Ame	endm	ent	,	
	Yes		-5	No
	. 1	1	. 5	c :

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			
Committee to Flect	Fred	faiter		47-3749026			
b. Mailing Address (include City, State and Zip Code)				d. Date Filed			
P.c. Box 15752							
Dier ban NC 27704 (919) 479-8705							
2. Report Year 3. Period Start Date (mm/dd/yy) 4. Period End Date (mm/dd/yy) 5. Treasurer Full Name							
1-1-2013		-2013		sked 50			
o. 1 Jbo or comment (the time)				t from one category)			
Contraction description of the contraction of the c	nicipal	State/County		Referendum			
	Organizational	i ——	onal	Organizational Pre-referendum			
☐ Independent Expenditure ☐ Joint Fundraiser ☐	Thirty-five day	Quarterly First		Final			
Legal Expense Fund	Pre-primary Pre-election	Seco	nd	Supplemental Final			
7. Type of Fund (if applicable, check one)		Third		Annual			
Booster Fund	Semi-annual	Four	th I	Special Special			
Building Fund	Mid Year	Semi-anni					
[_]	Year End		t t	10. Special Report Name			
Other:	Final	Year	End				
8. Number of Fundraisers this Report	Special	Final	İ				
		☐ Special					
11. Account Information	11. Account Information 11. Account Information						
a. Financial Institution Full Name		a. Financial Institution	Full Name				
Branch Bardeing + Tras	t 1						
b. Purpose c. Account Code		b. Purpose		c. Account Code			
d. Period Begin B	alance		Ì	d. Period Begin Balance			
Campaign d. Period Begin B				\$			
CERTIFICATION	,						
I certify that the Committee or Fund is in compliance	e with all appl	icable provisions of Ar	ticle 22A, 22B	& 22D-22M of Chapter 163			
of the NC General Statutes and that no funds are con-	mmingled with	prohibited or other no	n-disclosed fu	nds. I further certify that this			
report is complete, true and correct and that I have b	peen trained by	the NC State Board of	Elections.				
	(,)	/		7 0 13			
Jerry Head Sr.		Just 6		7-9-13			
Printed Name of Signer		nature of Appointed Trea	surer	Date			
FOR OFFICE USE ONLY N-PERSO	V	1	D. II	ivani Mathod			
Date Received:	Employ	/ee:		ivery <u>Method</u> Normal Mail			
JUL 0 9 201 3		_		Registered Mail			
Date Postmarked:	Employ	/ee:	- 123	Hand Delivered			
Date Scanned: DURHAM BO	Employ	/ee:		Electronically Filed			
Date Data Entered:	Employ	yee:		Signer has not received mandatory training			
Please Note: This form cannot be used to							
Please Note: This form cannot be used to assistant treasurer, custo	amena comm	s information or acc	ount informa	tion			
assistant treasurer, custo You must amend the Statement of							

Detailed SummaryUse this form to summarize all disclosure reporting forms and to total monetary information

Amendment

Use this form to summarize all disclosure reporting forms and 1. Committee Full Name (and Fund if applicable)	2. Type of	Report	3. ID Number
	<u> </u>		43-3749026
Caron. The de Shed free haster		Total this	Total this
Start of Election Cycle: January 1, 2012	•	Reporting Perio	1
4) Cash on Hand at Start		\$ 38.59	\$ 100,00
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 0	\$3503.00
6) Contributions from Individuals	(CRO-1210)	\$ 700,00	\$ 4911.00
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0	\$ 500.00
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0	\$ 1775,00
9) Loan Proceeds	(CRO-1410)	s 0	\$ /00,00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	s O	\$ 375,00
11) Other Receipt Sources	-	Company of the Compan	The Land of the Control of the Contr
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,	lld and lle)	\$ 700.60	\$ 11164.00
<u>EXPENDITURES</u>		and the same of th	
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	5 53520	\$ 10760171
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	\$ 200,00
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$
15) Loan Repayments	(CRO-1420)	\$	\$ 100,00
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$	\$
17) In-Kind Contributions	(CRO-1510)	\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1	5, 16 and 17)	\$ 53530	\$ 11060,71
19) Cash on Hand at End (Add lines 4 and 12 together, then sul	otract line 18)	\$ 207,29	\$ 203,29
ADDITIONAL INFORMATION		ſ 	
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)		
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	S	
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)	\$	H-MFT NALLS
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)	\$	\$ August 2008
CRO-1100 NC State Boa	rd of Elections		August 2008

