¥	Ame	ndment	
Disclosure Report Cover	$\boxtimes$	Yes	No
Iso this form for general report and committee information, must be signed and submitted along with	other o	letailed forms.	

Do not use this	form	to update information	1
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Do not use this form	to update information				
1. Committee Infor	mation				
a. Full Name	c. ID Number				
Committee to Elect	Chas L. Sampson				
h Mailing Address (incl	ude City, State and Zip Code)				d. Date Filed
1006B N Bragg Blv					
Ste 112					
Spring Lake NC 283	390				e. Phone Number
					910.920.0589
2. Report Year	3. Period Start Date (mm/c	ld/yy) 4. Period (mm/dd/yy)		5. Treasurer Full I	Name
2017	07/10/2017	07/2	20/2017	Chameeka S. Broo	ks
6. Type of Committee	tee (Check One)	9. Type of Report	t (check or	nly one type of report f	from one category)
Candidate Campa		Municipal	State/C		Referendum
PAC	Referendum	Organizationa	1 🗆	Organizational	Organizational
Independent	Joint Fundraiser	Thirty-five da	v	Quarterly	Pre-referendum
Expenditure			· .		
Legal Expense Fu	(if applicable, check one)	Pre-primary	lп	First	Final
7. Type of Fund  "Booster Fund"	(у аррисаме, спеск опе)	Pre-election	15	Second	Supplemental Final
Building Fund		Pre-runoff	15	Third	Annual
		Semi-annual		Fourth	Special
		Mid Yea	ır	Semi-annual	
Other:		Year En	d   🔲	Mid Year	10. Special Report Name
		Final		Year End	
8. Number of Fund	raisers this Report	Special		Final	
				Special	
11. Account Inform	ation		11. Account	Information	
a. Financial Institution	Full Name		a. Financial Ins	stitution Full Name	
BB&T					
b. Purpose	c. Account Code		b. Purpose		c. Account Code
Campaign Acc					
for receipts			_		
and	d. Period Begin Balanc	e	4		d. Period Begin Balance
expenditures	\$ 0				\$
CERTIFICATION					
L certify that the Cou	nmittee or Fund is in compl	iance with all applic	able provisions	of Article 22A, 22B,	& 22D-22M of Chapter 163 of I further certify that this report
is complete true and	d correct and that I have bee	n trained by the NC	State Board of	Elections.	BACTERIA ACADO PETER TENERADOR PETER S. S.
Chameeka	S. Brooks		N. T.		7/20/2017
	Printed Name of Signer		Signature of Appoin	nted Treasurer	Date
FOR OFFICE USE O	ONLY			4	
Date Received:	OCT - 6 2017	Employee:	A	ngi !	Delivery Method  Normal Mail
Date Postmarke	ed:	Employee:	j		Registered Mail Hand Delivered
Date Scanned: Employee: Employee: Electronically File Signer has not re					
Date Data Ente	red:	Employee:			mandatory training
DI NI	1.0	1	amustian such a	os the committee addre	see treasurer assistant treasurer
Please Note: Th	torm cannot be used to all custod	nend committee into ian of books informa	ation, or accoun	is the committee addre	ess, treasurer, assistant treasurer,

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Amendment **Detailed Summary** M Yes No Use this form to summarize all disclosure reporting forms and to total monetary information. 3. ID Number 1. Committee Full Name (and Fund if applicable) 2. Type of Report Committee to Elect Chas L. Sampson Total this Total this 2017 Start of Election Cycle: January 1, **Election Cycle** Reporting Period 0.00 Cash on Hand at Start RECEIPTS \$ 65.00 65.00 **Aggregated Contributions from Individuals** (CRO-1205) \$ 5) \$ 1200.00 \$ 1200.00 **Contributions from Individuals** (CRO-1210) \$ \$ **Contributions from Political Party Committees** (CRO-1220) \$ (CRO-1230) \$ **Contributions from Other Political Committees** \$ (CRO-1410) \$ 9) Loan Proceeds \$ \$ Refunds/Reimbursements To the Committee (CRO-1240) 10) Other Receipt Sources \$ \$ (CRO-1250) 11a) Interest on Bank Accounts \$ 11b) Contributions from Not-for-Profit Organizations (CRO-1250) \$ \$ 11c) Outside Sources of Income (CRO-1250) \$ (CRO-1270) \$ 11d) Legal Expense Fund - Other Sources \$ \$ (CRO-1265) 11 e) Exempt Purchase Price Sales \$ TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e) EXPENDITURES Disbursements \$ 962.46 13a) Operating Expenditures (CRO-1310) 962.46 \$ \$ (CRO-1310) 13b) Contributions to Candidates/Political Committees \$ (CRO-1310) 13c) Coordinated Party Expenditures \$ (CRO-1315) 14) Aggregated Non-Media Expenditures \$ (CRO-1420) Loan Repayments 15) \$ Refunds/Reimbursements From the Committee (CRO-1320) \$ (CRO-1510) In-Kind Contributions

