

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			c. ID Number	
COMMITTEE TO ELECT PHILIP AZAR				
b. Mailing Address (include City, State and Zip Code)			d. Date Filed	
917 MONMOUTH AVENUE DURHAM, NC 27701			09/28/2015	
			e. Phone Number	
Report Year	1. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name	
2015	08/26/2015	09/21/2015	DIANE AMATO	
Type of Committee (Check One)		Type of Report (check only one type of report from any category)		
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> Referendum <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Legal Expense Fund		Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input checked="" 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		
		State/County <input 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		
		Referendum <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special		
Type of Fund (if applicable check one)		10. Budget Report Name		
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:				
Number of Fundraising This Report				
1				
Account Information		Account Information		
a. Financial Institution Full Name		a. Financial Institution Full Name		
BANK OF NORTH CAROLINA				
b. Purpose	c. Account Code	b. Purpose	c. Account Code	
CAMPAIGN EXPENSES	01	IN PERSON		
	d. Period Begin Balance	SEP 28 2015	d. Period Begin Balance	
	\$ 7394.80	DURHAM BOE	\$	
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				
DIANE AMATO		Diane M. Amato		09/28/2015
Printed Name of Signer		Signature of Appointed Treasurer		Date
FOR OFFICE USE ONLY				
Date Received	9/28/15	Employee	m.p.	
Date Postmarked		Employee		
Date Scanned		Employee		
Date Data Entered		Employee		
		Delivery Method		
		<input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input checked="" type="checkbox"/> Electronically Filed		
		<input type="checkbox"/> Signer has not received mandatory training		
<p>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.</p> <p>You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.</p>				

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	2015 Pre-Primary		
Start of Election Cycle: January 1, <u>2015</u>		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 7,394.80	\$ 0.00
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 425.00	\$ 1,641.00
6) Contributions from Individuals	(CRO-1210)	\$ 2,600.00	\$ 23,125.00
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0.00	\$ 0.00
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0.00	\$ 0.00
9) Loan Proceeds	(CRO-1410)	\$ 0.00	\$ 0.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$ 0.00	\$ 0.00
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0.00	\$ 0.00
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$ 0.00	\$ 0.00
11c) Outside Sources of Income	(CRO-1250)	\$ 0.00	\$ 0.00
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$ 0.00	\$ 0.00
11e) Exempt Purchase Price Sales	(CRO-1265)	\$ 0.00	\$ 0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		\$ 3,025.00	\$ 24,766.00
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 8,270.00	\$ 22,455.65
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 0.00	\$ 0.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0.00	\$ 0.00
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 56.93	\$ 217.48
15) Loan Repayments	(CRO-1420)	\$ 0.00	\$ 0.00
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$ 0.00	\$ 0.00
17) In-Kind Contributions	(CRO-1510)	\$ 0.00	\$ 0.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 8,326.93	\$ 22,673.13
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 2,092.87	\$ 2,092.87
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 0.00	
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$ 0.00	
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$ 0.00	
24) Account Transfers Within the Committee	(CRO-1720)	\$ 0.00	
25) Administrative Support	(CRO-1710)	\$ 0.00	\$ 0.00
26) Forgiven Loans	(CRO-1440)	\$ 0.00	\$ 0.00
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$ 0.00	\$ 0.00
28) Contributions to be Refunded	(CRO-1215)	\$ 0.00	\$ 0.00

Aggregated Contributions from Individuals

Page 1 of 1

Amendment

Yes No

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

1. Committee Full Name (and Fund if applicable)		2. ID Number			
COMMITTEE TO ELECT PHILIP AZAR					
3. Contribution Information					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		09/15/2015	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		09/05/2015	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		08/31/2015	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		08/26/2015	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		08/31/2015	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		09/20/2015	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		09/07/2015	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		08/26/2015	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		09/17/2015	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		09/17/2015	\$ 50.00
4. Total only this Page					\$ 425.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$ 425.00

CRO-1205

NC State Board of Elections

April 2007

Contributions from Individuals

Amendment

Yes No

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 Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) SOLANGE ABUNASSAR 1 LINCOLN PLZ NEW YORK, NY 10023	b. Job Title/Profession PHYSICIAN	d. Comments
	c. Employer's Name/Specific Field RETIRED	
	e. Election Sum to Date \$ 150.00	

