Disclosure Report Cover							No	
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	nation					c. ID Number		
Lloyd Austin Comm	9GX-349							
b. Mailing Address (include City, State and Zip Code)					d. Date Filed			
10306 Edwards Place						10-22-2013		
Mint Hill NC 28227				e. Phone Number				
						704-545-0184		
2. Report Year	3. Period Start Date (mm/c	ld/yy)	4. Period En (mm/dd/yy)	nd Date	5. Treasurer F			
2013	9-24-2013		10-21-	-2013	Stephen Joseph	h Smith		
6. Type of Committe	ee (Check One)		e of Report			port from one category)		
Candidate Campa		Munici		State	County	Referendum		
PAC Independent	Referendum	ᆜ	Organizational		Organizational	Organizational		
Expenditure Legal Expense Fu	Joint Fundraiser		Thirty-five day		Quarterly	Pre-referendum		
7. Type of Fund	(if applicable, check one)		Pre-primary		First	Final		
"Booster Fund"		\boxtimes	Pre-election		Second	Supplemental Final		
Building Fund			Pre-runoff		Third	Annual		
		l —	Semi-annual		Fourth	Special Special		
Other:		lH .	Mid Year Year End		Semi-annual Mid Year	10. Special Report Name		
Omer.			Final	lH	Year End	<u> </u>		
8. Number of Fundr	aisers this Report		Special		Final			
	0				Special			
11. Account Informa			1	1. Account	Information			
a. Financial Institution F	ull Name		я	. Financial In	stitution Full Name			
Yadkin Valley Bank					 .			
b. Purpose	c. Account Code			o. Purpose		c, Account Code		
General	A							
Campaign Fund d. Period Begin Balance						d. Period Begin Balance		
						S		
	\$ 662.72				··· · · · · · · · · · · · · · · ·	3		
CERTIFICATION								
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited of other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.								
Stephen Smith								
	Printed Name of Signer	, ,,,	Sign	nature of Appo	inted Treasurer	Date	_	
FOR OFFICE USE O				Δ) A	41			
Date Received:	MECKLENBURG COUNTY		Employee:			Delivery Method Normal Mail		
Date Postmarked	: OCF 242013		Employee:			Registered Mail Hand Delivered		
Date Scanned:	BOARD OF ELECTIONS		Employee:	<u>C(</u>	M.	Electronically FiledSigner has not receive	:d	
Date Data Entere	d;		Employee:	Personalisative		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.								
	You must amend the State					mittee changes.		

Amendment

Amendment Yes No

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

1. Committee Full Name (and Fund if applicable) Lloyd Austin Commissioner Mint Hill	2. Type of Report Pre Election Report	rt	3. ID Number 9GX-349		
Start of Election Cycle: January 1,	2013	Total this Reporting Period	Total this Election Cycle		
4) Cash on Hand at Start		\$ 662.72	\$ 936.98		
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$		
6) Contributions from Individuals	(CRO-1210)	\$	\$ 25		
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					
11a) Interest on Bank Accounts	(CRO-1250)	\$.06	\$38		
11b) Contributions from Not-for-Profit Organizati	ions <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, 1.	lc, 11d and 11e)	\$.06	\$ 25.38		
<u>EXPENDITURES</u>					
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$ 343.74	\$ 643.32		
13b) Contributions to Candidates/Political Commi	ttees (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	5, 16 and 17)	\$ 343.74	\$ 643.32		
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	otract line 18)	\$ 319.04	\$ 319.04		
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$			
21) Outstanding Loans (incl. ones from other campaig	ns) <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)	\$	\$		

