				ľ	Amendment
Disclosure Rep	•				Yes 🔲 No
	eral report and committee in	nformation, must be	signed and sub	mitted along with of	her detailed forms.
	to update information				
1. Committee Information 1. Full Name	nation				c, ID Number
Committee to Elect S	Scott Stone				C. ID Number
b. Mailing Address (inclu	ide City, State and Zip Code)				d. Date Filed
PO Box 33185					05/06/2015
Charlotte, NC 28233					e, Phone Number
					704-619-5688
2. Report Year	3. Period Start Date (mm/d	d/yy) 4. Period (mm/dd/yy)	End Date	5. Treasurer Full	Name
2012	07/01/2012		31/2012	Jinger LuAnn Kel	ley
6. Type of Committe	ee (Check One)	9. Type of Report	(check onl	y one type of report	from one category)
Candidate Campa	ign Party	Municipal	State/Co		Referendum
PAC Independent	Referendum	Organizational		Organizational	Organizational
Expenditure Legal Expense Fu	Joint Fundraiser	Thirty-five day	y   C	Quarterly	Pre-referendum
7. Type of Fund	(if applicable, check one)	Pre-primary		First	Final
"Booster Fund"		Pre-election		Second	Supplemental Final
Building Fund		Pre-runoff Semi-annual	1	Third Fourth	Annual Special
		Mid Year	, LJ s	rounn Iemi-annual	Special
Other:		Year End	1 —	Mid Year	10. Special Report Name
		Final		Year End	
8. Number of Fundr	aisers this Report	Special Special		inal	
	0			pecial	
11. Account Informa	A SECURITY OF THE PROPERTY OF		11. Account I	100-500-10-400-00-00-00-00-00-00-00-00-00-00-00-0	
a. Financial Institution F Bank of America	ull Name		a. Financial Insti	tution Full Name	
b. Purpose	c. Account Code		b. Purpose	· · · · · · · · · · · · · · · · · · ·	c. Account Code
General			b. i ui post		C. Account Cour
Receipts and	001				
Dispursement	d. Period Begin Balance				d. Period Begin Balance
	\$ 12,095.48				\$
CERTIFICATION					
the NC General Statu	mittee or Fund is in complicates and that no funds are co correct and that I have been	mmingled with proh	iibited or other n	on-disclosed funds.	& 22D-22M of Chapter 163 of I further certify that this report
Jinger L Kel			ivi L Kolli		05/06/2015
	Printed Name of Signer	Si	ignature of Appointe		Date
FOR OFFICE USE OF	NLY		0.		
Date Received:	MECKLENBURG COUNTY	Employee:	CCM		Delivery Method Normal Mail
Date Postmarked	MAY 0 8 2015	Employee:			Registered Mail Hand Delivered
Date Scanned:		Employee:	Af	9	Electronically Filed Signer has not received
Date Data Entere	BOARD OF ELECTIONS	Employee:	· · · · · · · · · · · · · · · · · · ·	MARKATRIANI (MARKATRIANI MARKATRIANI	mandatory training
Please Note: This		end committee infor n of books informat			ess, treasurer, assistant treasurer,
	You must amend the Staten				ee changes.

## Detailed Summary Use this form to summarize a

т.	 •	r	•	1	1 1		 •	c	 1	monetary	 	

	2. Type of Report		3, ID Number
Committee to Elect Scott Stone	Year End Report		
Start of Election Cycle: January 1,	2012	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	<del> </del>	\$ 12,095.48	\$ 15,403.43
RECEIPTS		1	
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$	\$ 100.00
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		\$	\$
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$
11b) Contributions from Not-for-Profit Organization	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, 11c	; 11d and 11e)	\$ 0.00	\$ 100.00
<u>EXPENDITURES</u>			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 3,615.11	\$ 5,163.06
13b) Contributions to Candidates/Political Commit	tees (CRO-1310)	\$ 400.00	\$ 2,260.00
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)	\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 13	i, 16 and 17)	\$ 4,015.11	\$ 7,423.06
19) Cash on Hand at End (Add lines 4 and 12 together, then subt	ract line 18)	\$ 8,080.37	\$ 8,080.37
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaign	s) (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-2200)	\$	\$
28) Contributions to be Refunded	(CRO-1215)	\$	\$
CDO 1100 NC State Deard of Flor	· · · · · · · · · · · · · · · · · · ·	l .	Angust 2008

