Disclosure Rep	ort Cover						Amendment No
Use this form for gene	eral report and committee	nformat	ion, must be	signed	and sub	mitted along with o	
Do not use this form to							
1. Committee Inform a. Full Name	ection			And the second s			c. ID Number
Eric Davis for School	l Board						7GXX08
				<u>.                                    </u>			
	de City, State and Zip Code)						d. Date Filed
Post Office Box 1175 Charlotte, NC 28220	·L					٠	10/24/2013
Charlotte, Ite 20220							e. Phone Number
							704-333-4244
							701 333 1211
2. Report Year 3	s. Period Start Date (mm/c	ld/yy)	4. Period (mm/dd/yy)	eno na	te	5. Treasurer Ful	ll Name
2013	09/25/2013			21/2013		Raiph H. Falls, I	II
6. Type of Committee	The second secon	9, Typ	e of Report	(ci	heck on	ly one type of repor	t from one category)
Candidate Campaig	gn 🔲 Party	Municip			State/Co		Referendum
PAC Independent	Referendum		Organizational	l [		Organizational	Organizational
Expenditure Expenditure	Joint Fundraiser		Thirty-five day	y	(	Quarterly	Pre-referendum
Legal Expense Fund 7. Type of Fund	u (if applicable, check one)		Pre-primary		П	First	Finat
"Booster Fund"			Pre-election		Ħ	Second	Supplemental Final
Building Fund			Pre-runoff	l		Third	Annual
			Semi-annual			Fourth	Special
			Mid Year	- 1	S	Semi-annual	
Other:			Year End		$\sqcup$	Mid Year	10. Special Report Name
8. Number of Fundra	isers this Report	! ==	Final Special	İ		Year End Final	
	0	L_1			_	Special	
11. Account Informat				11. Ac		nformation	
a. Financial Institution Ful		File and the second of	the act with the control of the cont	And the programme are		tution Full Name	and programmed the second seco
Wells Fargo							
b. Purpose	c. Account Code			b. Purpe	ose		c. Account Code
Expenses	01						
	d. Period Begin Balance						d. Period Begin Balance
	\$ 12,230.97						\$
CERTIFICATION	•						
I certify that the Comm	nittee or Fund is in compli-	ance with	h all applica	ble prov	isions o	f Article 22A, 22B	, & 22D-22M of Chapter 163 of
is complete, true and co	orrect and that I have been	mmingle trained	o with proni by the NC S	ionea or tate Bos	omer n ard∕of⁄ E⁄	ion-aisciosea iunas Vections	. I further certify that this report
Ralph H. Falls		***************************************					10/24/2013
	Printed Name of Signer		Si	gnature of	Appoint	d Treasurer	Date
FOR OFFICE USE ON	LY				0		
Date Received:	MECKLENBURG COU	VTV	Employee:		LB	<u>L</u>	Delivery Method Normal Mail
Date Postmarked:	OCT 2 4 2013		Employee:				Registered Mail Hand Delivered
Date Scanned:		ın	Employee:		(0)	<u></u>	Electronically Filed
Date Date Box	BOARD OF ELECTION		<b>.</b>				Signer has not received mandatory training
Date Data Entered	•		Employee:				<b>,5</b>
Please Note: This f							ess, treasurer, assistant treasurer,
v	custodia Cou must amend the Staten		ks informati Irganization	-			taa ahangas

Amendment

Amendment  $\boxtimes$ No Yes

**Detailed Summary**Use this form to summarize all disclosure reporting forms and to total monetary information.

	2. Type of Report		3. ID Number
Eric Davis for School Board	Pre-Election		7GXX08
Start of Election Cycle: January 1,	2013	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 12,230.97	\$
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$ 875.00	\$ 18,083.00
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	*		ente proposition descriptions for at
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$
11b) Contributions from Not-for-Profit Organizati	ons <i>(CRO-1250)</i>	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$	\$
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11	c, 11d and 11e)	\$ 875.00	\$ 18,083.00
<u>EXPENDITURES</u>			mastarrezenten erikitata
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 8,505.00	\$ 13,334.03
13b) Contributions to Candidates/Political Commit	tees (CRO-1310)	\$ 500.00	\$ 500.00
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)	\$	\$ 148.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1	5, 16 and 17)	\$ 9,005.00	\$ 13,982.03
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18)	\$ 4,100.97	\$ 4,100.97
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaign	rs) <i>(CRO-1430)</i>	\$	
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)	\$	\$
	·		