Other Reco	eipt Sources		Pg	of	_	Yes		No
Use this form to	report income not repo	orted on another form. i.e. inte	rest income,	not for profit cont	tributio	ons etc.		
1. Committee F	full Name (and Fund i	f applicable)			2. ID I	Number		
Lloyd Austin Commissioner Mint Hill				9GX-34				
3. Type of Rece	eipt Source	(Please use separate CRC)-1250 forms	s for each type of .	Receip	of Source.)		
Interest		Contributions from Not-				de Sources of	ncome	
4. Contributor	Information	☐ Add		Remov	re .			
a. Full Name, Mail	ing Address & Phone		b. Not-fo	or-Profit Federal ID #		d. Comments		
(include city, sta								
Yadkin Valley								
4300 Lebanon R Mint Hill NC	ca.		a Outside Saures Evalenation					
28227			c. Outside Source Explanation					
20227					⊢	e. Election Sum to Date		
								-
						\$.38		
f. Account Code	g. Form of Payment	h. In-Kind Description		i. Date (mm/dd/yyy	y)	j. Amount		
Α	Electronic			9-10-13		\$.03	
	Funds							
	Transfer			10-08-13	1	\$.03	
4 Contributor	 Information	Add		 	ie l			
4. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Not-for-Profit Federal ID #						d, Comments		
(include city, sta	=					<u></u>		
			c. Outside Source Explanation					
						e. Election Su	m to Dat	e
						\$		
f. Account Code	g, Form of Payment	h, In-Kind Description	<u> </u>	i. Date (mm/dd/yyy	y) .	j. Amount		
						\$		
						\$		
4. Contributor	Information	☐ Add		Remov	re			
				r-Profit Federal ID #		d. Comments		etelik a telepak eti, utela ya emaku akat
(include city, state, & zip)								
		•						
				c. Outside Source Explanation				
					-	e. Election Su	m to Date	2
					l	\$		
f. Account Code	g. Form of Payment	h. In-Kind Description	L	i, Date (mm/dd/yyy	v)	j. Amount	****	
	B				<u>'</u>	-		
						\$		
						\$		
5. Total only	this Page				\$.06		
(This line goes in		es ry Page CRO-1100 if Interest)	o all its		\$.06		

(This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)

Amendment

	report expenditures coordinated party ex		ee for; operating expenses,	contributions to c	andidate/political	
	full Name (and Fun	 			2. ID Number	
	ommissioner Mint H				9GX-34	
3. Type of Disb	ursement <u>(Plea</u>	ise use separate C	RO-1310 forms for each t	ype of Disbursem	<u>ent.)</u>	
Operating E	xpenses	Contributions to Can	ndidates/Political Committees	Сом	ordinated Party Expenditures	
4. Payee Inform	iation		Add 🗍	Remove		
	ing Address & Phone	:	b. Coordinated Committee Na	ame	d. Comments	
(include city, state,						
Austin Print So	lutions		T 10 14 140 10			
P.O. Box 1905 Matthews NC 2	10106		c. Level Registered (Specify)	On the second se		
Maunews NC 2	8100		Federal State	County: Municipality:	e, Election Sum to Date	
			1 State	Municipanty.	,	
		:			\$ 343.74	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
·	Check		10-8-2013	\$343.74	Fliers/Mail Out	
	CHOOK		10-0-2013	9343.74		
				\$		
4. Payee Inform			Add 🗍	Pomovo		
			b. Coordinated Committee Na	Remove	d, Comments	
(include city, state,	ing Address & Phone		b. Coordinated Committee Na		u. Comments	
(include city, state,	с гіру					
			c. Level Registered (Specify)			
			Federal	County:		
			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	
	ļ			\$		
				\$		
4. Payee Inform	ation	П	Add 🗍	Remove		
	ng Address & Phone	- Annual Control of the Control of t	b. Coordinated Committee Na	d. Comments		
(include city, state,	& zip)					
			c. Level Registered (Specify)			
			Federal	County:		
			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	
	8			*	A A A COLOR	
				\$		
		***		\$		
5. Total only thi					\$ 343.74	
	CRO-1310 Pages)/CO // F			
	line 13a of Detailed Sum	\$ 343.74				
(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)						
	es (List detailed exp			2.59		
A* - Media	B* - Printing	C* - Fund	raising	D - To Anothe	r Candidate	
E - Salaries	F* - Equipment	G - Politica	al Party	Public Office Expenses		
I - Postage O* - Other	J - Penalties	K* - Office	e Expenses	Q* - Donation	to Legal Expense Fund	
	e detailed explanati	on in required re	marks field (k)			

Disbursements

Amendment Yes

of _

No