Disclosure Repo							1	Yes	\boxtimes	No
	al report and committee i	nformat	ion, must be	signed :	and subi	mitted along with o	other det	tailed forms.		
Do not use this form to 1. Committee Informa						og vinde karenda salahan da badan badan da salah				
a. Full Name	tion						c. ID	Number		
Committee to Elect Sco	ott Stone									
b. Mailing Address (include	City, State and Zip Code)						d, Da	ate Filed		
PO Box 33185								09/08/2	.015	
Charlotte, NC 28233							a Ph	ione Number		
							(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	one rumber		
			4. Period I	and Da						
2. Report Year 3.	Period Start Date (mm/d	d/yy) =	(mm/dd/yy)	mu Da	ie	5. Treasurer Fu	5154 S.K			
2015	08/05/2015		09/0	1/2015		Jinger LuAnn K	eiley			
6. Type of Committee	(Check One)	9. Typ	e of Report	(c	heck on	ly one type of repo				
Candidate Campaign	Party	Munici			State/Co	-	Refe	rendum		-
PAC Independent	Referendum	旦	Organizational		_	Organizational		Organizational		
Expenditure Legal Expense Fund	Joint Fundraiser		Thirty-five day	,	(Quarterly		Pre-referendur	a	
	f applicable, check one)	\boxtimes	Pre-primary		П	First		Final		
Booster Fund"			Pre-election			Second		Supplemental .	Final	
Building Fund			Pre-runoff			Third		Annual		
			Semi-annual Mid Year		LJ,	Fourth Semi-annual		Special		
Other:		lН	Year End			Mid Year	10.	Special Repo	rt Nan	ne
			Final		Ī	Year End	LOS STRUTTO DES		Stranger Stranger Stranger	petitioned they comply
8. Number of Fundrais	sers this Report		Special			inal				
0)			:		Special				
11. Account Informati	The state of the section of the state of the section of the sectio					nformation				
a. Financial Institution Full	Name			a. Fina	ncial Inst	itution Full Name				
Bank of America b. Purpose	c. Account Code			b. Purp	nee		6.	Account Code		
General				D. 1 1111	·			recount code		
Receipts and	00	1								
Dispursement	d. Period Begin Balance						d.	Period Begin Ba	lance	
	\$ 46,181.94						\$			
CERTIFICATION	1						1			
	ittee or Fund is in compli									
	s and that no funds are co						ls. I furtl	her certify tha	t this re	eport
Jinger L Kelley	rrect and that I have been	ı tranıçu	· / / /	Pros) 1/	oll()	09/08/	/2015		
	Printed Name of Signer					ted Treasurer		Date		
FOR OFFICE USE ONL	Y		· · · .			1		3.5.1.1		
Date Received:	MECKLENBURG COUNTY		Employee:			Commence of the commence of th		ery <u>Method</u> Normal Mail		
Data Barturalia Ja	and oddill		77			1		Registered M		
Date Postmarked:	SEP D8 2016		Employee:					Hand Deliver		
Date Scanned:	- 6 GN 18		Employee:		a	<u>v</u>		Electronically Signer has no		
Application of the state of the	BOARD OF ELECTIONS				7		ப	mandatory tra		YUU
Date Data Entered:			Employee:						<i>-</i>	
Please Note: This for	orm cannot be used to an						lress, tre	asurer, assista	ant trea	surer,
				-		information.	_			
Y	ou must amend the State	ment of	Organization	(CRO	2100A	E) to make comm	ittee cha	inges.		