		m Individuals ividual contributions of	orion & S		Pg 1 of	<u>3</u>	Amendment  Yes	No.
	<u> </u>	(and Fund if applica	.,	o or contributions a	ilder \$50 if form CR	2. ID Num		
	vis for School Boa		en erroger i 🍎 tolet til tolet				7GXX08	
3. Conti	ibutor Informati	on	<b></b>	Add [] I	Remove			
	me, Mailing Address	& Phone		b. Job Title/Professi	on in the second second second	d, Comment	8	
(include Hamlin	e city, state, & zip) 🖃		. ". : ."	Attorney				
	c. wade xcroft Road			c. Employer's Name	/Specific Field			
	e, NC 28211			Ruff, Bond, Cob	·			
704-377	·					e. Election S	um to Date	
						\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i, In-l	 Kind Description	j. Date (mm/dd/yy	уу)	k. Amount	
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							\$	
							\$	
3. Contr	ibutor Informati	on		Add 🗍 J	Remove			
	me, Mailing Address			b. Job Title/Professi	on :	d. Comments	3	
	city, state, & zip)		N- 31.8 1 1 1 .	President				
	White, IV ckbrook Drive			a Employeda Nama	Casalfia Field			
	e, NC 28211			c. Employer's Name Nisbet Oil Co.	ospecine rieiu			
704-332-	•			rusoct on co.		e. Election Si	ım to Date	
						\$	50.00	
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Saleschar or Discours with an Same Sales	ibutor Informatio	page of the entire term of the residence of the entire of the first of		S Anna con and articulation in the property of the control of the	emove			
	ne, Mailing Address	& Phone		b. Job Title/Profession		d. Comments		
(include R. Kent I	city, state, & zip)		•	Financial Service	es			
160 Shad				e. Employer's Name/	Specific Field			
	, NC 28214			Wells Fargo Ban				
704-393-	•					e. Election Su	ım to Date	
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	01	check			10/01/20	)13	\$	100.00
							\$	
							\$	

CRO-1210

4. Total only this Page

5. Total of ALL CRO-1210 Pages

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

250.00

875.00

\$

\$

Contr	ibutions fro	m Individuals		Pg	_2 of	3_	Yes	No
Use this	form to report ind	ividual contributions of	over \$5	0 or contributions unde	er \$50 if form CR	O 1205 is n	ot used	<del></del>
1. Comn	nittee Full Name	(and Fund if applica	ble)			2. ID Nu	mber	Charles Services Control of the Cont
Eric Dav	is for School Boar	rd					7GXX08	
3. Contr	ibutor Informati	on	$\square$	Add 🔲 Ren	nove		and the control of th	
114	me, Mailing Address	& Phone		b. Job Title/Profession		d. Commer	its	
	city, state, & zip)			Managing Principal	1			
J. Ronald	1 Boozer thwood Drive			c. Employer's Name/Sp	im. Ph.13			
	e, NC 28211			Design Strategies	ecine Field	<u> </u>		
704-344-				Architecture		e. Election	Sum to Date	
						\$	200.00	
			,				200.00	
f. Prior	g, Account Code	h. Form of Payment	i, In-F	Kind Description	j. Date (mm/dd/yy	уу)	k, Amount	
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**************************************	ibutor Informatio	The Control of the Co	X	Add 🔲 Ren	iove		And the state of t	
	ne, Mailing Address (	& Phone		b. Job Title/Profession		d. Commen	ts	
(include Alan Ban	city, state, & zip)			Owner				
	rrifield Road			c. Employer's Name/Spe	oaiga Eiste	-		
	, NC 28211			Evans Coghill Hom		1		
704-364-	•			Brano Cognin IIoni		e. Election S	Sum to Date	<del> </del>
						\$	150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Sind Description	j. Date (mm/dd/yy	(33.)	k. Amount	
	01	check			10/15/2	013	150.00	
							\$	
							\$	
3. Contri	butor Informatio	in The state of th	×	Add Rem	iove			
	ie, Mailing Address &	& Phone		b. Job Title/Profession		d. Commen	ts	
	city, state, & zip)			Attorney				
Matthew	R. Joyner erness Road							
	, NC 28209			c. Employer's Name/Spe Bishop, Dulaney &				
704-442-8				Dishop, Durancy &	JOYNEI	e. Election S	Sum to Date	
						\$	100.00	
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5. Total	of ALL CRO	-1210 Pages				<u>^</u>		
(This line	must be on line 6 of 1	Detailed Summary Page Ci	RO-(100)			\$		875.00

