Use this form for ge	neral report and committee to update information	informat	tion, must be	signed and su	bmitted along with	Yes No other detailed forms		
1. Committee Info					NEW YORK STREET, STREE			
a. Full Name						c. ID Number		
D.J. Haire Election	n Campaign		MERCH KANTA			E9Y038		
b. Mailing Address (in	clude City, State and Zip Code)	EIL / S	Carrie Contra	CENTUR CONTRA				
709-17-Filter Plan					and the Second Second	d. Date Filed		
Fayetteville, NC 2						01/29/2016		
• •						e. Phone Number		
						er i mone i vanioci		
		-0.00						
2. Report Year 3. Period Start Date (m		m/dd/yy) 4. Period (mm/dd/yy)		End Date	5. Treasurer F	rer Full Name		
2015	2015 07/01/15		12	2/31/15	Albert M. Edwards, Jr., CPA			
6. Type of Commi	ttee (Check One)	9. Ty	ne of Repor	t (check o	nly one type of rep	ort from one category)		
Candidate Campaign	Party	Municipal		State/County		Referendum		
Joint Fundraiser	PAC	Organizational			Organizational	Organizational		
Referendum		Thirty-five day			Quarterly	Pre-referendum		
7. Type of Fund	(if applicable, check one)	ın	Pre-primary	.   _	First Plus	Final		
"Booster Fund"		Pre-election			Second	Supplemental Final		
Building Fund			Pre-runoff		Third Plus	Annual		
NC Political Par	Semi-annual			Fourth	Special			
Presidential Election Year Candidates Fund			Mid Year		Semi-annual			
NC Public Campaign Financing Fund			Year End		Mid Year	10. Special Report Name		
Other:			Final		Year End			
8. Number of Fund	lraisers this Report		Special		Final			
					Special			
11. Account Inform	nation		Anna Line		177			
a. Financial Institution Full Name			11. Account Information a. Financial Institution Full Name					
Carter Bank & Trus	st					A STATE OF THE STA		
o. Purpose c. Account Code				b. Purpose		c. Account Code		
Campaign	0							
	d. Period Begin Balance					d. Period Begin Balance		
	\$ 0.00					\$		
CERTIFICATION		H-47-31	LICENT ANALYSIS	Medical partition	SERVER DESCRIPTION			
		with all s	nroviolona o	f Auticle 22 A	in almidin a 4h 4 m a C	ands are commingled with funds for a		
ederal or out-of-stat	te PAC. I further say that the	is report	is complete	true and corre	including that no It	neen trained by the NC State Board of		
Elections according	to Article 163,278.9(k).		1	,		occir trained by the IVE State Board of		
Albert M. E	Edwards, Jr., CPA		u	ant M. le	dwarf Jas	01/29/16		
OD OFFICE VICE	Printed Name of Signer	CHARLES THE STREET	Si	gnature of Appoin	ted Treasurer	Date		
OR OFFICE USE	ONLY			11.	. 1.			
Date Received:	JAN 29 2016		Employee:	11/1	009	Delivery Method		
						Normal Mail		
Date Postmarke	d:		Employee:	Hell Est		Registered Mail		
						Hand Delivered		
Date Scanned:			Employee:			Electronically Filed		
						Signer has not received mandatory training		
Date Data Entere	ed:		Employee:	Per deline		mandatory training		

Amendment

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

Amendment

Detailed Summary

Use this form to summarize all disclosure reporting forms and to total monetary information

1. Committee Full Name (and Fund if applicable)

2. Type of Report

	2. Type of Report Year End		. ID Number	
D.J. Haire Election Campaign	E9Y038			
Start of Election Cycle: January 1,	Total this Reporting Period	Total this Election Cycle		
4) Cash on Hand at Start	\$ 0.0	0.00		
RECEIPTS				
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$	
6) Contributions from Individuals	(CRO-1210)	\$	\$	
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	(CRO-1240)	\$	\$	
11) Other Receipt Sources				
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$	
11b) Contributions from Not-for-Profit Organization	ns (CRO-1250)	\$	\$	
11c) Outside Sources of Income	(CRO-1250)	\$	\$	
12) TOTAL RECEIPTS  (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, and 11c)		\$	\$	
EXPENDITURES				
13) Disbursements				
13a) Operating Expenditures	(CRO-1310)	\$	\$	
13b) Contributions to Candidates/Political Committee	ees (CRO-1310)	\$	\$	
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$	
14) Loan Repayments	(CRO-1420)	\$ 0.0	0.00	
15) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	\$	
16) In-Kind Contributions	(CRO-1510)	\$	\$	
17) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, and 16)		\$ 0.00	0.00	
18) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 17)		\$ 0.00	0.00	
ADDITIONAL INFORMATION				
19) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$		
20) Outstanding Loans (incl. ones from other campaigns	) (CRO-1430)	\$ 20.98	3	
21) Debts and Obligations owed By the Committee	(CRO-1610)	\$		
22) Debts and Obligations owed To the Committee	(CRO-1620)	\$		
23) Account Transfers Within the Committee	(CRO-1720)	\$		
24) Administrative Support	(CRO-1710)	\$	\$	
25) Forgiven Loans	(CRO-1440)	\$	\$	
26) 48-Hour Notice Reports Sum		\$	\$	

## **Outstanding Loans**

				Amer	idment			
Pg	1	of	1		Yes	$\boxtimes$	No	

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable)					2. ID Number
D.J. Haire Election Campaign					E9Y038
3. Lender Information	on	Add		Remove	
a. Full Name, Mailing Ad	ldress & Phone	b. Job T	Title/Profession		d. Comments
(include city, state, & zi	.ip)	Self-e	employed		
D.J. Haire 709-17 Filter Plant D	N.				Control (martildam)
Fayetteville, N.C. 283		c. Empl	loyer's Name/Spe	oific Field	e. Start Date (mm/dd/yyyy)
	, , , , , , , , , , , , , , , , , , ,		The state of the s	tine 2 1.	07/24/14
					f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged		i, Original Loa	an Amount	j. Remaining Loan Balance
0% %	n/a		\$ 100.00		\$ 20.98
k. Full Name of Lending I	Institution	57 JC 187			I. Loan Number
n/a	ACCOUNTY OF THE PARTY OF THE PA		Column to the same		n/a
3. Lender Informatio	on A	Add		Remove	
a. Full Name, Mailing Add	dress & Phone	and the second	Title/Profession		d. Comments
(include city, state, & zi	<b>(p)</b>				
					Description (1997)
		c. Empl	oyer's Name/Spec	oific Field	e. Start Date (mm/dd/yyyy)
			nel 31	life Field	
					f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged		i, Original Loa	n Amount	j. Remaining Loan Balance
%	In occurry a reagen			II Athount	
			\$		\$
k. Full Name of Lending In	nstitution				I. Loan Number
3. Lender Informatio	on A	Add		Remove	
a. Full Name, Mailing Add	dress & Phone	STATE OF THE PARTY	itle/Profession		d. Comments
(include city, state, & zip	ρ)	A			
					e. Start Date (mm/dd/yyyy)
		c. Emple	oyer's Name/Spec	ific Field	e, Start Date (min/dd/yyyy)
			J 2000000000000000000000000000000000000		4.12
					f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged		i, Original Loa	n Amount	j. Remaining Loan Balance
%			\$		\$
k. Full Name of Lending In	nstitution	STREET	ENGELS OF	Yard to City	l. Loan Number
To the territory of the control of t			Marie Paris Spirit		II Donn't Manager
4. Total only this Page		A STATE OF THE STA			\$ 20.98
5. Total of ALL CRO-		\$ 20.98			