Contr	ibutions from	m Individuals					Amendment
		in individuals ividual contributions o	over \$50		Pg <u>1</u> of nder \$50 if form CR	.O 1205 is no	Yes No
	<u>-</u>	(and Fund if applica				2. ID Nun	
Committ	ee to Elect Scott S	tone					
3. Contr	ibutor Informatio	on		Add R	(emove		
The first terms of the first ter	me, Mailing Address &	& Phone		b. Job Title/Profession	on	d. Commen	ts
(include	city, state, & zip)						
				c. Employer's Name	Specific Field	1	
						e. Election S	Sum to Date
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-k	I Kind Description	j. Date (mm/dd/y	<u> </u>	k. Amount
				• • • • • • • • • • • • • • • • • • • •			\$
$\overline{\Box}$							\$
							\$
3. Contr	     ibutor Information			Add [] R	Lemove		
Deliging the general and second presching	ne, Mailing Address &	s francis to the common common the control of the control of the section of the first	<u> </u>	b. Job Title/Profession		d. Comment	ts
(include	city, state, & zip)						
				c. Employer's Name/	Specific Field		
				<b>1</b>		e. Election S	Vivi to Dota
							oun to Date
			1		I many true	\$	
f. Prior	g. Account Code	h. Form of Payment	1. In-R	Kind Description	j. Date (mm/dd/y	yyy)	k. Amount
			<u> </u>				
<u> </u>			-				\$
							\$
	ibutor Informatic ne, Mailing Address é	terminal and an experience of the control of the co		Add R	Lemove	d. Comment	
	city, state, & zip)			D. GOD THEAT FORESA	<u> </u>	u. commen	
				c. Employer's Name/	Specific Field	-	
				C. Employer s tvante	Specific Pieru		
						e. Election S	Sum to Date
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount
							\$
							\$
							\$
4. Tota	l only this Pag	e				\$	0.00
1455-1416-1455-1455-1	l of ALL CRO					\$	0.00
(This lin	e must be on line 6 of	Detailed Summary Page C	RO-1100	)		_	2.00

Disbursem	ents		Pg	<u>1</u> of 9	Amendment  No
			ee for; operating expenses,	contributions to c	andidate/political
	coordinated party ex				
	ull Name (and Fun	d if applicable)			2. ID Number
Committee to E					
3. Type of Disb			RO-1310 forms for each ty		
Operating E		Contributions to Can	didates/Political Committees		ordinated Party Expenditures
4. Payee Inform			Add  b. Coordinated Committee Na	Remove	d. Comments
	ng Address & Phone		b. Coordinated Committee 148	init	G. Comments
(include city, state, UPS	& zip)				
7920 Arrowridg	re Rlvd		c. Level Registered (Specify)		
Charlotte, NC 2			Federal T	County:	
			State	Municipality:	e. Election Sum to Date
					0.00
					\$ 86.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Debit	K	08/20/2012	\$86.00	PO Box
001	Deoit	K	00/20/2012	\$60.00	Rental
				\$	
4. Payee Inform	l nation		Add	Remove	
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee Na	ıme	d. Comments
(include city, state,	& zip)				
Dropbox					
760 Market St,			c. Level Registered (Specify)		
San Francisco, (	CA 94102		Federal [	County:	
			State	Municipality:	e, Election Sum to Date
					\$ 69.99
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Debit	K	07/30/2012	\$9.99	Online
	Door		0,,,00,,2012		storage
				\$	
4. Payee Inform	ation		Ádd 🗀	Remove	
	ng Address & Phone		b. Coordinated Committee Na		d. Comments
(include city, state,			***************************************		
NC Heros Fund	·-··-				
Post office box	652		c. Level Registered (Specify)		
Pineville, Nc 28	3134		Federal	County:	
			State	Municipality:	e. Election Sum to Date
					\$ 500.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	0	10/19/2012	\$500.00	501©3 Donation
				6	
5. Total only thi					\$ 595.99
	CRO-1310 Pages				
-	line 13a of Detailed Sun	· ·		10	\$ 4,015.11
	•		) if Contrib to Candidates/Politic		-
			) if Coordinated Party Expenditu (b.) abovo)	resj	<u> </u>
/. Purpose Cod A* - Media	es (List detailed ex B* - Printing	penaiture code in ( C* - Fund		D - To Anothe	er Candidate
A* - Media E - Salaries	F* - Equipment				Public Office Expenses
I - Postage	J - Penalties		e Expenses		n to Legal Expense Fund
O* - Other					