Amendment \boxtimes No

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

Use this form to summarize all disclosure reporting forms and to 1. Committee Full Name (and Fund if applicable) 2.	o total monetary Type of Report	mivinativn.	3. ID Number
	e-Primary Repor	t	
		Total this	Total this
Start of Election Cycle: January 1,	2014	Reporting Period	Election Cycle
4) Cash on Hand at Start		\$ 46,181.94	\$ 5,725.62
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 75.00	\$ 325.30
6) Contributions from Individuals	(CRO-1210)	\$ 13,150.00	\$ 89,254.28
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$ 250.00
9) Loan Proceeds	(CRO-1410)	\$	\$ 30,000.00
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$	\$
11) Other Receipt Sources			
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)	\$	\$
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11	ld and He)	\$ 13,225.00	\$ 119,829.58
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 37,366.62	\$ 68,260.60
13b) Contributions to Candidates/Political Committee	s <i>(CRO-1310)</i>	\$	\$ 475.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$
15) Loan Repayments	(CRO-1420)	\$	\$ 30,000.00
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	\$
17) In-Kind Contributions	(CRO-1510)	\$	\$ 4,779.28
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16	6 and 17)	\$ 37,366.62	\$ 103,514.88
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract		\$ 22,040.32	\$ 22,040.32
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns)	(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)	\$	\$
	. 7	<u> </u>	

Aggregated Contributions from Individuals

Page

		Amen	dment		
 of	<u> 14</u>		Yes	\boxtimes	No

Optional form used to report NC Contributions From Individuals of \$5	50 or less
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1. Committee Full Name (and Fund if applicable) 2. ID Number										
C	ommi	ttee to Elect Sc	ott Stone							
3	Cont	ributor Inforn	nation							
1,11,215,7	Amend		b. Account	c. Form of Payment	d. In-Kind	e. Date	Ī	f. Amount		
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				nmary Page CRO-1100)			\$	75.00		
į	(1708 છે	ie must ve on title	<i>ં ખુ છ</i> ણામાલા ડા લ	ununy Fuge CAO-1100)						

		m Individuals ividual contributions o	ver \$50	Pg For contributions und		14 0 1205 is no	Yes Yes	No No
		and Fund if applica		Of Contributions und	CI \$30 II IOIII CIO	2. ID Nun		5
	ee to Elect Scott S							
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	city, state, & zip)							
David Sm				Real Estate				
6223 Sha	ron Rd			c. Employer's Name/Sp	pecific Field			
Charlotte	, NC 28210			Northwood Raven				
						e. Election S	um to Date	
						\$	250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Kind Description	j. Date (mm/dd/yy	уу)	k. Amount	
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(include	city, state, & zip)	N. N.						
Melvin G	raham			Real Estate				
2701 Col	tsgste Rd			c. Employer's Name/Sp	pecific Field			
Charlotte,	, NC 28211			Graham Enterprise	s			
						e. Election S	um to Date	
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(include	city, state, & zip)	•						
Robert Su	ıllivan			Finance				
l .	nnecock Lane			c. Employer's Name/Sp				
Marvin, N	NC 28173			Alston & Bird LLF)	<u> </u>		
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		m Individuals		Pg	<u>3</u> or	14	Yes	No No
				or contributions unde	er \$50 if form CRO			
1, Comm	ittee Full Name ((and Fund if applicat	ole)			2. ID Num	iber	
Committe	ee to Elect Scott St	tone						
PERMITTAND SERVICES	butor Informatio				nove			
	ne, Mailing Address &	& Phone		b. Job Title/Profession		d. Comments	<u>s</u>	
Kevin Da	city, state, & zip) igenhart			Vice President				
3421 Clo	seburn Ct		i	c. Employer's Name/Spe				
Charlotte	, NC 28210		1	JLL Commercial Re	eal Estate	- Fleetion C	N-4n	
			1			e. Election S		
						\$	250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Kind Description	j. Date (mm/dd/yy		k. Amount	
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1	ne, Mailing Address &	& Phone	<u> </u>	b. Job Title/Profession		d. Comment	8	
(include David Mi	city, state, & zip)			CEO				
	nner nmoor Lakes Dr			c. Employer's Name/Spe	ecific Field			
	, NC 28277		;	Raley Miller Proper				
			!		•	e. Election S	um to Date	
			· 			\$	500.00	
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	ne, Mailing Address &	È Phone	. :	b. Job Title/Profession		d. Comments	S	
(include Lane Fais	city, state, & zip)			Director	ļ			
	eens Road West			c. Employer's Name/Spe	ecific Field			
-	, NC 28207			Copeley Capital				
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	001	Credit Car			08/17/20	015	\$	2,500.00
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(This line	e must be on line 6 of .	Detailed Summary Page C	RO-1100					•