Disbursement

Pg	1 .	<u> </u>	Amendment Yes	⊄ No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee F	ull Name (and Fund	if applicable)				2. ID Number
(Comme)	Her do 5		ر له	214		43-3749026
3. Type of Disb	ursement (Please	use separate CR		forms for e	ach type of Disb	ursement.)
Operating Expe		ributions to Candidat				rdinated Party Expenditures
4. Payee Inform			B	Add 🔲	Remove	
	ailing Address & Pho	one	1	b. Coordinate	ed Committee Name	d. Comments
(include city, state,	-					
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R	ナブ			c. Level Regis	stered (Specify) County:	
7.0.1	20 1 52 10			State	Municipa	lity: e. Election Sum to Date
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w, No	Rey 819 m, INC 27	894				\$
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	<u> </u>		1.7		\$	Lee
4. Payee Inforn	nation			Add	Remove	
	ing Address & Phone	<u> </u>	~		ed Committee Name	d. Comments
(include city, stat	•					
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f. Account Code			i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	Clark	Ó	3/11	2012	\$ 225.00	Atterney Leas
			, , , ,		S	J
4. Payee Inforn	nation			Add 🔲	Remove	
	ing Address & Phone			5. Coordinat	ed Committee Name	d. Comments
(include city, stat	te, & zip)		~~~			
TIPA	y A Rose	5) ı		c. Level Regi	stered (Specify)	
155	7 ~ ~ ~	-) <i>)</i>		Federal	County:	
1 2 3 8	v. mands	t., Ste. 70	(State	Municipa	dity: e. Election Sum to Date
Durk	مس عد 2-	770)				\$
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	CRO-1310 Pages					\$ 266.20
and the second of the second o		nmary Page CRO-11	00 if One	rating Expens	es)	
(This line goes in	(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* - Printi			undraising	D - To	Another Candidate
E - Salaries	F* - Equip			litical Party		olding Public Office Expenses
I - Postage	J - Penalti		K* - C	office Exper	ises Q* - De	onation to Legal Expense Fund
O* Other						
* Codes requir	re detailed explanati	ion in required r	emark	s field (k)		

Dis	bur	sem	ents
	vui	JULL	ω

	_		-	Ame	endme	ent	
Pg	3	of	7		Yes		No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

_	ull Name (and Func	l if applicable)				2. ID Number				
(c)	1xen 20 5	lost for	ر لي	les th		43-3749026				
3. Type of Disbu	ursement (Please	use separate CR	0-1310	forms for e	ach type of Disb	ursement.)				
Operating Expe		tributions to Candida	tes/Politic	cal Committees	. Coo	rdinated Party Expenditures				
4. Payee Inform	ation			Add \Box	Remove					
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(include city, state,	(include city, state, & zip)									
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					\$	7				
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(include city, stat	e, & zip)									
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Pg Z	of	2	☐ Yes	乜	No
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Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

	all Name (and Fund					2. ID Number
(comes	1/2 Le 5	wel. In		214		43-3749026
3. Type of Disbu	irsement (Please	use separate CR	<i>0-1310</i>	forms for e	ach type of Disb	<u>ursement.)</u>
Operating Expe		ributions to Candida	tes/Politic	al Committees	Coo	rdinated Party Expenditures
4. Payee Inform	ation		BX	Add 🔲	Remove	
a. Full Name, Ma	ailing Address & Pho	one		b. Coordinate	d Committee Name	d. Comments
(include city, state,	& zip)					
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	odes (List detailed			undraising	D - To	Another Candidate
A* - Media E - Salaries	B* - Printi F* - Equip	•		olitical Party		Iolding Public Office Expenses
E - Salaries I - Postage	J - Penalti			Office Exper		Conation to Legal Expense Fund
O* Other	y - genare		`		•	-
	re detailed explanat	ion in required	remark	s field (k)		

~ '		am Individual	c	г.) of	î	Amendment Yes No	
Contributions from Individuals Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used								
1. Committee Full Name (and Fund if applicable)						2. II	2. ID Number	
						4	3-3749026	
3. Contributor Information Add LI Remove								
a. Full Name, Mailing Address & Phone				b. Job Title/Profession		d. Co	numents	
(include	e city, state, & zip)	And the second s		Businers Owner				
Guen mathews				c. Employer's Name/Specific Field				
202 N. Corceron st.				Self		e. Election Sum to Date		
Durham, Inc 27701						S		
	er son	MC 2770	i. In-Kind Descrip	l	i. Date (nm/dd/yyy	v)	k. Amount	
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Ernes terne Parker Grandry c. Employer's Name/Specific Field								
2921 Hark				Retired		e. E	lection Sum to Date	
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l						e. F	Election Sum to Date	
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