						Amen	ament		
Disck,	are Report Cover		1100		 1		Yes	$\boxtimes$	N

Disc: ure Report Cover  Use this form for general report and committee information, must be signed and submitted along with other detailed forms.										
	neral report and committee in to update information	nformation, must be	signed and subr	nitted along with other	er detailed forms.					
1. Committee Infor										
a. Full Name	mation	and the second s		I	c. ID Number					
See the second production										
	ER WHEN WE WORK TOO	GETHER			I Data Filed					
	ude City, State and Zip Code)				d. Date Filed					
517 OAKRIDGE A FAYETTEVILLE,					01/26/2018					
					e. Phone Number					
Т		1 ( 2 ) 1	n 10 /							
2. Report Year	3. Period Start Date (mm/d	d/yy) 4. Period (mm/dd/yy)	End Date	5. Treasurer Full N	lame					
2017	10/24/2017		5/2018	CLINTON STANL	EΥ					
6. Type of Commit	tee (Check One)	9. Type of Report	(check onl	ly one type of report f	rom one category)					
Candidate Camp		Municipal	State/Co		Referendum					
PAC	Referendum	Organizationa		Organizational	Organizational					
Independent Expenditure	Joint Fundraiser	Thirty-five day	y (	Quarterly	Pre-referendum					
Expenditure Legal Expense F	und									
7. Type of Fund	(if applicable, check one)	Pre-primary		First	Final					
Booster Fund"		Pre-election		Second	Supplemental Final					
Building Fund		Pre-runoff			Annual					
		Semi-annual  Mid Yea	.   📙 ,	Fourth Semi-annual	Special					
Other		Year End		Mid Year	10. Special Report Name					
Other:		Final		Year End	To. Special Report Finance					
8. Number of Fund	raisers this Report	Special		Final						
01.1144.00	0		S	Special						
11. Account Inform	nation		11. Account I	Information						
a. Financial Institution			a. Financial Inst	itution Full Name						
BB&T										
b. Purpose	c. Account Code		b. Purpose		c. Account Code					
CAMPAIGN	1									
FUNDS					d. Period Begin Balance					
AND	d. Period Begin Balanc	e	-		u, i criou begin balance					
EXPENDITURES	\$				\$					
CERTIFICATION										
Legrify that the Cou	nmittee or Fund is in compl	iance with all applica	able provisions	of Article 22A, 22B,	& 22D-22M of Chapter 163 of					
the NC General Stat	utes and that no funds are co	ommingled with prol	nibited or other	non-disclosed funds.	I further certify that this report					
	d correct and that I have bee	n trained by the NC	State Board of E	Elections.	11/26/2019					
Denle J. Cullitan 01/26/2018  Singly of mainted Tenguery										
Printed Name of Signer Signature of Appointed Treasurer Date										
FOR OFFICE USE ONLY  Delivery Method										
Date Received:		Employee:			Normal Mail					
Date Postmarke	ed:	Employee:			Registered Mail					
Date 1 ostillare	Date Postmarked: Employee: Hand Delivered Electronically Filed									
Date Scanned:	Name of the last o	Employee:			Signer has not received					
		nagata		·	mandatory training					
Date Data Ente	rea:	Employee:								

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.

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

NC State Board of Elections

CDO 1000

Amendment

Yes

No

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**Detailed Summary**Use this form to summarize all disclosure reporting forms and to total monetary information.