		n Individuals vidual contributions o	over \$50) or contributions ı	Pg indei	of \$50 if form CR	<u> 14</u> O 1205 is 1	Amendmen Yes not used	t No
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Committe	ee to Elect Scott S	tone							
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	city, state, & zip)								
Peter Tor				Executive VP			_		
	ningdale Dr			c. Employer's Nam Main Street Cap		citic Field	-		
Charlotte	, NC 28277			iviani Street Cap	жа		e. Election	Sum to Date	
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	city, state, & zip)								
Landon V	•			Principal c. Employer's Nam	. 10	.ic. Di.la	-		
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Charlotte	, NC 20201			Cilidios Kicin			e. Election	Sum to Date	
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	onshire Dr ille, NC 28078			c. Employer's Nam	e/Spe	eme riem	-		
Tiuncisy	ille, INC 20076			314			e. Election	Sum to Date	
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5. Total of ALL CRO-1210 Pages

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13,150.00

\$

		n Individuals vidual contributions o	over \$50	Pg) or contributions unde	S of r \$50 if form CR		Amendment Yes not used	t No
T-10-11-11-11-11-11-11-11-11-11-11-11-11-		and Fund if applical				2. ID Nu	CONTRACTOR	
Committe	ee to Elect Scott S	tone						
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	ne, Mailing Address é	& Phone		b. Job Title/Profession		d. Commer	nts	
(include John Dud	city, state, & zip)			Wise Development				
	เลร vidence Road			Vice President c. Employer's Name/Spe	reific Field	{		
	, NC 28173			Choate Construction		1		
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	city, state, & zip)		· ·					
Ben Speir				Real Estate	.:e. TV.14	-		
4720 Asp Charlotte	, NC 28210			c. Employer's Name/Spe Cherry Assoc.	cure rieia			
Onurrous,	, 110 20210			Cherry 710500.		e. Election	Sum to Date	
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	ian itehall Park Dr			President c. Employer's Name/Spe	eific Field			
	, NC 28273			Cimtec	cinc Piciu	****		
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5. Total of ALL CRO-1210 Pages

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13,150.00

\$

		m Individuals		Pg			Yes	No No
April 19 Control of the Control of t		vidual contributions of		or contributions und	ler \$50 if form CR			
1, Comm	iittee Full Name ((and Fund if applica	ble)			2. ID Nun	nber	
Committe	ee to Elect Scott S	tone						
3. Contri	ibutor Informatio	שכ		Add 🗌 Re	move			
	ne, Mailing Address &	& Phone		b. Job Title/Profession		d. Comment	ts	
	city, state, & zip)							
Howard I	_			President	101 371 13	-		
	gley Hill Rd , SC 29708			c. Employer's Name/S Mecklenburg Pain		-		
1 Oft Willia	, 30 27708			Wicckiending Fam	t Company	e, Election S	Sum to Date	
						\$	100.00	
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a. Full Nan	ne, Mailing Address &	& Phone		b. Job Title/Profession		d. Comment	s	
	city, state, & zip)							
Richard F				CFO				
	ildeat Trail			c. Employer's Name/S		-		
Davidson	, NC 28036			Fuel Sports Manag	gement	e. Election S	um to Data	
						\$	200.00	
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	city, state, & zip)			77 D 11 .				
Mark Hug	gnes vidence Rd			Vice President c. Employer's Name/Sp	oneiGo Eigld			
	, NC 28210			Choate Construction		<u> </u>		
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		(and Fund if applica		or contributions u	naer \$50 if form Ci	2. ID Nui		
	ee to Elect Scott S		<i></i> ,			2,312,130,	mer	
3. Contr	ibutor Informati	on	П	Add 🗍 I	Remove			-
275-14/22/20-14-05/14-06/20/20	ne, Mailing Address		السا	b. Job Title/Professi		d. Commen	ıts	
	city, state, & zip)							
David Pr	iester			Principal				
	Providence Rd			c. Employer's Name				
Charlotte	, NC 28226			Choate Construc	etion			
						e, Election S	Sum to Date	
						\$	1,600.00	
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	001	Credit Car			08/21/	2015	\$	100.00
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	city, state, & zip)							
Zach Prie				Technician				
1125 Ree				c. Employer's Name				
Charlotte	, NC 28209			Building Energe	ticx	a Flastion i	Sum to Date	
						\$	100.00	
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	city, state, & zip)			J				
Ernest Ba 474 Fento	•			Financial Adviso		4		
	, NC 28204			c. Employer's Name BEJS	/Specific Fleid	_		
Charlone	, 110 20204			BEJO		e. Election S	Sum to Date	
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	001	Credit Car			08/24/	2015	\$	250.00
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4. Total	only this Pag	e				\$		950.00
5. Total	of ALL CRO	-1210 Pages				•		12 150 00