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

Die	ha	MCD	ma	ents
1718	E)   1	rse	Æ	HILS

				Amendment	
Pg	<u>2</u>	of	2	⊠ 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 Fun	d if applicable)			2. ID Number			
Committee to El								
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)								
Operating Ex		Contributions to Can	didates/Political Committees		rdinated Party Expenditures			
4. Payee Inform		Ш	Add L	Remove				
	ng Address & Phone		b. Coordinated Committee Na	ime	d. Comments			
(include city, state,					1			
Bank of Americ	a							
9923 Rae Road			c. Level Registered (Specify)					
Charlotte, NC 2	8277		Federal	County:				
			State	Municipality:	e. Election Sum to Date			
		:			\$ 740.15			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks			
001	B 11		07/00/0010	056.05	Bank & credit			
001	Debit	О	07/28/2012	\$56.85	card fees			
		^	00/00/00/0	056.05	Bank & Credit			
001	Debit	О	08/28/2012	\$56.85	card fees			
4. Payce Inform	ation		Add 🔲	Remove				
	ng Address & Phone		b. Coordinated Committee Na	inie	d, Comments			
(include city, state,	•							
Bank of Americ								
9923 Rae Road			c. Level Registered (Specify)					
Charlotte, NC 2	8277		Federal	County:				
Ontariotte, 110 2	0277		State	Municipality:	e. Election Sum to Date			
				mano-party.				
					\$ 740.15			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks			
001	Debit	О	09/28/2012	\$56.85	Bank & Credit			
001	DCOR		05/20/2012	Ψ50.05	card fees			
001	Debit	0	10/28/2012	\$56.85	Bank & Credit			
					card fees			
4. Payee Inform	ation		Add L	Remove				
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee Na	ıme	d. Comments			
(include city, state,								
Bank of Americ	a							
9923 Rae Road		ļ	c. Level Registered (Specify)					
Charlotte, NC 2	8277		Federal	County:				
			State	Municipality:	e. Election Sum to Date			
					\$ 740.15			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks			
001	Dalait		11/28/2012	\$161.70	Bank & Credit			
001	Debit	0	11/28/2012	\$101.70	card fees			
^^+	2.11	_	10/00/0010	60.05	Bank & Credit			
001	Debit	О	12/28/2012	\$9.95	card fees			
5. Total only thi	is Page				\$ 399.05			
	CRO-1310 Pages							
<ul> <li>Service and the property of the p</li></ul>	The field free in the section of the	unary Page CRO-1100	) if Operating Expenses)	emining departure of the state	6 401611			
	· · · · · · · · · · · · · · · · · · ·	· ·	) if Contrib to Candidates/Politic	al Comm)	\$ 4,015.11			
, .	•		) if Coordinated Party Expenditu					
	es (List detailed ex							
A* - Media	B* - Printing	C* - Fund		D - To Anothe	er Candidate			
E - Salaries	F* - Equipment				Public Office Expenses			
I - Postage	J - Penalties		ce Expenses		n to Legal Expense Fund			
O* - Other	ya, hanna anyaga, qangay mgayara nasam a na manara							
* Codes requir	e detailed explanat	ion in required re	emarks field (k)					

					Amendment	
Disbursements	Pg	<u>3</u>	of	2	Yes Yes	N
Use this form to report expenditures from the committee for operating ex	xnenses	contribution	ns fo	can	didate/nolitical	