Amendment

		m Individuals		Pg	_3 of	3_	Yes Yes	⊠ No
Appropriate School of the party of the second				O or contributions unde	r \$50 if form CR			
1. Comn	nittee Full Name	(and Fund if applical	ole)			2. ID Nun	iber	
Eric Dav	is for School Boar	rd					7GXX08	
3. Contr	ibutor Informati	on which was the same	$\square$	Add Rem	iove		Annual Addition of the Annual	
	me, Mailing Address	& Phone		b. Job Title/Profession		d. Comment	S	
	city, state, & zip)			Owner				
Eric Ellis					***	-		
	sman Lane , NC 28210			c. Employer's Name/Spe Eric Ellis Web Desi		-		
704-392-	•			Enc ens web Desi	gn	e. Election S	um to Doto	
70.072	1050							
45.	T				<b>y</b>	\$	25.00	
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							\$	
							\$	
	ibutor Informatio	A STATE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.	X	Add 🔲 Rem	ove			A CONTROL OF THE PROPERTY OF T
	ne, Mailing Address &	& Phone	, North	b. Job Title/Profession		d. Comments		
	city, state, & zip)			Partner				
Stephen I	оскегу samia Place				••	1		
	, NC 28211			c. Employer's Name/Spe Fidus Partners	citic Field	-		
704-334-	•			ridus ratificis		e. Election St	ım to Date	
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	butor Informatio	The state of the s	M	Add 🔲 Rem	ove	Approximately to the second se		
	ie, Mailing Address &	& Phone	- T.	b. Job Title/Profession		d. Comments		
(include ) Richard N	city, state, & zip)			Attorney				
	nack rhill Road			- P	10. 11. 11.			
	, NC 28211			c. Employer's Name/Spec Robinson, Bradshaw				
704-366-9				Koomson, Dragsnaw	& HIIISOH	e. Election Su	ım ta Date	
						\$	50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/yy		k. Amount	
	01	check			10/21/20	)13	\$	50.00
					1000-01-0		\$	
							\$	
4. Total	only this Page					\$	<del></del>	175.00
5. Total	of ALL CRO-	1210 Pages			A CAMPAN AND AND AND AND AND AND AND AND AND A	¢,		
(This line	must be on line 6 of 1	Detailed Summary Page CR	0-1100)			\$		875.00

**Contributions from Individuals** 

Amendment

				Amend	ment		
Disbursements	Pg	<u>1</u>	of <u>9</u>		Yes	$\boxtimes$	No

ose and form to report expenditures from the committee i	or, operating expenses,	, contributions to	candidate/pointcat
committees and coordinated party expenditures.			

