No No

Disclosure Report Cover

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 In	nformation	nigavienies	THUS.		N. Starte			
a. Full Name								c. ID Number
COMMITTEE	TO ELECT C	CHARLES EVA	NS					
b. Mailing Addr	ess (include Ci	ty, State and Zij	Code)					d. Date Filed
6720 - 1 WILL UNIT 1	OWBROOK I	DR						07/18/2015
FAYETTEVIL	LE, NC 2831	4						e. Phone Number
	000000	501						
2. Report Year 3. Period Start Date (mm/dd/yy) 4. Period End Date (mm/dd/yy) 5. Treasur								er Full Name
2015	0	1/01/2015		17	06/30/2	2015	LAURA H	IARDY
6. Type of Comr		One)		e of Repor	t (c.		type of rep	ort from one category)
X Candidate Can			Munio			State/County		Referendum
Joint Fundrais				Organizatio		Organizatio	onal	Organizational
Referendum		gal Expense Fund		Thirty-five		Quarterly		Pre-referendum
7. Type of Fund		le, check one)		Pre-primar		First		Final
Booster Fund	1"		<u> </u>	Pre-electio	n	Second	•	Supplemental Final
Building Fund	lection Year Can	Edot on Frond		Pre-runoff Semi-annua	1	Third Fourth		Annual Special
☐ Presidential E☐ NC Public Car				Mid Ye		Fourth Semi-annua		☐ Special
I NC Public Car	npaign rmancing	g runa		Year E		Mid Ye	100	10 Charlel Danant Name
Other:			H	Final	iid	Year E	2000	10. Special Report Name
8. Number of Fu	indrojeore this	Doport	Ħ	Special		Final	na .	
o. Number of Fu		s Report	ш	орести		=		
	0					- Promise		
3. Account Infor						ount Informat		
a. Financial Inst		me			a. Fina	ncial Institutio	on Full Nam	<u>e</u>
CAPITAL BAN	\K							
b. Purpose		c. Account Cod	e		b. Pur	pose		c. Account Code
RECEIPTS AN EXPENDITUR			100					
		d. Period Begin	Balan	ce				d. Period Begin Balance
		\$						\$
Chapter 163 of funds. I further Lauri	he Committee of f the NC Gener er certify that t	ral Statutes and this report is con	that no	funds are	commi orrect a	ngled with pro	hibited or o	2A, 22B & 22D-22M of ther non-disclosed d by the NC State Board 07/18/2015 Date
FOR OFFICE US	SEONLY	un .	00			11		
Date Receive		JUL 20 201	5	Emplo	yee:	DE	- 🗆	ivery Method Normal Mail
Date Postma	rked:		-	Employ	yee: _			Registered Mail Hand Delivered
Date Scanne	d:		_	Employ	yee:		-	Electronically Filed
Date Data En	ntered:			Employ	yee: _			Signer has not received mandatory training
	assistar	nt treasurer, cus	todian	of books i	ıformat	tion, or accoun	t informatio	
V	ou must amen	d the Statement	of Ora	anization (CRO-21	100A -F) to mak	e committee	changes

Detailed Summary

Amendment

☐ Yes 🏿 No

Use this form to summarize all disclosure reporting for	ms and to total monetary into	rmation
1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number

1. Committee Full Name (and Fund if applicable)	2. Type of Re	D Number			
COMMITTEE TO ELECT CHARLES EVANS	2015 Mid Y	Year Semi-Annual			
Start of Election Cycle: January 1,2015		Total this Reporting Perio	od	Total this Election Cycle	
4) Cash on Hand at Start		\$ 403.2	22	\$ 403.22	
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 0.0	00	\$ 0.00	
6) Contributions from Individuals	(CRO-1210)	\$ 2,000.0	00	\$ 2,000.00	
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0.0	00	\$ 0.00	
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0.0	00	\$ 0.00	
9) Loan Proceeds	(CRO-1410)	\$ 0.0	00	\$ 0.00	
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$ 0.0	00	\$ 0.00	
(1) Other Receipt Sources		The latest the second			
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0.0	00	\$ 0.00	
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$ 0.0	00	\$ 0.00	
11c) Outside Sources of Income	(CRO-1250)	\$ 0.0	00	\$ 0.00	
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$ 0.0	00	\$ 0.00	
11e) Exempt Purchase Price Sales	(CRO-1265)	\$ 0.0	00	\$ 0.00	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c	,11d and 11e)	\$ 2,000.0	00	\$ 2,000.00	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$ 2,368.9)2	\$ 2,368.92	
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 0.0	00	\$ 0.00	
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0.0	00	\$ 0.00	
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 20.5	0	\$ 20.50	
15) Loan Repayments	(CRO-1420)	\$ 0.0	00	\$ 0.00	
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$ 0.0	00	\$ 0.00	
17) In-Kind Contributions	(CRO-1510)	\$ 0.0	00	\$ 0.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15		\$ 2,389.4	2	\$ 2,389.42	
(19) Cash on Hand at End (Add lines 4 and 12 together, then sub	otract line 18)	\$ 13.8	0	\$ 13.80	
ADDITIONAL INFORMATION	(CDO 1330)	<u> </u>	0		
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0.0	- 1		
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 0.0	- 8		
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$ 0.0	- 10		
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$ 0.0	- 1		
24) Account Transfers Within the Committee	(CRO-1720)	\$ 0.0	-		
25) Administrative Support	(CRO-1710)	\$ 0.0	-	\$ 0.00	
26) Forgiven Loans	(CRO-1440)	\$ 0.0	-	\$ 0.00	
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$ 0.0		\$ 0.00	
28) Contributions to be Refunded	(CRO-1215)	\$ 0.0	0	\$ 0.00	