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

1. Committee Full Name (and Fund if applicable)

2. ID Nu

	Committee to Elect Scott Stone									
and the second of the second o	3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)									
Operating E			ndidates/Political Committees		ordinated Party Expenditures					
4. Payee Inform			Add	Remove						
	ing Address & Phone		b. Coordinated Committee Na	the second second	d. Comments					
(include city, state,										
Authorize.Net										
PO Box 947		ŀ	c. Level Registered (Specify)	**	Vermenter					
American Fork,	, UT 84003-0947	***	Federal	County:						
		ļ	State	Municipality:	e. Election Sum to Date					
					\$ 233.60					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks					
001	011-		07/02/2012	end us	Credit Card					
001	Check	0	07/03/2012	\$27.95	Fees					
001	Charle		00/02/2012	627.05	Credit Card					
001	Check	0	08/03/2012	\$27.95	Fees					
4. Payee Inform	iation		Add	Remove						
	ing Address & Phone		b. Coordinated Committee Na	ame	d. Comments					
(include city, state,		.								
Authorize.Net				!						
PO Box 947		į	c. Level Registered (Specify)							
	UT 84003-0947	Ì	Federal	County:	1					
,			State	Municipality:	e. Election Sum to Date					
					\$ 233.60					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks					
001	Check	0	09/03/2012	\$10.00	Credit Card					
001	Check		03/03/2012	\$10.00	Fees					
				\$						
4. Payee Inform	iation		Add	Remove						
a. Fuli Name, Maili	ing Address & Phone		b. Coordinated Committee Na	ame	d. Comments					
(include city, state,										
Junior League of	f Raleigh									
711 Hillsboroug	gh St	1	c. Level Registered (Specify)							
Raleigh, NC 276	603	1	Federal	County:						
			State	Municipality:	e. Election Sum to Date					
		**************************************			\$ 200.00					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks					
001	Charle				501©3 Govenor					
001	Check	0	12/31/2012	\$200.00	Innaugural					
				\$						
5. Total only thi	is Page			1	\$ 265.90					
	CRO-1310 Pages									
	line 13a of Detailed Sun	nmary Page CRO-1100	) if Operating Expenses)	Administration of the method of the residence of the second of the secon	401511					
			the Contrib to Candidates/Politic	ral Comm)	\$ 4,015.11					
_	_	• -	) if Coordinated Party Expenditu							
The Paris of the Control of the Cont	es (List detailed ex									
A* - Media	B* - Printing	C* - Fund		D - To Anothe	er Candidate					
E - Salaries	F* - Equipment	G - Politica	al Party		Public Office Expenses					
I - Postage	J - Penalties	K* - Offic	ce Expenses	Q* - Donation	n to Legal Expense Fund					
O* - Other	eroen naarta menanda filoloogia									
* Codes reavir	e detailed explanat'	ion in required re	marks field (k)	\$5 600 000 FS 950 05 FS FS	e de la comprese de la capación de la comprese de la capación de l					