1. Committee F Eric Davis for S	ull Name (and Fun School Board	d if applicable)			2. ID Number 7GXX08				
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)									
Operating E	C 22 C 25		ndidates/Political Committees		ordinated Party Expenditures				
4. Payee Inform	<u> </u>	×	Add	Remove					
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee Na	ame	d. Comments				
I to the second of the second	& zip)								
Wells Fargo									
PO Box 6995			c. Level Registered (Specify)						
Portland, OR 97	7228		Federal 🖂	County:					
800-225-5935			State	Municipality:	e. Election Sum to Date				
					\$ 101.36				
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks				
01	deduction	0	09/26/2013	\$5.00	Checking				
V1	dedaction	Ů	07/20/2015	ψ5.00	Account Fees				
				\$					
4. Payee Inform	ation		Add	Remove					
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee Na	ime	d. Comments				
(include city, state,									
, ,	Elementary PTA			<del> </del>					
Ms. Caroline Ho			c. Level Registered (Specify)						
6001 Quail Holl			Federal 🛛	County:					
Charlotte, NC 2	8210		State	Municipality:	c. Election Sum to Date				
980-343-3627					\$ 250.00				
f. Account Code	g. Form of Payment	h, Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks				
01	check	О	10/15/2013	\$250.00	Contribution				
				\$					
4. Payee Inform	ation		Add T	l Remove					
	ng Address & Phone		b. Coordinated Committee Na	in y Agent in the symmetry of the second of the symmetry of th	d. Comments				
(include city, state,	· ·								
	anguage Academy								
PTA			c. Level Registered (Specify)						
Ms. Nicollette C	Frant		Federal 🖂	County:					
4000 Applegate	Road		State	Municipality:	e. Election Sum to Date				
Charlotte, NC 23 980-343-5820	8209				\$ 250.00				
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks				
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				\$	***				
5. Total only thi	s Page				\$ 505.00				
	CRO-1310 Pages				\$ 303.00				
	line 13a of Detailed Sun	mary Page CRO-1100	) if Operating Expenses)		0 0 0 0 0 0 0				
_			) if Contrib to Candidates/Politica	al Comm)	\$ 8,505.00				
_	•		if Coordinated Party Expenditu						
	es (List detailed exp								
A* - Media	B* - Printing	C* - Fund		D - To Anothe					
E - Salaries I - Postage	F* - Equipment J - Penalties	G - Politic	•		Public Office Expenses				
O* - Other	o - remantes	A" - UHIC	e Expenses	A nouation	ı to Legal Expense Fund				
15 miles miles and miles and miles and the first and an arrangement of the contract of the con	e detailed explanati	on in required re	marks field (k)						

								Amenament	
Disbursements				Pg	2	of	2	☐ Yes 🖂	N
	 _								

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								
Eric Davis for S	School Board		and a statement of the		7GXX08			
3. Type of Disbi			RO-1310 forms for each ty	ype of Disbursem	ent.)			
Operating E		Contributions to Can	ndidates/Political Committees		ordinated Party Expenditures			
4. Payce Inform	nation		Add	Remove				
	ing Address & Phone		b. Coordinated Committee Na	ante	d. Comments			
(include city, state,								
Cotswold Eleme				-	1			
Ms. Alicia Giles	•	, , , , , , , , , , , , , , , , , , ,	e. Level Registered (Specify)		de la companya de la			
300 Greenwich		7	Federal 🖂	County:	1			
Charlotte, NC 2		1	State	Municipality:	e. Election Sum to Date			
980-343-6720	0211	•	L simv L	within orpanity.				
700-343 0123		Ī		!	\$ 250.00			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks			
01	check	0	10/15/2013	\$250.00	Contribution			
				\$				
4. Payee Inform			Add	Remove				
	ing Address & Phone	물 종류 돌표학	b. Coordinated Committee Na	ıme	d. Comments			
(include city, state,		<u></u>			,			
Dilworth Elemen	intary PTA				1			
Ms. Terry Hall		J	c. Level Registered (Specify)	<u> </u>	1			
405 East Park A	venue	!	Federal 🖂	County:	•			
Charlotte, NC 28	.8203	-	State	Municipality:	e. Election Sum to Date			
980-343-2240		ı			-			
					\$ 250.00			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks			
01	check	О	10/15/2013	\$250.00	Contribution			
				\$				
4. Payee Inform	ation		Add	Remove	<u> </u>			
	ing Address & Phone	L	b. Coordinated Committee Na	The second secon	d. Comments			
		The state of the s	b. Coordinated Committee 15th	me	d. Comments			
(include city, state, &			-	1	1			
Eastover Elemen	•	}	140 160		í l			
Ms. Vanessa Asl		ļ	c. Level Registered (Specify)		<i>i</i>			
500 Cherokee Ro		J	Federal 🛇	County:	<u> </u>			
Charlotte, NC 28	8207	1	State	Municipality:	e. Election Sum to Date			
980-343-5505			1		\$ 250.00			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks			
01	check	0	10/15/2013	\$250.00	Contribution			
	1		10,10,2013					
and the state of t				\$				
5. Total only this				Committee of the commit	\$ 750.00			
	CRO-1310 Pages	TALL SINGLE CONTROL OF THE STATE OF T						
	line 13a of Detailed Sum			All Marketing Control	\$ 8,505.00			
			) if Contrib to Candidates/Politica		\$ 8,505.00			
			) if Coordinated Party Expenditur	res)				
	es (List detailed exp							
A* - Media	B* - Printing	C* - Fundi	lraising .	D - To Another				
E - Salaries	F* - Equipment	G - Politica	al Party	H* - Holding 1	Public Office Expenses			
I - Postage	J - Penalties	K* - Office	e Expenses		ı to Legal Expense Fund			
O* - Other				introperible (Sample DOLVECOVER)				
^ Codes reality	e detailed explanation	on ui reguired re	.marks field (k)	A 20 14 12 14 15 15 15 15 15 15 15 15 15 15 15 15 15				