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

13,150.00

\$

Mars. 4-	.:14		C	T., 32.	
Conu	IDU	HORS	irom	Inar	viduals

		m Individuals ividual contributions ov	ver \$50	or contribution	Pg as unde	of \$50 if form CR	<u>//</u> O 1205 is not	Amendmen Yes used		No
1, Comm	iittee Full Name ((and Fund if applicab	le)		3 8 6		2. ID Num	ber 🦠		
Committe	ee to Elect Scott S	tone								
3. Contr	ibutor Informatio	o)ii		Add 🔲	Rem	ove				
	ne, Mailing Address d	ほうそうそう ないようか かいき しゅうごう		b. Job Title/Pro	fession		d. Comments			
	city, state, & zip)			1						
Diane Riv				Manager						
	hisper Creek Dr , NC 28277			c. Employer's N		citic Field				
CHAIROUG	, NC 20211			Braackett Fla	ig omp		e. Election Su	ım to Date	100 mm	47.5
							\$	450.00		
f. Prior	g. Account Code	h. Form of Payment	i In L	and Description	71.54	j. Date (mm/dd/yy		k. Amount		0.00
1.11101			I, 111-IX	and Describition	A Service Address				201.043.1	0.00
	001	Credit Car				08/25/20	015	\$		0.00
								\$		
								\$		
3. Contri	ibutor Informatio	on .		Add 🔲	Rem	ove			9.0	43 (A) (B)
a. Fuli Nan	ne, Mailing Address &	& Phone	20742000000000	b. Job Title/Pro	fession		d. Comments		51 614545041345	EDATH OF STREET
	city, state, & zip)									
Sam Kha				CEO		· · · · · · · · · · · · · · · · · · ·				
-	er Glen Dr			c. Employer's N						
Charlotte	, NC 28277		,	Technology I	Partners	i.	e. Election Su	ım to Data	791 Y 5	3 1 1 1 2
									* * * *	
							\$	1,000.00		
f. Prior	g. Account Code	h. Form of Payment	i, In-K	ind Description	1.54	j. Date (mm/dd/yy	yy)	k. Amount	1,1,13	241.
	001	Credit Car				08/27/20	015	\$	1,00	0.00
								\$		
								\$		
3. Contri	i ibutor Informatio)n	П	Add 🗍	Rem	ove			1	
a. Full Nan	ne, Mailing Address &	& Phone	52/05/1/20/02/5/5/	b. Job Title/Pro	fession		d. Comments		91205050000	The Constitution:
	city, state, & zip)									
Thomas E				Real Estate						
	ron Woods Lane			c. Employer's N						
Charlotte,	, NC 28210			Piedmont La	na vent	ures	e. Election Su	ım to Date		
							\$	250.00		
f. Prior	g. Account Code	h. Form of Payment	i, In-K	ind Description		j. Date (mm/dd/yy	yy)	k. Amount		
	001	Credit Car				08/28/20)15	\$	25	0.00
								\$		
								\$		
4. Total	lonly this Pag	e					\$		1,45	0.00
	of ALL CRO									
		Detailed Summary Page CR	:0-1100))			\$		13,15	50.00