Jse this form to summarize all disclosure reporting forms and to tol  Committee Full Name (and Fund if applicable)  2. Typ	e of Report	ШОПП	ation.	3. ID No	ımber
WE WORK BETTER WHEN WE WORK TOGETHER 2017 I	inal				
Start of Election Cycle: January 1, 201	7	Total this Reporting Perio		Total this  Election Cycle	
4) Cash on Hand at Start		\$	3681.35	\$	0
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	0	\$	0
6) Contributions from Individuals	(CRO-1210)	\$	2,239.70	\$	7,931.40
7) Contributions from Political Party Committees	(CRO-1220)	\$	0	\$	0
8) Contributions from Other Political Committees	(CRO-1230)	\$	0	\$	0
9) Loan Proceeds	(CRO-1410)	\$	0	\$	6,824.00
0) Refunds/Reimbursements To the Committee	(CRO-1240)	\$	0	\$	0
1) Other Receipt Sources					
11a) Interest on Bank Accounts	(CRO-1250)	\$	0	\$	0
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	\$	0	\$	0
11c) Outside Sources of Income	(CRO-1250)	\$	0	\$	0
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$	0	\$	0
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	0	\$	0
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d a	nd 11e)	\$	2,239.70	\$	14,755.40
EXPENDITURES					
(3) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$	5,284.80	\$	13,759.17
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	0	\$	0
13c) Coordinated Party Expenditures	(CRO-1310)	\$	0	\$	0
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	0	\$	0
15) Loan Repayments	(CRO-1420)	\$	0	\$	0
Town the Committee	(CRO-1320)	\$	0	\$	0
	(CRO-1510)	\$	0	\$	0
	nd 17)	\$	5,284.80	\$	13,759.17
I I I I I I I I I I I I I I I I I I		\$	591.26	\$	591.26
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract to ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	0		
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	6,824.		
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$	0		
150 (1 0	(CRO-1620)	\$	0		
	(CRO-1720)	\$	0		
	(CRO-1710)		0	\$	0
	(CRO-1440)	NO.	0	\$	0
<ul><li>26) Forgiven Loans</li><li>27) 48-Hour Notice Reports Sum</li></ul>	(CRO-2220)	\$	0	\$	0
	(CRO-1215)	\$	0	\$	0
28) Contributions to be Refunded  CRO-1100 NC State Board of Elections					August 20

Amendment Yes 🖂 No **Contributions from Individuals** Pg Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used 2. ID Number 1. Committee Full Name (and Fund if applicable) WE WORK BETTER WHEN WE WORK TOGETHER Remove Add 3. Contributor Information

A. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Comments			
Finally Soles				
C. Employer's Name/Specific Field   Soles Automotive   Soles Automot				
Soles Automotive   Soles Autom				
F. Prior   g. Account Code   h. Form of Payment   i. In-Kind Description   j. Date (mm/ddd/yyyy)   k. Amount   l. Marking Address & Phone (include city, state, & zip)   l. Marking Address				
F. Prior   g. Account Code   h. Form of Payment   l. In-Kind Description   j. Date (mm/dd/yyyy)   k. Amount				
Frior   g. Account Code   h. Form of Payment   h. Hi-Kind Description   p. Mack (Manager)   p. Mack (Ma				
	250.00			
3. Contributor Information   Add   Remove				
S. Contributor Information				
A. Full Name, Mailing Address & Phone (include city, state, & zip)				
New Car Sales   New Car Sales   Solution   Skye   Say   Sa				
Solition   Skye   Fayetteville, NC 28303   Solition   Skye   Fayetteville, NC 28303   Solition   Skye   Sk				
C. Employer's Name/Specific Field   Valley Auto World   Valley Auto World   S   500.00				
C.   Election Sum to Date   S   500.00				
Solution	e. Election Sum to Date			
f. Prior g. Account Code h. Form of Payment f. In-Kind Description f				
	500.00			
3. Contributor Information  a. Full Name, Mailing Address & Phone (include city, state, & zip)  Norwood and Mary Lynn Bryan PO Box 24 Fayetteville, NC 28302  f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount f. Prior g. Account Code h. Form of Payment j. In-Kind Description j. Date (mm/dd/yyyy) k. Amount f. Prior g. Account Code j. Prior g				
3. Contributor Information  a. Full Name, Mailing Address & Phone (include city, state, & zip)  Norwood and Mary Lynn Bryan PO Box 24 Fayetteville, NC 28302  6. Employer's Name/Specific Field  7. Employer's Name/Specific Field  8. Solono  1. In-Kind Description				
a. Full Name, Mailing Address & Phone (include city, state, & zip)  Norwood and Mary Lynn Bryan PO Box 24 Fayetteville, NC 28302  f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount in In-Kind Description j. Date (mm/dd/yyy)				
a. Full Name, Mailing Address & Phone (include city, state, & zip)  Norwood and Mary Lynn Bryan  PO Box 24  Fayetteville, NC 28302  f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount 11/12/2017 \$				
Norwood and Mary Lynn Bryan PO Box 24 Fayetteville, NC 28302  f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount 11/12/2017 \$	d, Comments			
Fayetteville, NC 28302  c. Employer's Name/Specific Field  e. Election Sum to Date  f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount  11/12/2017 \$				
Fayetteville, NC 28302  e. Election Sum to Date  \$ 500.00  f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount i. In-Kind Description j. Date (mm/dd/yyy) k. Amount i. In-Kind Description j. Date (mm/dd/yyy) k. Amount i. In-Kind Description j. Date (mm/dd/yyy) k. Date (mm/dd/yyy)				
f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount 11/12/2017 \$				
f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amoun	ection Sum to Date			
f. Prior g. Account Code h. Form of Payment f. III-Kind Description J. 2017				
11/12/2017 \$				
Check This 2017	500.00			
\$				
\$				
4. Total only this Page \$				
5. Total of ALL CRO-1210 Pages	\$			
(This line must be on line 6 of Detailed Summary Page CRO-1100)				
CRO-1210 NC State Board of Elections	April 200			