						Amer	idment		
Disbursements	Pg	<u>3</u>	of	9			Yes	$\boxtimes$	No
Use this form to report expenditures from the committee for; operating	expenses,	contr	ibutions to	car	ıdida	te/polit	ical		
committees and coordinated party expenditures									

committees and coordinated party expenditures.										
	1. Committee Full Name (and Fund if applicable)  Eric Davis for School Board  7GXX08									
	and the second s		·			2511	7GXX08			
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)  ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures										
	<del></del>				es F	<del></del>	ordinated Party Expenditures			
4. Payee Inform			I .	dd		Remove				
	ng Address & Phone		D.	Coordinated Commit	itee iNa	me	d. Comments			
(include city, state,			1				•			
- '	Elementary PTA	1	$\vdash$							
Ms. Paula Rao		ļ	c.	Level Registered (Spe						
8301 Monroe Re	· ·	Í	<u> </u>	Ξ	$\boxtimes$	County:				
Charlotte, NC 2		)		State		Municipality:	e. Election Sum to Date			
980-343-5060	•						\$ 500.00			
	r		L,							
f. Account Code	g. Form of Payment	h. Purpose Code	_	i. Date (mm/dd/yyyy	)	j. Amount	k. Required Remarks			
Ó1	check	О .		10/15/2013		\$500.00	Contribution			
				10/10/2010		Ψ.Σ.Ο.Ι.Ο.Σ				
	!					\$				
	<u> </u>									
4. Payce Inform		lacksquare	The state of the s	dd	TOTAL COLUMN	Remove				
· · · · · · · · · · · · · · · · · · ·	ng Address & Phone		b.	Coordinated Commit	tee Na	me	d. Comments			
(include city, state, a										
	Farms Elementary		L							
PTA			c.	Level Registered (Spe	cify)					
Ms. Carolyn Ro	dd	1		Federal	$\boxtimes$	County:				
2520 Huntingtov	wne Farms Lane			State		Municipality:	e. Election Sum to Date			
Charlotte, NC 28	8210						6 500.00			
980-343-3625	•						\$ 500.00			
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	)	j. Amount	k. Required Remarks			
01	check			10/15/2012		Ø500.00	Contribution			
01	спеск	0	-	10/15/2013		\$500.00				
						۵	·			
		1	ĺ		]	\$				
4. Payee Inform	ation		A	dd		Remove				
	ng Address & Phone		b.	Coordinated Commit	tee Na	me	d. Comments			
(include city, state, &	•	Ī			-					
Lansdowne Elen										
Mr. Brian Bamb	•	Ì	c.	Level Registered (Spe	cify)					
6400 Prett Court	A CONTRACTOR OF THE CONTRACTOR	ţ	十		$\boxtimes$	County:	i			
Charlotte, NC 28			╽┝	State	Ä	Municipality:	c. Election Sum to Date			
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Disbursements	Pg	4	of <u>9</u>		Yes	$\boxtimes$	N