- A -					Amen	ıdment		
Disbursements	Pg	10	of	14		Yes	\boxtimes	N
Use this form to report expenditures from the committee for; operating ex	xpenses	, contribut	tions to	candida	te/politi	ical		
committees and coordinated party expenditures.	•				•			
1. Committee Full Name (and Fund if applicable)					2 IV 5	Viimba		

	full Name (and Fun Elect Scott Stone	d if applicable)				2. ID Number		
3. Type of Disb		ise use separate C	RC	0-1310 forms for each t	ype of Disbursem	ent.)		
Operating E	Expenses		ındid	dates/Political Committees		ordinated Party Expenditures		
4. Payee Inform			1	Add 🔲	Remove			
	ing Address & Phone		b	o. Coordinated Committee N	ame	d. Comments		
(include city, state,	& zip)							
Jinger Kelley			L					
3103 Julian Gle		į	C.	. Level Registered (Specify)				
Waxhaw, NC 28	8173	•	Į	Federal	County:			
		į		State	Municipality:	e. Election Sum to Date		
		I				\$ 4,815.00		
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
001	Check	0	- 1	08/05/2015	\$1,203.75	Professional		
	-	 				Fees		
	<u> </u>		-		\$			
4. Payee Inform	ıation		A	Add 🗍	Remove			
a. Full Name, Maili	ing Address & Phone		b	. Coordinated Committee Na	ame	d. Comments		
(include city, state,	& zip)	!						
USPS		!	L					
201 N. McDowe		1	c.	. Level Registered (Specify)				
Charlotte, NC 2	8233	,	Ī	Federal	County:			
ı		,		State	Municipality:	e. Election Sum to Date		
						\$ 208.00		
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
001	Check	О	- 1	08/07/2015	\$98.00	Annual PO		
				00/0//2012	4,0.00	Box rental		
	1	- The state of the			\$			
4. Payee Inform	iation		Ā	\dd	Remove			
	ing Address & Phone	And the second s	b	. Coordinated Committee Na	Section Control of the Control of th	d. Comments		
(include city, state,	_							
Scarletts Webb								
406 S. Chester S		1	c.	. Level Registered (Specify)				
Gastonia, NC 28	3052	ı	Ī	Federal	County:			
		1		State	Municipality:	c. Election Sum to Date		
						\$ 3,558.80		
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
001	Credit Card	О		08/14/2015	\$14.95	Website management		
					\$			
5. Total only thi	is Page					\$ 1,316.70		
As an experience of the fell care of the management of the first of th	CRO-1310 Pages		ij			Ψ 1,022		
	line 13a of Detailed Sum	mary Page CRO-1100	0 if	Operating Expenses)	ASSASSINATO DANGE SELECTION CO.	0 27266		
(This line goes in a	line 13b of Detailed Sum	nmary Page CRO-1100	0 if (Contrib to Candidates/Politic		\$ 37,366.62		
(This line goes in	line 13c of Detailed Sum	ımary Page CRO-1100	0 if C	Coordinated Party Expenditu				
	es (List detailed exp			and and the second seco				
A* - Media	B* - Printing	C* - Fund			D - To Anothe			
E - Salaries I - Postage	F* - Equipment J - Penalties					Public Office Expenses		
O* - Other	J - renames	K* - Offic	;e r	xpenses	Q^ - Donation	n to Legal Expense Fund		
	e detailed explanati	on in required re	em	arks field (k)				