## Contributions from Individuals Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used 1. Committee Full Name (and Fund if applicable) WE WORK BETTER WHEN WE WORK TOGETHER 3. Contributor Information Amendment Pg 2 of 2 Ves No 2. ID Number Add Remove

	K BETTER WHE									
				Add		Remo	)ve			A
	butor Informatione, Mailing Address &			b. Job Tit			1	d. Comments	ţ	
	city, state, & zip)	. I none		Constru		-,486.57				
Luis Frang										
3057 Maii				c. Employ			eific Field			
Hope Mill	ls, NC 28348			Self Em	nployed					
								e. Election Su	um to Date	
								\$	500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	-Kind Description j. Date (mm/dd/			j. Date (mm/dd/yyy	уу)	k. Amount	
	1	Check					11/1/20	17	\$	500.00
							***************************************		\$	
									\$	
The same of the sa	butor Informatio			Add		Remo	ove			
	ne, Mailing Address &	è Phone		b. Job Tit		sion		d, Comments	s	
(include city, state, & zip)				Auto Sa	ales					
Wayne Br				e Emple	verte Non	10/Sna	cific Field	1		
THE RESERVE OF THE PARTY OF THE	aware Drive				-		ito Sales	1		
Fayetteville, NC 28304				5001			A SAN AND AND AND AND AND AND AND AND AND A	e. Election S	um to Date	
								\$ 250.00		
f. Prior	g. Account Code	h. Form of Payment	i, In-K	L Kind Descrip	ption		j. Date (mm/dd/yy	yy)	k. Amount	
	1	Check					11/06/2017		\$	250.00
									\$	
									\$	
CAN DATE THE PROPERTY OF PARTY AND	butor Informatio			Add		Rem	ove			
	ne, Mailing Address &	& Phone			itle/Profes	ssion		d. Comment	s	
	city, state, & zip)			Attorne	ey			1		
Josh Tom		) VINO DI UD DUC		o Emul	verde No.	10/8	cific Field	1		
	MARTIN LUTHEF OTTE NC 28202	R KING BLVD, PH5			yer's Nan mployed		vine riviu	†		
CHARLC	71 112 INC 20202			Son-El		±0		e. Election S	um to Date	
								\$	239.70	
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Lind Descri	ption		j. Date (mm/dd/yy	yy)	k. Amount	
	1	CreditCard					11/08/2	017	\$	239.70
									\$	
							S-2		\$	
4. Total	l only this Pag	e				11 4		\$		
	of ALL CRO							\$		

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

D.				
21(	hii	rser	nen	TS

Amendment

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No

				_
Pg	1	of	2	L
	-			

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				2. ID Number					
WE WORK BE	WE WORK BETTER WHEN WE WORK TOGETHER									
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)										
	Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures									
4. Payee Inform			Add	Remove						
	ng Address & Phone		b. Coordinated Committee Na	ıme	d. Comments					
(include city, state,	-55									
Imarket										
PO Box 87801			c. Level Registered (Specify)							
Fayetteville, NC	28304		Federal	County:	1					
,			State	Municipality:	e. Election Sum to Date					
				•	\$ 2,550.00					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks					
					Newspaper Ad					
1	Check	A	10/30/2017	\$750.00						
				\$						
4. Payee Inform	ation		Add	Remove						
	ng Address & Phone		b. Coordinated Committee Na		d. Comments					
(include city, state,										
Facebook			1							
1601 S. Californ	nia Ave.		c. Level Registered (Specify)	- Marie Mari						
Palo Alto CA 94			Federal	County:	1					
Talo Alto Ort 5 130 t			State	Municipality:	e. Election Sum to Date					
					A 1000.04					
\$ 1270.84										
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks					
					Social Media					
1	CreditCard	0	11/01/2017	\$261.02	Marketing					
	N. St. 82	-2			Social Media					
1	Debit Card	0	11/08/2017	\$750.93	Marketing					
4. Payee Inform	ation		Add	Remove	8					
	ng Address & Phone		b. Coordinated Committee Na		d. Comments					
(include city, state,	J=1									
Williams Printin										
1033 Bragg Blv			c. Level Registered (Specify)		1					
Fayetteville, NC			Federal	County:						
Tayettevine, ive	, 20301		State	Municipality:	e. Election Sum to Date					
					\$ 853.22					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks					
			-11 100 100 - 200 1000 1000 100		Mailer					
1	DebitCard	В	11/02/2017	\$426.29						
			1.100/05/	4004.15	Mailer					
1	DebitCard	В	11/02/2017	\$995.10						
5. Total only thi	s Раде				\$					
	CRO-1310 Pages				,					
		mary Page CRO-110	0 if Operating Expenses)							
. 10	(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (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)										
	es (List detailed ex	the State of the S	The state of the s							
A* - Media	B* - Printing	C* - Fun		D - To Anot	her Candidate					
E - Salaries	F* - Equipment				g Public Office Expenses					
I - Postage										
O* - Other			20 20 10 10 100 100							
* Codes require	e detailed explanat	ion in required re	emarks field (k)							