,				
18)	TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 a	\$	\$	
19)	Cash on Hand at End (Add lines 4 and 12 together, then subtract li	\$ 302.54	\$ 302.54	
AD	DITIONAL 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-2220)	\$	\$
28)	Contributions to be Refunded	(CRO-1215)	\$	\$

## **Aggregated Contributions from Individuals**

Page

<u>1</u> of <u>1</u>

Amei	dment	
$\boxtimes$	Yes	

No

Optional form used to report NC Contributions From Individuals of \$50 or less

1. Co	ommittee Full Na	ame (and Fun	d if applicable)	arte agent to the second		2. ID 1	Number
	nmittee to Elect C						
	***						
3. Co	ontributor Inform	mation				THE T	
a. Am		b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy		f, Amount
	Add		cach		07/17/20		\$ 10.
	Remove	1	cash		37/17/20	• •	
	Add	1	cash		07/08/20	17	\$ 5.
	Remove	1	VIII		37.03720	enant th	nero 1985
	Add	- 1	cash		07/19/20	17	\$ 50.
	Remove				ateria no istro Gibb. Enfo. S	~ ~~	contractor
	Add				- 1		\$
	Remove						
닏	Add	-					\$
부	Remove	-			-		500
부	Add	-			1		\$
井	Remove	-					
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片	Remove		+				T.
井	Add	-				1	\$
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Η	Add	-					\$
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Η	Remove	+					6
H	Add Remove	+					\$
+	Add	+					6
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H	Remove						\$
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Ħ	Remove						\$
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	Add				1		\$
	Remove						01
	Add						\$
	Remove						
	Add	_					\$
	Remove				-		
	Add						\$
	Remove	D				\$	65.00
	Total only this					φ	03.00
	Total of ALL (					\$	65.00
	(This line must be on line 5 of Detailed Summary Page CRO-1100)						

		n Individuals	0.50	7	Pg	1 of	1	Yes	No No
		vidual contributions o		or contributions	unde	r \$50 if form CRC	2. ID Num		
		and Fund if applical	oie)				2. ID Num	ber	
Committe	e to Elect Chas L.	. Sampson							
	butor Informatio			Add	Rem	ove			100 - 100 -
	e, Mailing Address &	& Phone		b. Job Title/Profe Retired	ssion		d. Comments		
Nellie Mo	city, state, & zip)			Retired					
	ards Circle			c. Employer's Na	me/Spe	cific Field			
Spring La	ke, NC 28390							W as all	
							e. Election Su	m to Date	
							\$	100.	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Lind Description		j. Date (mm/dd/yy	yy)	k. Amount	
	Ĭ	СНК				07/17/20	017	\$	100.
								\$	
								\$	
3. Contri	butor Informatio	on		Add	Rem	ove			
	e, Mailing Address &			b. Job Title/Profe	ssion		d. Comments		
	city, state, & zip)			Professor					
James Ble	edsoe				10	re Pill			
Pullman, WA 99163				c. Employer's Name/Specific Field  Washington State University			-		
r umman,	WA 99103			washington out of our order			e. Election Su	m to Date	
							\$	100.	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Lind Description		j. Date (mm/dd/yy	yy)	k. Amount	
	1	Online				07/201	7	\$	100.
								\$	
								\$	
3. Contri	butor Informatio	n		Add	Rem	ove			
a. Full Nam	e, Mailing Address &	& Phone		b. Job Title/Profe	ssion		d. Comments		
	city, state, & zip)			Candidate					
Chas L Sa				c. Employer's Na	ma/Sna	eific Field			
Ste 112	Bragg Blvd			C. Employer sava	шегоре	cinc Ficia			
	ke NC 28390						e. Election Su	m to Date	
							\$	1000	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Kind Description		j. Date (mm/dd/yy	yy)	k. Amount	
		Online				7/201	7	\$	1000
								\$	
								\$	
4. Total	only this Page	e					\$		1200.
	of ALL CRO						\$		1200.
		Detailed Summary Page C	CRO-1100,	)			φ		1200.

