADDITIONAL INFORMATION Non-Monetary Gifts Given to Other Committees (CRO-1330) 20) \$ Outstanding Loans (incl. ones from other campaigns) (CRO-1430) 21) \$ (CRO-1610) Debts and Obligations owed By the Committee 22) (CRO-1620) \$ Debts and Obligations owed To the Committee 23) \$ (CRO-1720) **Account Transfers Within the Committee** 24) \$ \$ (CRO-1710) 25) **Administrative Support** \$ \$ (CRO-1440) **Forgiven Loans** 26) \$ \$ (CRO-2200) 27) 48-Hour Notice Reports Sum \$ \$ (CRO-1215) Contributions to be Refunded 28)

		vidual contributions o		or contributions und	er 550 ii form CR			
1. Comm	ittee Full Name (2. ID Number						
Dobson for City Council						4D4W45		
3. Contributor Information								
	ne, Mailing Address &			b. Job Title/Profession	i e	d. Comment	s	
(include	city, state, & zip)							
Matthew				VP, C&R		Self		
4010 Cul				c. Employer's Name/S	pecific Field			
Burlingto	on, NC 27215			VSI		e. Election S	um to Data	
1 2				2 2		e. Election S		
						\$	1923.36	
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							\$	
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	ne, Mailing Address			b. Job Title/Profession		d. Comment	S	
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0.70	I	I Dawn on] : v	Vind December	i Data (mm/dd/m	\$	k. Amount	
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4. Tota	l only this Pag	ge			1	\$		1923.36
	of ALL CRC		an a			\$		
(This lin	ne must be on line 6 of	Detailed Summary Page (CRO-110	U)				

Contributions from Individuals

Amendment

Set this form to record excenditures from the committee for: operating excenses, contributions to candidate/volitical ommittees and coordinated party expenditures.): - l	m ta		D.	1 of	Amenamen Yes
Committee Full Name (and Fund if applicable)	Jisburseme	ents report expenditures t	from the committe	Pg e for: operating expenses		2
Committee Full Name (and Fund if applicable) 2.10 mulner 2.00 boths for Civic Council 4.04 by 45 4.00 boths of Civic Civic Council 4.04 by 45 4.00 boths of Civic Civi	ommittees and o	coordinated party ex	penditures.	o lot. Oboramie original		
Appeal information						
Contributions to Candidates/Political Committees Coordinated Party Expenditures		Council				
Payee Information	Type of Disbu	rsement (Plea	se use separate Ci	RO-1310 forms for each	type of Disbursen	nent.)
Formation Board	Operating Ex	rpenses				bordinated Party Expenditures
Full Name, Mailing Address & Phone enclude city, state, & zip) County	Payee Inform	ation				d Comments
Colacom, Inc San Francisco, CA 94051 County: State				b. Coordinated Committee	Name	u. Comments
Clevel Registered (Specify) County State County		& zip)				
Federal		CA 04051		c Level Registered (Specify	7)	
Society Soci	an Francicsco,	CA 94031				
Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount E. Required Remarks					e. Election Sum to Date	
Account Code g. Form of Payment b. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks Payee Information Add Remove Full Name, Nailing Address & Phone Add Remove Full Name, Nailing Address & Phone C. Level Registered (Specify)						\$ 25.26
Payee Information						
Payee Information	Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
Payee Information	Pre \$1000	Cash	A	7/15/2015	\$35.26	
Payce Information						
Full Name, Mailing Address & Phone					\$	
Description	Pavee Inform	ation	\square	Add	Remove	
Alamance County Board of Elect I.5 S.Maple Street Graham, NC 27253				b. Coordinated Committee	Name	d. Comments
Care County Board of Elect S. S.Maple Street C. Level Registered (Specify) Federal County: State Municipality: e. Election Sum to Date S. 20.00						
C. Level Registered (Specify) State County: C. Election Sum to Date	Alamance Cour	nty Board of Elect				Filing Fee
State Municipality: c. Election Sum to Date State Municipality: c. Election Sum to Date State				c. Level Registered (Specify		
Santo Sant	Graham, NC 27	253				The state of the s
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Description	. Pavee Inform	nation		Add	Remove	
Vista Print 95 Hayden Ave Lexington, MA 02421 Gamma				b. Coordinated Committee	Name	d. Comments
Vista Print 95 Hayden Ave Lexington, MA 02421 Federal County: State Municipality: e. Election Sum to Date \$ 114.00 \$ 114.00 \$ 114.00 \$ \$ 1000 Debit Card B 7/17/2015 \$60.00 Pre \$1000 Debit Card B 8/12/15 \$54.00 T-Shirts \$ 169.26 \$ 169.26 \$ 1000 To Another Candidate \$ 1000 To						
Lexington, MA 02421 Federal County: Municipality: e. Election Sum to Date State Munic	Vista Print					
State Municipality: State Municipality: e. Election Sum to Date	•					
\$ 114.00 S. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks Pre \$1000 Debit Card B 7/17/2015 \$60.00 Pre \$1000 Debit Card B 8/12/15 \$54.00 S. Total only this Page \$ 169.26 S. 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) (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) A* - Media B* - Printing C* - Fundraising D - To Another Candidate F* - Equipment G - Political Party H- Holding Public Office Expenses	Lexington, MA 02421					a Flection Sum to Date
Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks Pre \$1000 Debit Card B 7/17/2015 \$60.00 Pre \$1000 Debit Card B 8/12/15 \$54.00 T-Shirts 5. Total only this Page \$169.26 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) (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) A* - Media B* - Printing C* - Fundraising D - To Another Candidate F* - Equipment G - Political Party H- Holding Public Office Expenses				State	Municipanty.	
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A* - Media B* - Printing C* - Fundraising D - To Another Candidate E - Salaries F* - Equipment G - Political Party H* - Holding Public Office Expenses						
E - Salaries F* - Equipment G - Political Party H* - Holding Public Office Expenses			C* - Fun	draising		
L Paralties K* - Office Expenses O* - Donation to Legal Expense Fund						