Disburseme	ents		Pg	of	Amendment  Yes No				
		from the committe	ee for; operating expenses,						
	coordinated party ex		· · · · · · · · · · · · · · · · · · ·		F				
and the same of th	ull Name (and Fun				2. ID Number				
	TTER WHEN WE		ER						
3. Type of Disbu			RO-1310 forms for each ty	pe of Disbursem	ent.)				
Operating E			didates/Political Committees		ordinated Party Expenditures				
4. Payee Inform			Add	Remove					
	ng Address & Phone		b. Coordinated Committee Na	ame	d. Comments				
(include city, state,									
Benton Card Co									
105 S. Wall Stre	eet		c. Level Registered (Specify)		1				
Benson, NC 275	504		Federal	County:	1				
			State	Municipality:	e. Election Sum to Date				
					\$ 1,453.94				
					\$ 1,453.94				
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks				
1	Debit Card	A	11/03/2017	\$226.31	Yard Signs				
				\$					
4. Payee Inform	  ation		Add	Remove					
	ng Address & Phone		b. Coordinated Committee Na		d. Comments				
(include city, state,									
USPS	ск дру								
106 Oakridge A	venue		c. Level Registered (Specify)		1				
Fayetteville, NC			Federal	County:					
			State	Municipality:	e. Election Sum to Date				
					\$ 490.00				
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks				
1	Debit Card	I	11/03/2017	\$490.00	Postage For Mail				
				\$					
	L.,								
4. Payee Inform			Add	Remove	I Comment				
	ng Address & Phone		b. Coordinated Committee Na	ame	d. Comments				
(include city, state,	& zip)								
WIDU	:1		1 1 D 1 4 1 1 (C 1 1 (C 1 1 (C 1 1 1 C 1 1 C 1 1 C 1 1 C 1 1 C 1 C		-				
1338 Bragg Blv			c. Level Registered (Specify)  Federal	County:	-				
Fayetteville, NC	28301		State	Municipality:	e. Election Sum to Date				
			State	Wallicipanty.					
					\$ 300.00				
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks				
1	Debit Card	A	11/06/2017	\$300.00	Comercial Spot				
				\$					
* *					•				
5. Total only th					\$				
	5. Total of ALL CRO-1310 Pages  (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)								
	2000000 VIII (70)	W-2 508	o if Contrib to Candidates/Politic	ral Comm)	\$				
The state of the s			o if Coordinated Party Expenditu						
	es (List detailed ex								
A* - Media	B* - Printing	C* - Fund		D - To Anoth	er Candidate				
E - Salaries									
I - Postage	J - Penalties		ce Expenses	Q* - Donatio	n to Legal Expense Fund				
O* - Other									

