Disclosure Report	Cover	formation m	ist he sioned	and submitted	Yes No l along with other detailed forms.
Use this form for general rep	ort and committee in	ioimauon, mi	iot oc aigned		
Do not use this form to upda	tte information.				
1. Committee Information	19				c. ID Number
a. Full Name	(1)	1 60			
Committee to	Elect Tara	L. Fik	15	KI DEDS	ONd. Date Filed
b. Mailing Address (include City				NPENO	
100 4 12211	_			DEC 1 5 70	n15 12115115 _
1 f.o. Gox 10010				DEC 10 A	e. Phone Number
P.O. Box 13316 Durham, NC	21709				30E 919-493-1991
2. Report Year 3. Period S		4. Period E	nd Date (mm	/dd/yy) 5. Tre	easurer Full Name
	107/2015	12/1	5/2015	1	a Lynne Fikes
2015 121				mly one type o	f report from one category)
6. Type of Committee (Ch		Type of Kepunicipal	Stoto	County	Referendum
Candidate Campaign	=	unicipal Organizational		Organizational	Organizational
PAC	Referendum	Thirty-five day	/—·	Quarterly	Pre-referendum
Independent Expenditure	Joint Fundraiser	Pre-primary		First	Final
Legal Expense Fund	ᆙ	Pre-election	15	Second	Supplemental Final
	icable, check one)	Pre-runoff	15	Third	Annual
7. Type of Fund (if apple Booster Fund	Cao,c, Caoque any	Semi-annual		Fourth	☐ Special
Building Fund	10	Mid Yea	r —	Semi-annual	
Dullding I and	١Ē	Year End	ı 🗆	Mid Year	10. Special Report Nam
Other:	Į [Final		Year End	
8. Number of Fundraiser	s this Report	Special	Final		
-0-				Special	
11. Account Information				t Information	
a. Financial Institution Full Na	me		a. Financial I	nstitution Full Na	ame
SunTrust Ban	<u>k</u>		h Durmage		c. Account Code
b. Purpose	c. Account Code	<u> </u>	b. Purpose		t. Account cour
Candidate Campaign	CCAPI	<u> </u>	<u> </u>		d. Period Begin Balance
Comoinso	d. Period Begin	Balance			
Campaign	 \$ - 0	-			\$
CERTIFICATION I certify that the Committee of the NC General Statutes report is complete, true and	and that no funds are o	commingled with	n pronibilea o	r omer non-uisc	22A, 22B & 22D-22M of Chapter 16 closed funds. I further certify that the
	- 14 - A		THE 1 1	(A)	10/15/15
lara L. h	kes		mo [1. To June	Date
Printed Name		Si	gnature of App	ointed Treasurer	Dute
FOR OFFICE USE ONI Date Received:	12/15/15	Emple	oyee: D	R	Delivery Method ☐ Normal Mail ☐ Registered Mail
Date Postmarked:		. Emple	oyee:		☐ Hand Delivered ☐ Electronically Filed
Date Scanned:		Emple	oyee:		Signer has not received
Date Data Entered:		Empl	oyee:		mandatory training

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

Date Data Entered:

CRO-1000

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes. NC State Board of Elections

August 2008

Detailed Summary	- tatal	tory information	□ Y	es 🔲 No
Use this form to summarize all disclosure reporting forms and to 1. Committee Full Name (and Fund if applicable)	. Type of Re	eport	3. ID Nui	nber
Committee to Elect Tara L. Fikes		zational		Total this
Start of Election Cycle: January 1, 2015	0	Total this Reporting Perio	d 1	Total this Election Cycle
4) Cash on Hand at Start		\$	\$	
RECEIPTS				
	(CRO-1205)	\$	\$	
6) Contributions from Individuals	(CRO-1210)	\$ 527.0	3 \$	527.03
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)	\$	٩N	PERSON
11) Other Receipt Sources				
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$	UEC 1 5 2015
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$	DU	JRHAM BOE
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)	\$ 521.0	3 \$	527.03
EXPENDITURES				<u> </u>
13) Disbursements				2.49 = 2
13a) Operating Expenditures	(CRO-1310)	\$ 217.0	3 \$	211.03
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, 1	15, 16 and 17)	\$ 277.0		277.03
19) Cash on Hand at End (Add lines 4 and 12 together, then su			2 \$	250.00
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)	\$	\$	