Disbursem	ents				Pg	11	of	14 Yes No
Use this form to	report expenditures coordinated party ex	from the committee	ee for;	operating exp	enses,	contribu	tions to c	
the Annual Control of the Control of	ull Name (and Fun							2. ID Number
Committee to E		u a supplication of						2, 10 Rumber
3. Type of Disb	ursement <i>(Plea</i>	ise use separate C	RO-13	310 forms for	each ty	pe of Di	sbursem	ent.)
Operating E		Contributions to Can	didates	/Political Commit	tees		Coo	ordinated Party Expenditures
4. Payee Inform			Add	And the second s		Remov	re e	
	ng Address & Phone		b. Co	ordinated Comm	ittee Na	ıme		d. Comments
(include city, state,	 							
Rosebay Develo PO Box 530986	•		. T.	D				
Mountain Brook			c. Le	vel Registered (S _l Federal	pecny)	County:		
Modition Brook	, AL 33233			State	님	Municip	ality:	e. Election Sum to Date
			<u> </u>			типпор		
f. Account Code	- FcD	h. Purpose Code	1.	D (/ / / / / / / / / / / / / / / / / /		1	<u> </u>	\$ 21,000.00
I. Account Code	g. Form of Payment	n. rurpose Code	1. 1	Date (mm/dd/yyy	(y)	j. Amou	nt	k. Required Remarks
001	Check	0	0	8/17/2015		\$3,500	.00	Campaign Fundraising
				0.000		\$		
4. Payee Inform	ation		Add			Remov	е	
	ng Address & Phone		endered by the end of	ordinated Comm	ittee Na			d. Comments
(include city, state,	•			******				
Political Ink								
1220 19th St NV			c, Lev	el Registered (S _I	pecify)			
Washington, DC	20036		Federal County:			-		
				State	Ш	Municip	ality:	e. Election Sum to Date
							:	\$ 22,784.75
f. Account Code	g. Form of Payment	h. Purpose Code	i.]	Date (mm/dd/yyy	y) -	j. Amou	nt	k. Required Remarks
001	Wire	0	0	8/20/2015		\$7,634.	05	Printing/mail
	***************************************			0/20/2015		\$7,034.	.93	marketing
001	Wire	О	0	8/24/2015		\$7,514.	.85	Print/mail marketing
4. Payee Inform	ation		Add			Remov	e	
a. Full Name, Maili	ng Address & Phone		b, Coordinated Committee Name					d. Comments
(include city, state,	& zip)							
Political Ink							,	
1220 19 th St NW			c. Lev	el Registered (Sp	pecify)		`	
Washington, DC	20036		Federal County:			•		
			<u> </u>	State		Municipa	anty:	e. Election Sum to Date
								\$ 22,784.75
f. Account Code	g. Form of Payment	h. Purpose Code	i, I	Date (mm/dd/yyy	у)	j. Amoui	ot	k. Required Remarks
001	Wire	0	0	8/28/2015		\$7,634.	.95	Print/Mail Marketing
						\$		
5. Total only thi	s Page							\$ 26,284.75
Charles and the contract of th	CRO-1310 Pages							Ψ 20,20 i.75
(This line goes in	line 13a of Detailed Sum	mary Page CRO-1100	If Oper	rating Expenses)				e 27.266.62
	line 13b of Detailed Sum		-					\$ 37,366.62
	line 13c of Detailed Sum				penditui	res)		
7. Purpose Code A* - Media	es (List detailed exp						P. A 1	-011
E - Salaries	B* - Printing F* - Equipment	C* - Fund G - Politica						r Candidate Public Office Expenses
I - Postage	J - Penalties	K* - Office						t to Legal Expense Fund
O* - Other					sang sasaran s			
* Codes require	e detailed explanati	on in required re	mark	s field (k)				