Disbursem		from the committ	Pg ee for; operating expenses,	of	Amendment Yes  No candidate/political		
	coordinated party ex		ee for, operating expenses,	Controllerions to	cuitatute pointeur		
	ull Name (and Fun				2. ID Number		
WE WORK BE	TTER WHEN WE	WORK TOGETH	ER				
3. Type of Disb		se use separate C	RO-1310 forms for each t	And the second s			
Operating E	xpenses	Contributions to Car	ndidates/Political Committees		oordinated Party Expenditures		
4. Payee Inform	nation		Add	Remove			
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee N	ame	d. Comments		
(include city, state,	& zip)						
Hardees	2				4		
5508 Raeford R			c. Level Registered (Specify) Federal		_		
Fayetteville, NC 28304			State	County: Municipality:	e. Election Sum to Date		
			State	withincipanty.	e, Election Sum to Date		
					\$ 27.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
					Campaign Lunch		
1	Debit Card	0	11/06/2017	\$27.00			
				\$			
4. Payee Inform	ation		Add	Remove			
	ng Address & Phone		b. Coordinated Committee N		d. Comments		
(include city, state,	, 52						
Paypal							
2211 North Firs	t Street		c. Level Registered (Specify)				
San Jose, CA 95	5131		Federal	County:			
			State	Municipality:	e. Election Sum to Date		
					\$ 425.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Debit Card	0	11/06/2017	\$425.00	Digital		
1	Deon Card	O .	11/00/2017	\$425.00	Marketing		
				\$			
4. Payee Inform	ation		Add	Remove			
	ng Address & Phone		b. Coordinated Committee N		d. Comments		
(include city, state,							
New Deli							
2153 Valleygate			c. Level Registered (Specify)				
Fayetteville, NC	28304		Federal	County:			
			State	Municipality:	e. Election Sum to Date		
					\$ 22.50		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Debit Card	O	11/08/2017	\$22.50	Campign Lunch		
1	Deon Card	0	11/06/2017	\$22.50	Strategy		
				\$			
5. Total only thi	s Page	Dust News			\$		
	CRO-1310 Pages						
		mary Page CRO-110	0 if Operating Expenses)		· c		
			0 if Contrib to Candidates/Politic		\$		
		The second secon	) if Coordinated Party Expenditu	ires)			
	es (List detailed ex						
A* - Media	B* - Printing	C* - Fund			ner Candidate		
E - Salaries I - Postage	F* - Equipment J - Penalties		cal Party ce Expenses		g Public Office Expenses on to Legal Expense Fund		
O* - Other	· · · · · · · · · · · · · · · · · · ·	1. 5111	on one Kamana	2 Domini			

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

Dispursem	ents				Pg	of	1200	☐ Yes ≥	No.
Use this form to	report expenditures	from the commi	ttee	for; operating exp	enses,	contributions to	candida	ate/political	
committees and	coordinated party ex	cpenditures.							
	Full Name (and Fun							2. ID Number	
	ETTER WHEN WE								
3. Type of Disb		Control of the Contro		0-1310 forms for	- Delivery - Allert - Co.	AND DESCRIPTION OF THE PARTY OF	The second secon		
Operating I		Contributions to C		lates/Political Commi	ttees		Coordinate	d Party Expenditures	
4. Payee Inform				Add		Remove			
	ing Address & Phone		b	. Coordinated Com	nittee N	ame	d. Co	mments	
(include city, state,	& zip)		-						
McDonalds	i		-	I ID 1. 1.	10 V				
3701 Bragg Bly Fayetteville. No			6	. Level Registered (S	pecity)	Country	_		
rayetteville. 140	20301			State	H	County: Municipality:	a Fla	ction Sum to Date	
			-	State	للا	within cipanty.	e, Eie	ction Sum to Date	
							\$ 9	9.74	
f. Account Code	count Code g. Form of Payment h. Purpose Code			i. Date (mm/dd/yyyy) j. Amount			k. Re	quired Remarks	
1	Debit Card	0		11/08/2017		\$12.61		kfast for	
	Don our u			11,00,2017		ψ12.01	Poll	Poll Worker	
						\$			
4. Payee Inform	nation		A	Add		Remove			
a. Full Name, Mail	ing Address & Phone		b	. Coordinated Comr	nittee Na	ame	d. Co	mments	
(include city, state,									
Huske Hardwar	e								
405 Hay St.		c.	Level Registered (S	pecify)					
Fayetteville, NC 28301				Federal County:					
			L	State		Municipality:	e. Ele	ction Sum to Date	
							\$ 3	85.40	
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yy	yy)	j. Amount	k. Red	juired Remarks	
Ī	Debit Card	0		11/08/2017		\$255.46	Elect	ion Night	
	Debit Card	0		11/06/2017		\$233,40	Food		
1	Debit Card	0		11/08/2017		\$65.99			
4. Payee Inform	nation		A	dd		Remove			
a. Full Name, Maili	ng Address & Phone		b.	. Coordinated Comn	nittee Na	ıme	d. Cor	nments	
(include city, state,	& zip)								
Bill Passick									
1508 Powell Str			c.	Level Registered (S	pecify)				
Fayetteville, NO	28306		١Ļ	Federal	Ц	County:			
			L	State		Municipality:	e. Elec	ction Sum to Date	
							\$ 1	00.00	
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yy	y)	j. Amount	k, Req	uired Remarks	
1	Check	0		11/08/2017		\$100.00	Poll	Work	
						\$		<del></del>	
5. Total only th	е Роде						\$		
	CRO-1310 Pages						Ψ		
	line 13a of Detailed Sum	mary Page CRO-11	00 if	Operating Expenses)					
(This line goes in	line 13b of Detailed Sun	00 if	Contrib to Candidate	s/Politic	al Comm)	\$			
	line 13c of Detailed Sum	THE RESERVE AND ADDRESS OF THE PARTY OF THE	-		penditu	res)			
	es (List detailed exp								
A* - Media	B* - Printing	C* - Fur				D - To Anot			
E - Salaries I - Postage	F* - Equipment J - Penalties	G - Polit <b>K* - O</b> ff						Office Expenses	
O* - Other	o - 1 channes	K" - OII	ice E	Apenses		Q" - Donati	ոս ա բեն	gal Expense Fund	
	e detailed evalanati	on in required :	rame	arke field (k)					