					} 4		mendment	
Contri	Contributions from Individuals Pg of Pg Yes No Ise this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used							
Use this for	Se this form to report individual contributions over \$50 or contributions under \$50 it form texts. Committee Full Name (and Fund if applicable)						Number	
Control	Committee to Elect Tara L. tikes Contributor Information Add Remove							
	ne, Mailing Addres			b. Job Title/Profess	sion	d. Cor	nments	
	city, state, & zip)			Retired				
Tora b. fikes 5113 Bridgewood Dr.			c. Employer's Name/Specific Field					
5113 Bridgewood Dr. Durham, NC 21713			l F			ction Sum to Date		
William 11- 21713			\$			527.03		
f. Prior g	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy	y) l	k. Amount	
		Cheek			12/07/2019	5	\$ 478.03	
		Check Could Cand			12/07/201	5	\$ 49.00	
							\$	
	ibutor Inform	tion .		Add Rer	nove	(A)		
	me, Mailing Addr			b. Job Title/Profes	ssion	d. Co	mments	
(include	city, state, & zip)	IN	PERSON	4				
			DEC 1 5 2015	c. Employer's Nar	ne/Specific Field]		
			_			e. El	e. Election Sum to Date	
		D	URHAM BOE				\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descri	ption	j. Date (mm/dd/yy	yy)	k. Amount	
	g. Account code						\$	
							\$	
						_	\$	
	elkutor Inform	seffer	_ 	Add □ Re	move			
	3. Contributor Information a. Full Name, Mailing Address & Phone b. Job Title/Profession						d. Comments	
(includ	le city, state, & zip)		4				
	c. Employer's Name/Specific Field							
						e. E	lection Sum to Date	
	·					\$		
f. Prior	g. Account Code	I Form of Payment	i. In-Kind Descr	iption	j. Date (mm/dd/y	ууу)	k. Amount	
							\$	
							\$	
							\$	
4. To	4. Total only this Page						521.03	
5. To	5. Total of ALL CRO-1210 Pages						<i>5</i> 21.03	
(This line must be on line 6 of Detaued Summary Page CRO-1100)								
CRO-1	210		ine State D	COLO CL ENVOICEMENT			-	

					1	Amendment
Disburseme	ents				Pg of	Yes No
Use this form to I	eport expenditures foordinated party exp	rom the committe	e for o	perating expe	enses, contributio	ns to candidate/political
	ill Name (and Fund					2. ID Number
Committ			. Fit	ces		
3. Type of Disbu			0-1310	forms for e	ach type of Disbu	irsement.)
Operating Expe		ributions to Candida				dinated Party Expenditures
4. Payee Inform			X		Remove	
a. Full Name, Ma	ailing Address & Pho	one		b. Coordinate	d Committee Name	d. Comments
(include city, state,	& zip)	. 0 -				
Burham	County Down	dof blect	ons	c. Level Regis	tered (Specify)	
Burham County Board of Elections P.O. Box 968				Federal	County: 2	
				State		ity: e. Election Sum to Date
Durham, NC 27702			Dur		\$ 226.03	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	J. Almount	k. Required Remarks
	Check	H	120	1/2015	\$228.03	Filing Fee
				•	\$)
4. Payee Inform	ation			Add 🔲	Remove	
1 40 3 W	ing Address & Phone			b. Coordinate	ed Committee Name	d. Comments
(include city, stat				4		
United.	States Post Alexander	nd Service	e	c. Level Regi	stered (Specify)	
10 Tu	Alovous	drive.		Federal	County:	
W GO	riexander	SINO		☐ State	Municipa Municipa	lity: e. Election Sum to Date
Dinhan	~, NC 27700	Î		Du	-ham	\$ 49.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. Required Remarks
	Creit Card	H	12	07/2016	\$ 49.00	Host Office Box Kentau
	Crack City		1	+ +	\$	
le xxxxxxxxx				Add -	Remove .	
4. Payee Inform	nation ing Address & Phone			Contract of the suppose	ted Committee Name	
(include city, sta		IN PERS	ON.			
		IN PENC	,014		1 (9 - 16)	
Ì		DEC 1 5 2	015	c. Level Reg	istered (Specify) County:	
				State	Municipa	ality: e. Election Sum to Date
		DURHAM I	BOE			\$
		<u> </u>	1	((1)()	1: 4	k. Required Remarks
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)		K. Required Remarks
			<u> </u>		\$	
			<u> </u>		\$	
5. Total only th	his Page					\$ 271.03 \$ 277.03
6. Total of AL	L CRO-1310 Pages		19.4.			
(This line goes i	n line 13a of Detailed Su	mmary Page CRO-1	100 if Op	erating Expen	ses)	s 271.03
(This line goes i	n line 13b of Detailed Su	mmary Page CRO-1	100 if Co	ontrib to Candi	dates/Political Comn	n)
	n line 13c of Detailed Su				y Expenditures)	
	odes (List detaile		ce in (h	.) above) Fundraising	. D - То	Another Candidate
A* - Media E - Salaries	B* - Print F* - Equi	•		r unaraising olitical Party	,	Holding Public Office Expenses
I - Postage	J - Penal			Office Expe		Oonation to Legal Expense Fund
O* Other	0 _ 3			-		
	re detailed explana	tion in required	remar	ks field (k)		