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		09/07/2015	\$ 150.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) ESTEBAN BORTIRI 916 MARKHAM AVE DURHAM, NC 27701	b. Job Title/Profession SCIENTIST	d. Comments
	c. Employer's Name/Specific Field SYNGENTA	
	e. Election Sum to Date \$ 150.00	

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	Credit Card		08/26/2015	\$ 150.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) JAMES BOYD 4027 SWARTHMORE RD DURHAM, NC 27707	b. Job Title/Profession REALTOR	d. Comments
	c. Employer's Name/Specific Field REAL ESTATE ASSOCIATES INC	
	e. Election Sum to Date \$ 100.00	

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		09/11/2015	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page \$ 400.00

5. Total of ALL CRO-1210 Pages \$ 2,600.00

Contributions from Individuals

Amendment

Yes No

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 type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
MICHELLE DEKKER 409 WATTS ST DURHAM, NC 27701		RETIRE			
		c. Employer's Name/Specific Field			
		RETIRE			
		e. Election Sum to Date			
		\$ 100.00			
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		09/10/2015	\$ 100.00
<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		
THOMAS DEWEY 1150 5TH AVE APT 9E NEW YORK, NY 10128		ATTORNEY			
		c. Employer's Name/Specific Field			
		DEWEY PEGNO KRAMARSKY LLP			
		e. Election Sum to Date			
		\$ 250.00			
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		09/07/2015	\$ 250.00
<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		
PARA DRAKE 1007 VICKERS AVE DURHAM, NC 27707		RETIRE			
		c. Employer's Name/Specific Field			
		RETIRE			
		e. Election Sum to Date			
		\$ 100.00			
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		09/11/2015	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 450.00
5. Total of ALL CRO-1210 Pages					\$ 2,600.00
<i>(This form and instructions are available on our website at www.ncsbe.com)</i>					

Contributions from Individuals

Amendment

Yes No

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 type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
THOMAS GALLOWAY 101 E CHAPEL HILL ST DURHAM, NC 27701		INDIVIDUAL INVESTOR			
		c. Employer's Name/Specific Field			
		SELF EMPLOYED			
		e. Election Sum to Date			
		\$ 1,000.00			
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		09/11/2015	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. 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		
RUBEN GONZALEZ 215 WILLIAM PENN PLZ APT 1303 DURHAM, NC 27704		PAINTER			
		c. Employer's Name/Specific Field			
		SELF			
		e. Election Sum to Date			
		\$ 100.00			
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		09/11/2015	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
5. 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		
BLAIR KENDALL 3430 LOCHNORA PKWY DURHAM, NC 27705		SR. DIRECTOR			
		c. Employer's Name/Specific Field			
		GEHRICHER SOLAR			
		e. Election Sum to Date			
		\$ 600.00			
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		09/19/2015	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 700.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1210)</i>					\$ 2,600.00

Contributions from Individuals

Amendment

Yes No

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 type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (Include city, state, & zip)			b. Job Title/Profession	d. Comments		
JOHN MARTIN 401 E TRINITY AVE DURHAM, NC 27701			PROFESSOR			
			c. Employer's Name/Specific Field			
			RETIRED	e. Election Sum to Date		
				\$ 100.00		
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		09/07/2015	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. 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		
ROBERT MOLINET 3110 HIGHGATE DR GERMANTOWN, TN 38138			GLOBAL CHIEF COMPLIANCE			
			c. Employer's Name/Specific Field			
			FED EX CORPORATION	e. Election Sum to Date		
				\$ 100.00		
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		09/11/2015	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
5. 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		
SARAH MUSSER 1001 W TRINITY AVE DURHAM, NC 27701			GRAD STUDENT			
			c. Employer's Name/Specific Field			
			GRAD STUDENT	e. Election Sum to Date		
				\$ 200.00		
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		09/21/2015	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
6. Total only this Page					\$ 400.00	
7. Total of ALL CRO-1210 Pages					\$ 2,600.00	