Diahaana	ta						Amendment
Disburseme		from the committee	aa 1	Pg for; operating expenses,	4 of 9	~	Yes No
	coordinated party ex		5C I	or, operating expenses,	contributions to c	anuiua	ic/pointcai
والمراور والمراجع المراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والم	ull Name (and Fun	<del></del>					2. ID Number
Committee to E							
3. Type of Disbu	ursement <i>(Plea</i>	ise use separate C	RO	)-1310 forms for each t			
Operating E		Contributions to Can		ates/Political Committees	attention management and a state of the contract of the contra	rdinated	Party Expenditures
4. Payee Inform				dd L	Remove		
	ng Address & Phone		b.	Coordinated Committee N	ame	d. Cor	nments
(include city, state, or Foundation for I			ł				
PO Box 98027	Worth Caronna		-	Level Registered (Specify)			
Raleigh, NC 276	624		T	Federal	County:		
g,			ΙĒ	State	Municipality:	e. Elec	tion Sum to Date
						\$ 7	5.00
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Req	uired Remarks
001	Debit	0		12/31/2012	\$75.00	f	3 Inagural
	Door	0		12/3//2012	\$75.00	Celet	pration
					\$		
4. Payee Inform	ation		Α	dd 🔲	Remove		
a. Full Name, Maili	ng Address & Phone		b.	Coordinated Committee N	япіе	d. Cor	nments
(include city, state,	& zip)						
Hilton Hotel	ъ		-	Y 15 12 16 16 16 1			
950 Lake Carille			C.	Level Registered (Specify) Federal	County:		
St Petersburg, F	1,03 33/10		F	State	Municipality:	e. Elec	tion Sum to Date
			<u> </u>		manopung.		
						\$ 1	,473.68
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Req	uired Remarks
001	Debit	0		08/20/2012	\$200.00	RNC	
001	D.L.4			00/04/2012	¢1 272 60	Politi	cal
001	Debit	0		09/04/2012	\$1,273.68	Conv	rention
4. Payee Inform			1	dd 🔲	Remove	200	
	ng Address & Phone		b.	Coordinated Committee N	ame	d. Cor	nments
(include city, state, c Super Shuttle Ta							
11901 30th Ct N			_	Level Registered (Specify)			
St Petersburg, F			T	Federal	County:		
B, 1		,	Ī	State	Municipality:	e. Elec	tion Sum to Date
						\$ 1	90.00
f. Account Code	g. Form of Payment	h. Purpose Code	1	i. Date (mm/dd/yyyy)	j. Amount		uired Remarks
001	Debit	О		08/29/2012	\$70.00	taxi f	
				••		deleg	
001	Debit	0		08/31/2012	\$120.00	taxi f deleg	
5. Total only thi						\$	1,738.68
6. Total of ALL	CRO-1310 Pages	2010 50 50 80 31 80 60					<del></del>

(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) \$ 4,015.11 (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 E - Salaries

F\* - Equipment J - Penalties

C\* - Fundraising

D - To Another Candidate

G - Political Party K\* - Office Expenses H\* - Holding Public Office Expenses Q\* - Donation to Legal Expense Fund

I - Postage

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

Disbursem	onte				Amendment
		from the committe	Pg ee for; operating expenses		9 Yes No
committees and	coordinated party ex	penditures.	ce for, operating expenses	, continuations to t	andidate/pontical
The state of the s	ull Name (and Fun				2. ID Number
Committee to E	*******	and the second of the second o		n transport i est mente production per explored i en reconse per de come la se unique fait en come de come de Est en reconse i est mente production de la completa de reconse de completa de la completa de la completa de c	
3. Type of Disb	ursement <i>(Plea</i>	ise use separate C	RO-1310 forms for each	type of Disbursem	ent.)
Operating E	xpenses	Contributions to Car	ndidates/Political Committees	Co-	ordinated Party Expenditures
4. Payee Inform	nation	X	Add	Remove	
a. Full Name, Maiti	ng Address & Phone		b. Coordinated Committee !	iame .	d. Comments
(include city, state,	& zip)				
TPA Taxi				<del></del>	
5464 Lena Rd	1 57 0 1011		c. Level Registered (Specify)	·	-
Lakewood Ranc	ch, FL 34211		Federal	County:	
			State	Municipality:	e. Election Sum to Date
					\$ 81.60
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Debit	0	08/30/2012	\$81.60	Taxi for
001	Deore	0	00/30/2012	\$61.00	delegate
				\$	
4. Payee Inform	ation		Add 🗍	Remove	
	ng Address & Phone		b. Coordinated Committee N		d. Comments
(include city, state,					
United Cab					
4810 N Hale Av	re		c. Level Registered (Specify)		
Tampa, FL 3361	14		Federal	County:	
			State	Municipality:	e. Election Sum to Date
		; :			\$ 75.80
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	5.11	<u> </u>		ľ	Taxi for
001	Debit	О	09/04/2012	\$75.80	delegate
				T &	
				\$	
4. Payee Inform			Add 🗌	Remove	
the state of the s	ng Address & Phone		b. Coordinated Committee N	lame	d. Comments
(include city, state,					
Charlotte Dougl	-		. TID 14 1/0 .10\	*	
Charlotte, NC 2	Birmingham Parkw		c. Level Registered (Specify)  Federal	Country	
Charlotte, NC 20	0200		State	County: Municipality:	e. Election Sum to Date
				withticipanty.	
					\$ 42.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
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\* Codes require detailed explanation in required remarks field (k)