Amendment

Disbursem	ents		Pg	1 of	Amendment  2 Yes N	ю
			ee for; operating expenses,	contributions to	candidate/political	
	coordinated party ex					_
	Full Name (and Fun				2. ID Number	
	lect Chas L. Sampso		3DO 1210 C C L	CD: I		
3. Type of Disb			CRO-1310 forms for each t	Francis		
Operating I			ndidates/Political Committees	<del></del>	oordinated Party Expenditures	
4. Payee Inform			Add b. Coordinated Committee No.	Remove	d. Comments	(30)
	ing Address & Phone		b. Coordinated Committee N	ame	d. Comments	-
Campaign Store			-			
Campaign Store	e.com		c. Level Registered (Specify)		-	
			Federal	County:	-	
			State	Municipality:	e, Election Sum to Date	_
					26	_
					\$ 589.46	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	Debit	В	7/2017	\$589.46	Printing	
				\$		
4. Payee Inform	nation		Add	Remove	An appropriate the state of the	
	ing Address & Phone		b. Coordinated Committee N		d. Comments	
(include city, state,			Di Coordinated Committee 1			
Sams Club	(& Zip)		1			
Bums Clab			c. Level Registered (Specify)			
			Federal	County:	7	
			State 🖂	Municipality:	e. Election Sum to Date	
					\$ 139.66	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
The second secon	D.L.	0	7/2017	\$120.66	Supplies	
	Debit	0	7/2017	\$139.66	32.50	
				\$		
4. Payee Inform	nation		Add	Remove		
			b. Coordinated Committee N		d. Comments	
(include city, state,	ing Address & Phone					_
Barber King Cu			1			
Burour Tring or	at my only		c. Level Registered (Specify)			
			Federal	County:		
			State 🖂	Municipality:	e. Election Sum to Date	
					\$ 50	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k, Required Remarks	
	Debit	С	7/2017	\$50		
				\$		
					6 770.12	_
5. Total only th					\$ 779.12	_
	CRO-1310 Pages	nuary Page CDO 110	0 if Operating Expenses)			
			0 if Contrib to Candidates/Politic	cal Comm)	\$	
			0 if Coordinated Party Expendite			
	les (List detailed ex	the second secon				
A* - Media	B* - Printing	C* - Fun			her Candidate	
E - Salaries	F* - Equipment	G - Politi	cal Party		ng Public Office Expenses	
I - Postage	J - Penalties	K* - Offi	ce Expenses	Q* - Donati	ion to Legal Expense Fund	

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

13.				Amendment
Disbursements	Pg	<u>2</u>	of <u>2</u>	✓ Yes

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 Fun	d if applicable)					2. ID Number
Committee to El	ect Chas L. Sampson	n					
3. Type of Disbu	ursement (Plea	se use separate C	RO	)-1310 forms for each ty	pe of Disbursem	ent.)	
Operating E	xpenses		ndida	ates/Political Committees	Coo	ordinate	d Party Expenditures
4. Payee Inform	ation		_	.dd 🔲	Remove	سارة النوا	
a. Full Name, Maili	ng Address & Phone		b.	Coordinated Committee Na	ıme	d. Co	mments
(include city, state,	& zip)						
Staples.com							
			c.	Level Registered (Specify)			
			۱Ļ	Federal	County:		
			L	State 🖂	Municipality:	e. Ele	ection Sum to Date
						\$ 1	128.39
f. Account Code	g, Form of Payment	h, Purpose Code	ᅥ	: Data (mm/dd/mary)	j. Amount	b Do	aninal Damarke
I. Account Couc	Vanc 45000	50.00	+	i. Date (mm/dd/yyyy)		Print	quired Remarks
	Debit	В		7/2017	\$128.39	11111	ing
			$\exists$		\$		
			_				
4. Payee Inform			T	dd 🔲	Remove		
	ng Address & Phone		b.	Coordinated Committee Na	ime	d, Co	mments
(include city, state,			-				
Daly Profession	al Campaign					-	
Marketing.com			c.	Level Registered (Specify)		-	
			-	Federal	County:	701	
			L	State	Municipality:	e. Lie	ction Sum to Date
						\$ 3	39.95
f. Account Code	g. Form of Payment	h. Purpose Code	Т	i. Date (mm/dd/yyyy)	j. Amount	k. Re	quired Remarks
	Debit	0		7/2017	\$39.95	Web	0
			$\dashv$		way ?		
					\$		
4. Payee Inform	ation	$\boxtimes$	Add Remove				
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee Name		me	d. Con	mments
(include city, state,	& zip)						
Filing Fee			L				
227 Fountainhea			c. Level Registered (Specify)				
Fayetteville, NC	28301		Federal County:				
			L	State 🖂	Municipality:	e. Ele	ction Sum to Date
						\$ 1	15
f. Account Code	g. Form of Payment	h. Purpose Code	$\vdash$	i. Date (mm/dd/yyyy)	j. Amount	k. Rec	quired Remarks
I Account Code	2745 W		$\dashv$			Filing	THE COURSE OF TH
	Cash	0		7/2017	\$15	1	5
					\$		
1 1 1 1					Ψ	_	100.04
5. Total only thi						\$	183.34
	CRO-1310 Pages	Page CPO 1100	0 157	Othe Fundage			
We can be seen a second and a second and a	line 13a of Detailed Sum			Operating Expenses) Contrib to Candidates/Politica	al Commi	\$	962.46
				Contrib to Canataates/Pollice Coordinated Party Expenditud			
	es (List detailed exp				resj		
A* - Media	B* - Printing	C* - Fund			D - To Anothe	er Cand	lidate
E - Salaries	F* - Equipment						Office Expenses
I - Postage	J - Penalties	K* - Offic	e E	xpenses	Q* - Donation	n to Le	gal Expense Fund
O* - Other				1 6 11 (1)			
* Codes require	e detailed explanati	on in required re	ema	rks field (k)			

No