								Amendment
Disbursements					Pg	1_ of	<u>· 1</u>	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 Full Name (and Fund if applicable)								2. ID Number
JOHN AUTRY FOR DISTRICT 5								-OGXPZ8
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)								
Operating Expenses X Contributions to Candidates/Political Committees Coordinates							ordinat	ed Party Expenditures
4. Payee Information								
a. Full Name, Mailing Address & Phone				b. Coordinated Committee Name d. Commen				d. Comments
include city, state, & zip)								
JOHN AUTRY			_:					
PO BOX 189113				c. Level Registered (Specify)				
CHARLOTTE, NC 28218				☐ Federal	ļ	☐ County:		
				X State		☐ Municip	ality:	e. Dection Sum to Date
·								\$ 2000.00
Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Ar	nount	k. Re	quired Remarks
A	Check	D	01	1/15/2016	\$	1,000.00		•

(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)

6. Total of ALL CRO-1310 Pages

Check

(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)

2,000.00

2,000.00

7. Purpose Codes (List detailed expenditure code in (h.) above)

A\* - Media

`A

5. Total only this Page

B\* - Printing

C\* - Fundraising

D - To Another Candidate

\$

1,000.00

E - Salaries I - Postage F\* - Equipment J - Penalties

G - Political Party K\* - Office Expenses

02/26/2016

H\* - Holding Public Office Expenses

O\* Other

D

Q\* - Donation to Legal Expense Fund

\* Codes require detailed explanation in required remarks field (k) CRO-1310

NC State Board of Elections

December 2009