Dishuusom	a4-a				Amendment	
Disbursem		e	Pg		9 Yes No	
committees and	coordinated party ex	from the committee	ee for; operating expenses	s, contributions to	candidate/political	
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	lect Scott Stone	a it abbiteante)			2. ID Number	
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4. Payee Inform		$\square$	Add	Remove	ordinace Farty Expenditures	
	ing Address & Phone		b. Coordinated Committee	· · · · · · · · · · · · · · · · · · ·	d. Comments	
(include city, state,						
Tampa Bay Foo						
401 Channelsid	e Drive		c. Level Registered (Specify	)	1	
Tampa, FL 33602			Federal	County:		
			State	Municipality:	e. Election Sum to Date	
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Tampa, FL 3360			c. Level Registered (Specify)  Federal County:  State Municipality:		1	
1 mipu, 1 22 2500	32				e. Election Sum to Date	
				municipanty.	e. Election Sum to Date	
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	line 13a of Detailed Sum				\$ 4,015.11	
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			if Coordinated Party Expendit	ures)		
7. Purpose Code A* - Media	es (List detailed exp			Tr. 70		
A* - Media E - Salaries	B* - Printing F* - Equipment	C* - Fund G - Politica		•		
I - Postage	J - Penalties		a Faity e Expenses	H* - Holding Public Office Expenses Q* - Donation to Legal Expense Fund		
O* - Other			•	£ 201111101		
* Codes require	e detailed explanati	on in required re	marks field (k)			

To 4 4					Amendment
Disbursements	Pg	7	of	2	

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political

committees and coo	romateo	party	exi	penaitures.	

	full Name (and Fun	d if applicable)		6.60000000	2. ID Number	
The same of the sa	Elect Scott Stone					
3. Type of Disb			CRO-1310 forms for each t	Company		
Operating E		Contributions to Can	ndidates/Political Committees		ordinated Party Expenditures	
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(include city, state, Thai Thani	& zip)		-		İ	
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Tampa, FL 336			c. I.evel Registered (Specify) Federal	4		
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					\$ 54.00	
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(include city, state,			b. Coordinated Committee N	ame	d. Comments	
Premium Loung						
615 Channelside		;	c. Level Registered (Specify)	: .		
Tampa, FL 3366			Federal	County:		
• ,			State	Municipality:	e. Election Sum to Date	
					\$ 51.00	
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	es (List detailed exp					
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E - Salaries	F* - Equipment	G - Politica		H* - Holding Public Office Expenses		
I - Postage O* - Other	J - Penalties	K* - Office	e Expenses	Q* - Donation	n to Legal Expense Fund	
"Consider continues assessment the process to be continued	e detailed explanati	on in required re	marks field (k)			