committees and coordinated party expenditures. 1. Committee Full Name (and Fund if applicable) 2. ID Number Eric Davis for School Board 7GXX08 3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.) Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures Add 4. Payee Information 冈 Remove b. Coordinated Committee Name d. Comments a. Full Name, Mailing Address & Phone (include city, state, & zip) Montclaire Elementary PTA Ms. Emily Miles c. Level Registered (Specify) 5801 Farmbrook Drive Federal  $\boxtimes$ County: Charlotte, NC 28210 State Municipality: e. Election Sum to Date 980-343-3635 500.00 f. Account Code g. Form of Payment h. Purpose Code k. Required Remarks i. Date (mm/dd/yyyy) j. Amount Contribution 01 check O 10/15/2013 \$500.00 \$ 4. Payee Information Add Remove b. Coordinated Committee Name d. Comments a. Full Name, Mailing Address & Phone (include city, state, & zip) Myers Park Traditional **Elementary PTA** c. Level Registered (Specify) Mr. Lane Price Federal County: M 2132 Radcliffe Avenue State Municipality: e. Election Sum to Date Charlotte, NC 28207 250.00 980-343-5522 h. Purpose Code f. Account Code g. Form of Payment i. Date (mm/dd/yyyy) j. Amount k. Required Remarks Contribution 01 check O 10/15/2013 \$250.00 \$ 4. Payee Information Remove Add b. Coordinated Committee Name d. Comments a. Full Name, Mailing Address & Phone (include city, state, & zip) Olde Providence Elementary PTA Ms. Rachael McKenzie c. Level Registered (Specify) 3800 Rea Road Federal  $\boxtimes$ County: Charlotte, NC 28226 State Municipality: e. Election Sum to Date 980-343-3755 250.00 h. Purpose Code f. Account Code g. Form of Payment k. Required Remarks i. Date (mm/dd/yyyy) j. Amount Contribution 01 check 0 \$250.00 10/15/2013 \$ 5. Total only this Page \$ 1.000.00 6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) 8,505.00 (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 E - Salaries F\* - Equipment G - Political Party H\* - Holding Public Office Expenses I - Postage J - Penalties K\* - Office Expenses Q\* - Donation to Legal Expense Fund O\* - Other

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

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Amendment Yes

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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.

1. Committee F	ull Name (and Fund	l if applicable)			2. ID Number
Eric Davis for S	chool Board				7GXX08
3. Type of Disbi	ursement <i>(Plea</i>	se use separate C	RO-1310 forms for each ty	pe of Disburseme	ent.)
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Park Road Mon					
Ms. Anna Mora	gilla	ř	c. Level Registered (Specify)		
3701 Haven Dri	<del></del>		Federal 🖂	County:	·
Charlotte, NC 2	8209		State	Municipality:	e. Election Sum to Date
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Pinewood Eleme	entary				
Ms. Trish Sexto	n		c. Level Registered (Specify)		
805 Seneca Plac	e		Federal 🖂	County:	
Charlotte, NC 2	8209		State	Municipality:	e. Election Sum to Date
980-343-5825					\$ 500.00
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Ms. Patricia Der	•		c. Level Registered (Specify)		
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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.

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Ms. Ivy Gill	•		c. Level Registered (Specify)		
715 Hartford Av	venue		Federal 🖂	County:	
Charlotte, NC 2			State	•	e. Election Sum to Date
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980-343-5826					\$ 500.00
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Mr. Shane Lis			c. Level Registered (Specify)		
2840 Colony Ro	oad		Federal 🔀	County:	
Charlotte, NC 2	8209		State	Municipality:	e. Election Sum to Date
980-343-5835					\$ 250.00
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4330 Foxcroft R			Federal 🖂	County:	
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E - Salaries	F* - Equipment	G - Politica			Public Office Expenses
I - Postage	J - Penalties	K* - Office	e Expenses		to Legal Expense Fund
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## Amendment **Disbursements** Yes $\boxtimes$

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committees and coordinated party expenditures.	

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. Ms. Allison Har	rris	Author	c. Level Registered (Specify)		1
3200 Smithfield	d Church Road		Federal 🖂	County:	r <sub>i</sub>
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Mr. Bob Folk		ł	Federal Federal	County:	
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Carmel Middle S					
Mr. Marc Anger	rer		c. Level Registered (Specify)		
5001 Camilla Di	rive		Federal 🖂	County:	
Charlotte, NC 2	8226		State	Municipality:	e. Election Sum to Date
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Mr. Robert Ellys		1	c. Level Registered (Specify)		Í
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Charlotte, NC 28	8209	1	State	Municipality:	e. Election Sum to Date
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A* - Media	B* - Printing	D - To Another						
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committees and coordinated party expenditures.								

1. Committee F	ull Name (and Fun	d if applicable)						2, ID Number	
Eric Davis for S			1574114		##	The second secon		7GXX08	
3. Type of Disb	ursement <u>(Plea</u>	ase use separate C	RO-1	310 forms for	each t	vpe of <u>Disbursem</u>	<u>ent.)</u>		
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Huntersville, NC 28078				State		Municipality:	e, Eie	ection Sum to Date	
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