Cont	ributions fr	om Individual	S	Pg	1_ of1_	=0	Amendme	ent No
Use this	s form to report in	ndividual contribution	s over \$50 or co	ontributions ur	nder \$50 if form CRO	1205	is not use	d
1. Com	mittee Full Name	(and Fund if applicab	le)			2.1	D Number	
COMN	MITTEE TO ELE	CT CHARLES EVA	NS					
	ributor Informati			Add Re				
900 9	Name, Mailing Add			b. Job Title/Pr	ofession	d. C	Comments	
	ide city, state, & z			retire	d			
	HEL MITCHELI IDS MILL RD.	L			Name/Specific Field	1		
	TTEVILLE, NC	28312						
17112	r i B i i i i i i i i i i i i i i i i i	20312		mili-	tary	e. E	lection Su	m to Date
					(\$		600.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amoun	
	100	Check		01/02/2015			\$	500.00
							\$	
							\$	
3. Conti	ributor Informatio	on		Add □ Re	move	B XU		
a. Full N	ame, Mailing Add	lress & Phone		b. Job Title/Pr	ofession	d. Comments		
(inclu	de city, state, & zi	ip)		FARMER				
	AM SIMPSON							
	CLAY FORK HII	THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NA			Name/Specific Field			
ROSEE	BORO, NC 28382	2		WILLIAM S	IMPSON	e. Dection Sum to Date		
						\$		2,000.00
f. Prior		h. Form of Payment	i. In-Kind Desc	cription	j. Date (mm/dd/yyyy)		k. Amount	
	100	Check			01/02/2015		\$	1,500.00
							\$	
							\$	
4. Tota	l only this Pag	ge				\$		2,000.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)								2,000.00
CRO-12	Charles and the second			ard of Elections				April 2007

Distance	arranasis I is					20		Amendm	
Disbursen		- Warrison Delicin to Live Control	e. j.			of			X No
Use this form to	o report expenditures d coordinated party e	from the committeexpenditures	ee for o	perating expen	nses	, contributi	ons to	o candidate/po	olitical
	Full Name (and Fund							2. ID Numbe	r
	E TO ELECT CHARI								
3. Type of Disb	wirsement (Please	use separate CRO	0-1310	forms for eac	h tyr	oe of Disbu	rseme	ent.)	
Operating Ex		tributions to Candidat						ted Party Expen	ditures
4. Payee Inforn		有人是用人 有意识的		Add 🔲	100000000000000000000000000000000000000	move	4		
	Tailing Address & Pho	one		b. Coordinate	d Co	mmittee N	ame	d. Comments	
(include city, sta				-					
DEIDRA DEB 705 WOODST				c. Level Regis	tere	d (Specify)		1	
A STATE OF THE PARTY OF THE PAR	LE, NC 28301			Federal	***	County:	:	-	
	DD, 1, C			☐ State		☐ Municip	ality:	e. Dection Su	ım to Date
								\$	100.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	lj. A	mount	k. Re	<u> </u> equired Remar	ks
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				The Theory of Spiriters	\$	1 State of the sta			
4. Payee Inform	eation			Add \square		nove			
	nation Iailing Address & Pho	one	Ш	b. Coordinate			ame	d. Comments	
(include city, sta		JIIC .		W. 5.1.				ui ocu	
LAURA HARD				İ					
2850 VILLAGI	E DR STE 202		J	c. Level Regist	tered]	
FAYETTEVIL	LE, NC 28304		1	Federal State		County:		Time Cu	1 D-4a
				State		☐ Municip	ality:	e. Election Su	m to Date
					_			\$	6,714.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Aı	mount	k. Re	quired Remar	ks
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100	Check	Е	02	2/06/2015	\$	1,200.00	1		
4. Payee Inform	nation	THE PARTIES.		Add 🔲	Ren	nove			
a. Full Name, Ma	ailing Address & Pho	one		b. Coordinated	d Co	mmittee Na	ıme	d. Comments	
(include city, sta									
ESHANDA HA	RPER			- Level Regist	4 ~ 40 €	(Charley)			
NC				c. Level Regist Federal	ereu	County:			
				State	i	Municipa		e. Election Su	m to Date
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					\$				
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	in line 13a of Detailed St					The sales graph		\$	2,368.92
	in line 13b of Detailed Si in line 13c of Detailed Su		-				mm)		© Tell Concesses services
	odes (List detailed e	The second second second second		The second secon	19 2,	penanin co,		- CAN AT A D	
A* - Media	B* - Printing			undraising	1810	D - To /	Anoth	ner Candidate	
E - Salaries	F* - Equipme			litical Party				Public Office	Expenses
I - Postage	J - Penalties			ffice Expenses				n to Legal Exp	