No

Description for the committee for, operating expenses, contributions to candidate/political committees and coordinated party expenditures.	Disbursem	ents		D.	0	Amendment 9 Yes No	
Committees and coordinated party expenditures   Committees   Committ							
Committee to Elect Scott Stone	committees and	coordinated party ex	ependitures.				
A Payee Information			d if applicable)			2. ID Number	
Coordinated Purp Expenditures   Conditates Political Committees   Coordinated Purp Expenditures	5.00.00						
A. Payes Information							
B. Fall Name, Malling, Address & Phone (Include city, state, & drip)  Five Bucks 247 Central Avenue St. Petersburg, PL 33701  L. Account Code Debit O O 08/28/2012 S100.14  Federai S S O01 Debit O O 08/28/2012 S100.14  Read - travel RNC  Add Remove San Francisco, CA 94105 Sinte Sin	Production and Company of the Compan		Contributions to Ca			ordinated Party Expenditures	
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LACCOUNT Code   g. Form of Payment   h. Purpose Code   s. Date (mm/dd/yyyy)   j. Amount   k. Required Remarks						\$ 100.14	
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S 90.00  I. Account Code g. Form of Payment b. Purpose Code j. Date (mm/dd/yyyy) j. Amount k. Required Remarks  O01 Debit O 08/23/2012 \$15.00 Credit Card Fees  O01 Debit O 12/31/2012 \$75.00 Credit Card Fees  4. Payce Information Add Remove  a. Full Name, Mailing Address & Phone (include city, state, & zip)  C. Level Registered (Specify)  Federal County: State Municipality: e. Election Sum to Date  F. Account Code g. Form of Payment b. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks  O01 \$\$  S. Total only this Page \$\$ 190.14  G. Total of ALL CRO-1310 Pages  (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)  (This line goes in line 13a of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)  T. Purpose Codes (List detailed expenditure code in (h.) above)  A* Media B* Printing C* Fundralsing D-To Another Candidate  H* - Holding Public Office Expenses  O* - Donation to Legal Expenses Fund  O* - Otter	San Francisco, (	JA 94103			,	Flyds C. A.D.	
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(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					tical Commi	\$ 4,015.11	
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							
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	7. Purpose Code				,	1	
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	2000 Principality Assertation of the first contract for the contract of the co	detailed explanati	on in required re	marks field (k)			

Disbursem	ents		Pg	9 of	Amendment  9
		from the committe	e for; operating expenses,		
committees and	coordinated party ex	kpenditures.	, , ,		P
	ull Name (and Fun	d if applicable)			2, ID Number
	lect Scott Stone				
3. Type of Disb	And a second	ise use separate Cl	RO-1310 forms for each t	ype of Disbursen	<u>ient.)</u>
Operating E		Contributions to Can	didates/Political Committees		ordinated Party Expenditures
4. Payee Inform			Add 🔲	Remove	
The state of the s	ng Address & Phone		b. Coordinated Committee N	ame	d. Comments
(include city, state,					
Committee to E					_
PO Box 471845			c. Level Registered (Specify)		
Charlotte, NC 2	8247		Federal	County:	
			State	Municipality:	e. Election Sum to Date
	***************************************				\$ 250.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	D	11/15/2012	\$250.00	
				\$	
4. Payee Inform	ation		Add	Remove	
a. Fuli Name, Maili	ng Address & Phone		b. Coordinated Committee Na	ame	d. Comments
(include city, state,					
Pat McCrory Co	ommittee				
PO Box 98027		1	c. Level Registered (Specify)		
Raleigh, NC 270	624		Federal	County:	
		1	State	Municipality:	e. Election Sum to Date
					\$ 400.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	D	10/23/2012	\$150.00	
				\$	
4. Payce Inform	ation		Ádd	Remove	
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee Na	me	d. Comments

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PO Box 471845 Charlotte, NC 28247			c. Level Registered (Specify)		<del>-</del>
			Federal County:		1
			State	Municipality:	e. Election Sum to Date
					\$ 250.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	D	11/15/2012	\$250.00	
				\$	
4. Payee Information			Add	Remove	
a. Full Name, Mailing Address & Phone			b. Coordinated Committee N	ame	d. Comments
(include city, state,		V 19			
Pat McCrory C PO Box 98027					
Raleigh, NC 27			c. Level Registered (Specify) Federal	County:	<u>.</u>
Kaleigii, NC 21	024		State	Municipality:	c. Election Sum to Date
				minospanty.	
					\$ 400.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	D	10/23/2012	\$150.00	
				\$	
4. Payee Inform	nation		Add	Remove	
a. Full Name, Mail	ing Address & Phone		b. Coordinated Committee N	ame	d. Comments
(include city, state,	& zip)				
					-
			c. Level Registered (Specify) Federal	County:	-
			State Municipality:		e. Election Sum to Date
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6. Total of ALI	CRO-1310 Pages				700.00
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6. Total of ALI (This line goes in (This line goes in	cRO-1310 Pages line 13a of Detailed Sun line 13b of Detailed Sun	nmary Page CRO-110	0 if Contrib to Candidates/Politic		\$ 4,015.11
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