Contributions from Individuals

Amendment
 Yes No

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 type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
FRANK READE 3007 SHENANDOAH AVE DURHAM, NC 27704			PLUMBER			
			c. Employer's Name/Specific Field			
			SELF		e. Election Sum to Date	
					\$ 100.00	
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		08/27/2015	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. 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	
JOHN SWANSEY 110 N BUCHANAN BLVD DURHAM, NC 27701			DESIGNER AND ENTREPRENEUR			
			c. Employer's Name/Specific Field			
			TEKWEAR		e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	01	Credit Card		08/28/2015	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
5. 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	
LEE ANN TILLEY 1010 WEST MARKHAM DURHAM, NC 27701			OFFICE MGR			
			c. Employer's Name/Specific Field			
			ACME PLUMBING		e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	01	Credit Card		09/21/2015	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
6. Total only this Page					\$ 300.00	
7. Total of ALL CRO-1210 Pages					\$ 2,600.00	
<i>(This line must be on last page of Detailed Summary Page CRO-1100)</i>						

Contributions from Individuals

Amendment

Yes No

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 type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
HEATHCOTE WALES PO BOX 303 WILSON, WY 83014			ATTORNEY			
			c. Employer's Name/Specific Field GEORGETOWN UNIVERSITY LAW CENTER			
			e. Election Sum to Date			
					\$ 250.00	
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		08/26/2015	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. 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	
MAYME WEBB 4721 CARMEN LANE DURHAM, NC 27707			SENIOR NEIGHBORHOOD COORDINATOR			
			c. Employer's Name/Specific Field DUKE UNIVERSITY			
			e. Election Sum to Date			
					\$ 100.00	
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		08/26/2015	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
5. Total only this Page					\$ 350.00	
6. Total of ALL CRO-1210 Pages <i>(This does not include 6 of Detailed Summary Page CRO-1210)</i>					\$ 2,600.00	

Disbursements

Amendment
 Yes No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Run (if applicable))						2. ID Number	
COMMITTEE TO ELECT PHILIP AZAR							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement)</i>							
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
CAPITOL PROMOTIONS INC PO BOX 231 GLENSIDE, PA 19038							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County:			
				<input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 2,195.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
01	Check	B	09/09/2015	\$ 2,195.00	YARD SIGNS		
				\$			
5. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
SARA DAVIS 2607 CHAPEL HILL RD APT B DURHAM, NC 27707							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County:			
				<input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 625.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
01	Check	O	09/16/2015	\$ 625.00	PHOTO SHOOT		
				\$			
6. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
STEVE HOPKINS NC							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County:			
				<input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 250.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
01	Check	O	09/15/2015	\$ 250.00	PLACING YARD SIGNS AROUND THE CITY		
				\$			
7. Total only this Page						\$ 3,070.00	
8. Total of ALL CRO-1310 Pages						\$ 8,270.00	
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>							
<i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>							
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>							
9. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							

Disbursements

Amendment Yes No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and fund if applicable) COMMITTEE TO ELECT PHILIP AZAR						2. CRO Number
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of disbursement)						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Pages Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
TARGETED PERSUASION 206 NEW BERN PLACE RALEIGH, NC 27601 (919) 819-2138				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 16,350.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
01	Check	0	08/26/2015	\$ 3,200.00	CONSULTING	
01	Check	0	09/04/2015	\$ 2,000.00	CONSULTING	
5. Total only this Page						\$ 5,200.00
6. Total of ALL CRO-1310 Pages (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)						\$ 8,270.00
7. Purpose Codes (List detailed expenditure codes in (k) above)						
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund
O* Other						
* Codes require detailed explanation in required remarks field (k)						

Aggregated Non-Media Expenditures

Amendment
 Yes No

Optional form used to report NC Non-Media Expenditures of \$50 or less.

COMMITTEE TO ELECT PHILIP AZAR						
C. Expenditure Information						
a. Control	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Draft	K	08/26/2015	\$ 33.99	CHECKS
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Electric Funds Tran	C	08/26/2015	\$ 3.95	CREDIT CARD FEES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Electric Funds Tran	C	09/02/2015	\$ 13.72	CREDIT CARD FEES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Electric Funds Tran	C	09/09/2015	\$ 5.27	CREDIT CARD FEES
4. Total only this Page					\$	56.93
5. Total of ALL CRO-1315 Pages					\$	56.93
<i>(This document is one of a limited number of pages CRO-1315)</i>						
E - Salaries		B* - Printing		D - To Another Candidate		
		J - Penalties		G - Political Party		
O* - Other					Q* - Donations to Legal Expense Fund	
* Codes require detailed explanation in required remarks field (g)						