Disburseme	nts	C	Pg	$\underline{2}$ of $\underline{3}$		
Jse this form to r	eport expenditures i oordinated party exp	rom the committe	e for: operating expenses	. Contributions to C	andidate/pontion	
	Il Name (and Fund				2. ID Number	
Oobson for City		і п аррпеавіс)			4D4W45	
Type of Disbu		se use senarate Cl	RO-1310 forms for each	type of Disbursem	ent.)	
Operating Ex	EARLING CONTROL OF THE PARTY OF	Contributions to Can	didates/Political Committees	Coc	ordinated Party Expenditures	
. Payee Informa		\boxtimes	Add	Remove		
	g Address & Phone		b. Coordinated Committee N	Name	d. Comments	
include city, state, &						
Van's Advertisin					Yard Signs	
3290 Van Dr			c. Level Registered (Specify)	County:		
Burlington, NC 2	27215		Federal	Til. C. Governto Data		
			State 🖂	Municipality:	e. Election Sum to Date	
					\$ 819.09	
		h Duumasa Cada	1 D 4 (/14/mmm)	; Amount	k. Required Remarks	
. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	Yard Signs	
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					Yard Signs	
1	Debit Card	В	10/01/15	\$419.09		
4 D T C	ation .		Add	Remove		
l. Payee Inform			b. Coordinated Committee		d. Comments	
	ng Address & Phone		b. Coordinated Committee			
include city, state, a International Mi					Handouts	
1143-F St Marks			c. Level Registered (Specify	·)		
Burlington, NC			Federal	County:		
Durinigion, IVC	2/213		State 🖂	Municipality:	e. Election Sum to Date	
					\$ 233.46	
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4	Dalit Cand	В	10/1/15	\$110.41	Handouts,	
1	Debit Card	В	10/1/13	Ψ110.11	Stickers	
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a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee	Name	d. Comments	
(include city, state,	& zip)					
BJs						
1433 Boone Sta	tion Drive		c. Level Registered (Specify			
Burlington, NC			Federal	County:	e. Election Sum to Date	
27215			State 🖂	Municipality:	e. Election Sum to Date	
					\$ 297.17	
	- Form of Downson's	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
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				0155.01	Water Bottles	
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5. Total only th	is Page		• • • • • • • • • • • • • • • • • • •		\$ 1349.72	
6. Total of ALL	CRO-1310 Pages					
	(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)					
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(This line goes in	line 13c of Detailed Su			uuures)		
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(This line goes in (This line goes in	line 13c of Detailed Su	xpenditure code in C* - Fun		D - To Anot	her Candidate ag Public Office Expenses	

I - Postage
O* - Other

Amenamen Yes

Disburseme	ents			Pg	<u>3</u> of		
Use this form to	report expenditures	from the committe	ee for: operating exp	enses,	contributions to o	andidate/political	
	coordinated party ex					2. ID Number	
	ull Name (and Fund	d if applicable)				4D4W45	
Dobson for City		sa usa sanarata C	RO-1310 forms for	each t	ne of Dishursem		
3. Type of Disbu			didates/Political Commi		Co	ordinated Party Expenditures	
4. Payee Inform			Add	П	Remove		
	ng Address & Phone		b. Coordinated Comm	nittee Na		d. Comments	
(include city, state,							
Facebook	ac hp)					Online Advertis	
1601 S. Californ	nia		c. Level Registered (S	pecify)			
Palo Alto, CA 9	4304		Federal County:				
			State		Municipality:	e. Election Sum to Date	
						\$ 50.00	
	77 O.D. /	h. Purpose Code	: Data (mm/dd/gg)	j. Amount	k. Required Remarks	
f. Account Code	g. Form of Payment	n. rurpose Couc	i. Date (mm/dd/yy	уу)	J. Amount	Online Advert	
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					0		
					\$		
4. Payee Inform	ation		Add		Remove		
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(include city, state,	& zip)					II I t	
Office Depot						Handouts	
1825 South Chu			c. Level Registered (S	pecity)	Country		
Burlington, NC	27215		Federal State		County: Municipality:	e. Election Sum to Date	
			State		Municipanty.		
						\$ 32.03	
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	ing Address & Phone		b. Coordinated Com	mittee N	ame	u. Comments	
(include city, state,	& zip)						
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Burlington, NC			Federal County:				
27215			State	\boxtimes	Municipality:	e. Election Sum to Date	
27210			- Landson - Land			\$ 316.64	
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. 1	Beoft Card		3/2//10		-	FOOD/Drin	
1	Debit Card	0	9/27/15		\$159.64	Hosted Recept	
5 T						\$ 398.67	
5. Total only th	CRO-1310 Pages					\$ 350.07	
(This line goes in	0 1017.65						
	00 if Contrib to Candida		cal Comm)	\$ 1917.65			
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)							
	les (List detailed ex						
A* - Media	draising			her Candidate			
E - Salaries	F* - Equipment					g Public Office Expenses on to Legal Expense Fund	
I - Postage O* - Other	J - Penalties	K* - Off	ice Expenses		Q" - Donati	on to Legai Expense runu	
o - Other	, , , , ,		1 6 11 /1				

Amendment