December 2009

					Ame	enamei	11	
Disbursements	Pg	2_	of	2_		Yes	X	No

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	if applicable)				1,584		2. ID Nu	imber
COMMITTEE	TO ELECT CHARI	LES EVANS				- 10 T			
3. Type of Disbu	ursement (Please	use separate CRO	0-1310	forms for eac	h type of	Disbu	rseme	ent.)	CHARLES IN THE
X Operating Exp		ributions to Candidat							Expenditures
4. Payee Inform	ation			Add 🔲	Remove		44610	81 - 1 by - 1	
	ailing Address & Pho	one		b. Coordinate	d Commi	ittee Na	ame	d. Comm	ients
(include city, sta									
NEW LIFE CH				Lamal Dogla		! ()			
1420 HOKE LO				c. Level Regis		County:		-	
FAY, NC 2831	.4			State		Municip		e. Electic	on Sum to Date
						•		\$	210.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amou	nt	k. Re	quired Re	emarks
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					\$				
4. Payee Inform	ation	CONTRACTOR OF		Add 🔲	Remove	THE REAL PROPERTY.		ah La Gard	
	ailing Address & Pho	one		b. Coordinate	d Commi	ttee Na	ıme	d. Comm	ents
(include city, sta	ite, & zip)								
LILIAN SPEKN	MAN							1	
NC				c. Level Regist					
				Federal State		County: Municip	- 1	a Flectio	on Sum to Date
			, l	State		viuncip	anty.		
								\$	150.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)			k. Re	quired Re	marks
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4. Payee Informa	ation			Add 🔲	Remove				
	ailing Address & Pho	one		b. Coordinated	d Commi	ttee Na	me	d. Comm	ents
(include city, stat	te, & zip)								
VERIZON				Y 17	1.0	•••			
1538 STATE RO				c. Level Regist		cify)			
WAYNE, NJ 07	7470			State		Jounty. Municipa	7000	e. Flectio	n Sum to Date
			ł						
								\$	1,293.96
	g. Form of Payment	h. Purpose Code					k. Red	quired Re	marks
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100	Debit Card	K	02	2/04/2015	\$ 20	1.67	TELE	EPHONE	
5. Total only this	s Page				e ne		THE S	\$	618.92
6. Total of ALL	CRO-1310 Pages					TOP R			
(This line goes in	n line 13a of Detailed Si	ummary Page CRO-	1100 if	Operating Expen	ises)			\$	2,368.92
	n line 13b of Detailed St		0.0000000000000000000000000000000000000				mm)	Ą	2,300.52
The second second second second	n line 13c of Detailed St				ty Expend	itures)			
	des (List detailed e				de Ke		N.		
A* - Media	B* - Printing			undraising				er Candio	
E - Salaries	F* - Equipme			itical Party					office Expenses
I - Postage O* Other	J - Penalties	į.	K* - O	ffice Expenses	C)* - Do	natio	n to Lega	l Expense Fund
	e detailed explanation	a in remired rem	arks fi	eld(k)					
Cours	dotta-to-range	Tim - Coperation	144	014 (11)	-				AND DESCRIPTION OF THE PERSON

Aggreg	gated Non-N	Aedia Expend	itures		Page _	_1_ of	·1_	Amendmen Yes	nt X No		
Optional fo	orm used to rep	ort NC Non-Media	a Expenditures c	of \$50 or less.							
1. Committ	tee Full Name (an	d Fund if applicable)				2. ID 1	Number	Service Residence	NOTE AND DESCRIPTION OF THE PERSON OF THE PE		
COMMIT	TEE TO ELECT	CHARLES EVANS	É								
3. Payee In	formation						3 W 54 E				
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/	уууу)	f. Amo	unt	g. Required Remarks			
☐ Add ☐ Remove	100	Debit Card	0	03/25/201	5	STREET, STREET, STREET, SQUARE, STREET,		\$ 20.50 MEALS		MEALS	
4. Total o	only this Page					\$			20.50		
	of ALL CRO-1 must be on line 14 o	1315 Pages of Detailed Summary Pa	age CRO-1100)			\$ 20.5			20.50		
6. Purpos	e Codes (List	detailed expenditu	re code in (d) a	bove)			THE STATE OF				
	B*	- Printing			D - T	D - To Another Candidate					
E - Salar	ries F*	- Equipment	G - Political	Party	H* -	Holdi	ng Publ	lic Office Exp	enses		
I - Posta	ige J-	Penalties	K* - Office	Expenses	Q* -	Dona	tions to	Legal Exper	nse Fund		
O* - Ot	her										

* Codes require detailed explanation in required remarks field (g)

CRO-1315

NC State Board of Elections

December 2009