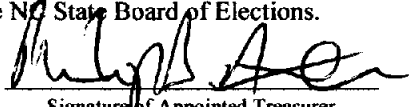


Disclosure Report Cover

Amendment
 Yes No

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 Information			
a. Full Name Committee to Elect Philip Azar		c. ID Number	
b. Mailing Address (include City, State and Zip Code) 917 Monmouth Ave Durham North Carolina 27701		d. Date Filed 6/9/15	
		e. Phone Number 919-491-6002	
2. Report Year 2015	3. Period Start Date (mm/dd/yy) 6/2/15	4. Period End Date (mm/dd/yy) 6/9/15	5. Treasurer Full Name Diane Amato
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)	
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent <input type="checkbox"/> Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser		Municipal <input checked="" type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
7. Type of Fund (if applicable, check one)		State/County	
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:		<input checked="" type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
8. Number of Fundraisers this Report 1		10. Special Report Name	
11. Account Information		11. Account Information	
a. Financial Institution Full Name Bank of North Carolina		a. Financial Institution Full Name	
b. Purpose Campaign expenses	c. Account Code 01	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 0.00		d. Period Begin Balance \$
CERTIFICATION			
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.			
Philip Azar			6/9/15
Printed Name of Signer		Signature of Appointed Treasurer	Date
FOR OFFICE USE ONLY			
IN PERSON		Delivery Method	
Date Received:	JUN 09 2015	Employee:	<input type="checkbox"/> Normal Mail
Date Postmarked:	DURHAM BOE	Employee:	<input type="checkbox"/> Registered Mail
Date Scanned:		Employee:	<input checked="" type="checkbox"/> Hand Delivered
Date Data Entered:		Employee:	<input type="checkbox"/> Electronically Filed
			<input type="checkbox"/> Signer has not received mandatory training

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.

Detailed Summary

Amendment
 Yes No

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		3. ID Number	
Committee to Elect Philip Azar		Organizational			
Start of Election Cycle: January 1, 2015		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 0.00		\$ 0.00	
RECEIPTS					
5) Aggregated Contributions from Individuals	<i>(CRO-1205)</i>	\$		\$	
6) Contributions from Individuals	<i>(CRO-1210)</i>	\$	3,100	\$	3,100
7) Contributions from Political Party Committees	<i>(CRO-1220)</i>	\$		\$	1
8) Contributions from Other Political Committees	<i>(CRO-1230)</i>	\$		\$	
9) Loan Proceeds	<i>(CRO-1410)</i>	\$		\$	
10) Refunds/Reimbursements To the Committee	<i>(CRO-1240)</i>	\$		\$	
11) Other Receipt Sources					
11a) Interest on Bank Accounts	<i>(CRO-1250)</i>	\$		\$	
11b) Contributions from Not-for-Profit Organizations	<i>(CRO-1250)</i>	\$		\$	
11c) Outside Sources of Income	<i>(CRO-1250)</i>	\$		\$	
11d) Legal Expense Fund – Other Sources	<i>(CRO-1270)</i>	\$		\$	
11 e) Exempt Purchase Price Sales	<i>(CRO-1265)</i>	\$		\$	
12) TOTAL RECEIPTS <i>(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)</i>		\$	3,100	\$	3,100
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures	<i>(CRO-1310)</i>	\$		\$	
13b) Contributions to Candidates/Political Committees	<i>(CRO-1310)</i>	\$		\$	
13c) Coordinated Party Expenditures	<i>(CRO-1310)</i>	\$		\$	
14) Aggregated Non-Media Expenditures	<i>(CRO-1315)</i>	\$		\$	
15) Loan Repayments	<i>(CRO-1420)</i>	\$		\$	
16) Refunds/Reimbursements From the Committee	<i>(CRO-1320)</i>	\$		\$	
17) In-Kind Contributions	<i>(CRO-1510)</i>	\$		\$	
18) TOTAL EXPENDITURES <i>(Add lines 13a, 13b, 13c, 14, 15, 16 and 17)</i>		\$	0.00	\$	0.00
19) Cash on Hand at End <i>(Add lines 4 and 12 together, then subtract line 18)</i>		\$	3,100	\$	3,100
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees	<i>(CRO-1330)</i>	\$		\$	
21) Outstanding Loans (incl. ones from other campaigns)	<i>(CRO-1430)</i>	\$		\$	
22) Debts and Obligations owed By the Committee	<i>(CRO-1610)</i>	\$		\$	
23) Debts and Obligations owed To the Committee	<i>(CRO-1620)</i>	\$		\$	
24) Account Transfers Within the Committee	<i>(CRO-1720)</i>	\$		\$	
25) Administrative Support	<i>(CRO-1710)</i>	\$		\$	
26) Forgiven Loans	<i>(CRO-1440)</i>	\$		\$	
27) 48-Hour Notice Reports Sum	<i>(CRO-2200)</i>	\$		\$	
28) Contributions to be Refunded	<i>(CRO-1215)</i>	\$		\$	

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)					2. ID Number	
Committee to Elect Philip Azar						
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Philip Azar 917 Monmouth Ave Durham North Carolina 27701			Attorney		Candidate Check deposited to start committee account	
			c. Employer's Name/Specific Field			
			Self		e. Election Sum to Date	
					\$ 3,100	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	01	Check		6/3/15		\$ 3,100
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
			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
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
			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
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
4. Total only this Page					\$ 3,100	
5. Total of ALL CRO-1210 Pages					\$ 3,100	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						