	ents report expenditures coordinated party ex		ee fo	or; operating expe	Pg nses,		Amendment 14				
1. Committee F	ull Name (and Fun						2. ID Number				
Committee to E					The said	as to the second se					
3. Type of Disb		<u>ise use separate C</u>									
Operating E		Contributions to Can		tes/Political Committe	es		ordinated Party Expenditures				
4. Payee Inform			Ac	•		Remove					
	ng Address & Phone		b. (Coordinated Commi	ttee Na	ıme	d. Comments				
(include city, state,			ĺ								
Capitol Commu	nications	:	<u> </u>								
PO Box 876	(C) 20(20		e, J	Level Registered (Spe	ecify)						
Granite Falls, N	C 28030		<u> -</u>	j Federal	님	County:					
			ليا	State		Municipality:	c. Election Sum to Date				
							\$ 9,500.00				
f. Account Code	g. Form of Payment	h. Purpose Code	\perp	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks				
001	Check	0		08/20/2015	_	\$9,500.00	Marketing Surveys				
						\$					
4. Payee Inform	ation		Ad	ld	FT.	Remove					
	ng Address & Phone		Action of the Control	Coordinated Commit	tee Na	efolio de la respectación de la partir a medida escalar a colonia de la contra del la contra de la contra de la contra del la co	d. Comments				
(include city, state,	- · · · · · · · · · · · · · · · · · · ·				<u></u>						
Bank of Americ											
PO Box 15019			e. I	Level Registered (Spe	cify)						
Wilmington, DE	3 19886			Federal		County:					
-				State		Municipality:	e. Election Sum to Date				
						\$ 1,960.66					
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks				
201		_	十		,		website				
001	Check	0	\perp	08/24/2015		\$5.99					
001	Check	O		08/24/2015		\$5.00	Website				
4. Payee Inform		L	Ad	and the second section of the second control of the second control of the		Remove					
	ng Address & Phone		b. (Coordinated Commit	tee Na	d. Comments					
(include city, state,											
Bank of Americ	a Credit Card										
PO Box 15019	10006		e. L	Level Registered (Spe	cify)						
Wilmington, DE	19886		Federal County:								
			<u> </u>	State		Municipality:	e. Election Sum to Date				
							\$ 1,960.66				
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy))	j. Amount	k. Required Remarks				
001	Check	0		08/24/2015		\$15.00	Parking				
001	Check	O		08/24/2015		\$5.00	Parking				
5. Total only thi	s Page						\$ 9,530.99				
	CRO-1310 Pages										
(This line goes in	line 13a of Detailed Sum	if O	perating Expenses)			e 27.277.72					
(This line goes in	line 13b of Detailed Sum	0 if Contrib to Candidates/Political Comm)				\$ 37,366.62					
	line 13c of Detailed Sum		_		enditui	res)					
	es (List detailed exp										
A* - Media	B* - Printing	C* - Fund				D - To Anothe					
E - Salaries I - Postage	F* - Equipment J - Penaltics	G - Politica K* - Offic					Public Office Expenses				
O* - Other	o i challes	K -Ome	V 19X	фензез		A - Dougnon	to Legal Expense Fund				

A					Amen	dment		
Disbursements	Pg	13	of	14		Yes	\boxtimes	N
Use this form to report expenditures from the committee for; operating ex	kpenses	. contribut	ions to	candid	ate/politi	ical		

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

	full Name (and Fun Llect Scott Stone	d if applicable)			2. ID Number					
3. Type of Disb	ursement <u>(Plea</u>	ise use separate C	CRO-1310 forms for each t	ype of Disbursem	ent.)					
Operating E			ndidates/Political Committees		ordinated Party Expenditures					
4. Payce Inform	nation		Add	Remove						
a. Full Name, Mail	ing Address & Phone		b. Coordinated Committee N	ame	d. Comments					
(include city, state,										
Bank of Americ			,							
9923 Rae Road			c. Level Registered (Specify)	****						
Charlotte, NC 2	8277		Federal	County:						
			State	Municipality:	e. Election Sum to Date					
					\$ 258.60					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks					
001	ACH	О	08/20/2015	\$25.00	Bank Fees Wire					
001	АСН	0	08/25/2015	\$10.00	Bank Fees Wire					
4. Payee Inforn	 ation		Add	Remove	I wife					
	ng Address & Phone		b. Coordinated Committee Na	The same of the sa	d, Comments					
(include city, state,		en en et en des uitsel	Di Godi dilitti di Goni di Controlle di Cont		ut comments					
Bank of Americ										
9923 Rae Road			c. Level Registered (Specify)							
Charlotte, NC 2	8277		Federal	County:						
			State	Municipality:	e. Election Sum to Date					
					\$ 258.60					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks					
001	ACH	0	08/31/2015	\$10.00	Bank Fees Wire					
001	АСН	0	08/24/2015	\$24.95	Bank Fees					
4. Payee Inform	ation		Add	Remove]					
	ng Address & Phone		b. Coordinated Committee Na	d. Comments						
(include city, state,	-									
American Expre										
PO Box 360001			c. Level Registered (Specify)							
Ft Lauderdale, I	FL 33336		l'ederal							
			State	Municipality:	e. Election Sum to Date					
					\$ 95.75					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k, Required Remarks					
001	АСН	0	08/24/2015	\$47.25	Credit Card processing					
				\$	processing					
S Total as leads	a Doga]	¢ 117.00					
5. Total only thi	CRO-1310 Pages		Control States States and American Control of the C		\$ 117.20					
	Commence of the control of the contr	mary Page CRO-110	0 if Operating Expenses)							
		· -		al Conun)	\$ 37,366.62					
	(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* - Func	draising	D - To Anothe						
E - Salaries	F* - Equipment				Public Office Expenses					
I - Postage O* - Other	J - Penalties	K* - Offic	ce Expenses	Q* - Donation	n to Legal Expense Fund					
The relation was not been also because a contract or restrict to	e detailed explanati	on in required re	emarks field (k)							