Amendment

Disbursem	ents			Pg	of	Amendment Yes No	
Use this form to	report expenditures	from the committe	ee for; operating ex	penses	, contributions to	candidate/political	
committees and	coordinated party ex	xpenditures.	1. 1	•		P. Santa P.	
	Full Name (and Fur					2. ID Number	
	ETTER WHEN WE						
3. Type of Disb Operating I		Contributions to Con	RO-1310 forms for additional communication of the Ro-1310 forms for a result of the Ro-1310 forms for a resu	r each i			
4. Payee Inform		Contributions to Can	Add	mices	Remove	Coordinated Party Expenditures	
	ing Address & Phone		b. Coordinated Com	mittee N		d. Comments	
(include city, state,			Si cooi amarea com	mittee 1	ume	u. comments	
Super King But							
515 North McP	herson Church Rd		c. Level Registered (	Specify)			
Fayetteville, No	2 28303		Federal		County:		
			State		Municipality:	e. Election Sum to Date	
					\$ 15.02		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/y		T	360 V-000 000000	
1. Account Code	i. Account code g. Form of Payment in Turpose code			/уу)	j. Amount	k. Required Remarks	
1	Debit Card	0	11/01/2017		\$15.02	Campaign Close food	
						Close 1000	
					\$		
4. Payee Inform	nation		Add		Remove		
a. Full Name, Maili	ing Address & Phone		b. Coordinated Com	mittee N	ame	d. Comments	
(include city, state,	& zip)	responsible and the second					
Facebook	£						
1601 S Californ	CONTROL CONTROL CONTROL		c. Level Registered (S	Specify)			
Palo Alto CA 9	1304		Federal Federal	Н	County:		
	State		Municipality:	e. Election Sum to Date			
						\$ 1424.91	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yy	vv)	j. Amount	k. Required Remarks	
1	Debit Card	0				Social Media	
1	Deon Card	0	12/01/2017		\$154.07	Marketing	
					\$		
4 Daysa Info							
4. Payee Inform			Add		Remove		
(include city, state,	ng Address & Phone	ŀ	b. Coordinated Comr	ontee Na	ime	d. Comments	
BBT	a zipj						
3817 Morganton	ı Rd		c. Level Registered (S	pecify)		1	
Fayetteville, NC	28303		Federal		County:	1	
			State		Municipality:	e. Election Sum to Date	
						\$ 7.50	
f Assessed Code	D en	h Dunness Cada	Т.				
f. Account Code	g. Form of Payment	h, Purpose Code	i. Date (mm/dd/yy	yy)	j. Amount	k. Required Remarks	
1	Draft	0	12/21/2017		\$7.50	Bank Service Fee	
						ree	
					\$		
5. Total only thi			\$				
	CRO-1310 Pages						
	line 13a of Detailed Sum					\$	
(This line goes in I	if Contrib to Candidate if Coordinated Party Ex	s/Politica	ıl Comm)				
	es (List detailed exp			репани	es)		
A* - Media	B* - Printing	C* - Fundr			D - To Anoth	er Candidate	
E - Salaries	F* - Equipment	G - Politica	l Party			Public Office Expenses	
I - Postage O* - Other	J - Penalties	K* - Office	Expenses			ion to Legal Expense Fund	
	detailed explanation	on in required ren	narks field (k)				