Disbursem	ants				11.1	1/ 1	Amendment	5-3
		from the committ	tee for; operating exp	Pg	14 o	r <u>14</u>	Yes Yes	⊠ No
committees and	coordinated party ex	kpenditures.	cc for, operating exp	chaca, (COHEIDURIOHS	to candidate	прописан	
	full Name (and Fun						2. ID Numbe	r
Committee to E	Elect Scott Stone			2,200.00	200 mm - 100	00A32 000 000 000 000 000 000 000 0000	<u> </u>	
3. Type of Disb	The state of the s		RO-1310 forms for		pe of Disburs	ement.)		
Operating E		Contributions to Ca	ndidates/Political Commit	tees		Coordinated I	Party Expenditure	ès .
4. Payee Inform		<u>U</u> _	Add	Ш	Remove	1		
a. Full Name, Mail (include city, state,	ing Address & Phone		b. Coordinated Comm	ittee Na	me	d. Com	nents	
Authorize.Net	& ztp)							
PO Box 947			c. Level Registered (S)	necify)				
American Fork	, UT 84003		Federal		County:	-		
			State		Municipality:	e. Electi	on Sum to Date	
						6 14	71 1¢	
						\$ 1,4	71.15	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyy	y)	j. Amount		ired Remarks	
001	ACH	0	08/31/2015		\$116.98	Online	pymt	
						Fees		
					\$			
4. Payee Inform	nation		Add		Remove			
	ing Address & Phone		b. Coordinated Comm	ittee Na		d. Comr	nents	
(include city, state,								
			c. Level Registered (SI	ecify)				
			Federal Federal		County:			
			State		Municipality:	e. Electi	on Sum to Date	
						\$		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyy	1	: A	l. D.		*.
in recount Code	g. Porm of Payment	ar ar pass code	i. Date (min/un/yyy	5)	j. Amount	K. Kequi	ired Remarks	
					\$			
				1	\$			
4. Payee Inform	iation		Add		Remove			
	ng Address & Phone		b. Coordinated Comm	ittee Nar	me	d. Comn	nents	
(include city, state,	& zip)							
						_		
			c. Level Registered (Sp	ecify)		_		
			Federal State		County: Municipality:	. 331 -41	0 1 0 1	
			State	Ш	withicipanty:	e, Electio	on Sum to Date	
						\$		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyy	y) [j. Amount	k. Requi	red Remarks	
					\$			
					\$			
					Ψ			
5. Total only thi						\$	116.98	
	CRO-1310 Pages	waru Paga CDO 1100) if Operating Expenses)	\$3.50 E				
) if Contrib to Candidates.	/Politica	l Cammi	\$	37,366.62	
) if Coordinated Party Ex					
	es (List detailed ex		-					172 500 500 60
A* - Media	B* - Printing	C* - Fund	Iraising			other Candida		<u> </u>
E - Salaries I - Postage	F* - Equipment J - Penalties	G - Politic					ffice Expenses	
O* - Other	o - 1 challies	W OHIO	e Expenses	1	. V^ - Dona	uon to Lega	l Expense Fun	.a
* Codes requir	e detailed explanati	on in required re	emarks field (k)					