Disclosure Re	port Cover					Amendment  No □ No
	neral report and committee	information, n	nust be signed	and sub		
White will be the second of th	to update information				100	
1. Committee Inform	mation					_
a. Full Name	1: P 1: 1					c. ID Number
(CHL-PAC)	hip Political Action Comm	ittee				STA-135AH3-C-001
	ude City, State and Zip Code)					d. Date Filed
3 Mount Bolus Rd. Chapel Hill, NC 275	514					10/27/2107
						e. Phone Number
			0			919-960-2589
2. Report Year	3. Period Start Date (mm/c	Id/VV)	Period End Da n/dd/yy)	ite	5. Treasurer Full 1	Name
2017	1/1/2107		9/26/2017		E. Thomas Henkel	
6. Type of Committee		9. Type of I	Report (c		y one type of report j	from one category)
Candidate Campai		Municipal		State/Co		Referendum
PAC Independent	Referendum		nizational		Organizational	Organizational
Expenditure  Legal Expense Fu	Joint Fundraiser	Thirty	-five day	Ç	Quarterly	Pre-referendum
7. Type of Fund	(if applicable, check one)	Pre-pr	imary		First	Final
Booster Fund"		Pre-ele	ection		Second	Supplemental Final
Building Fund		Pre-ru	noff		Third	Annual
		Semi-	annual Mid Year		Fourth	Special
Other:			ear End		emi-annual Mid Year	10. Special Report Name
		Final	Car End	H	Year End	10. Special Report Name
8. Number of Fundr	aisers this Report	Specia	ıl	F	inal	
	0				pecial	
11. Account Informa			11. Ac	count Ir	nformation	
a. Financial Institution Fu	ull Name		a. Finar	icial Instit	tution Full Name	
Wells Fargo Bank						
b. Purpose  Maintain	c. Account Code		b. Purp	ose		c. Account Code
funds to	one	e				
support	d. Period Begin Balance		1004217			d. Period Begin Balance
CHALT						
activities	\$ 753.66					\$
CERTIFICATION						
the NC General Statut is complete, true and o	es and that no funds are co correct and that I have been	mmingled wit	h prohibited or	r other no	on-disclosed funds. I	& 22D-22M of Chapter 163 of further certify that this report
E. Thomas H	Printed Name of Signer		Signature of	nex		0/27/2017
FOR OFFICE USE ON			Signature of	Appointe	d Treasurer	Date
Date Received:		Emple	oyee:	- 3.8		elivery Method Normal Mail
Date Postmarked:		Emple	oyee:		AIL L	Registered Mail Hand Delivered
Date Scanned:		Emple			3 0 2017	Electronically Filed Signer has not received
Date Data Entered	d:	Emplo	oyee:	DURHA	AM BOE	mandatory training
Please Note: This				1 .	ha aannaittaa addaaa	tuoosiuman ossistent tuoosiuman
	form cannot be used to ame		e information s formation, or a			s, treasurer, assistant treasurer,

Amendment

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

Amendment  $\boxtimes$ Yes No

1. Committee Full Name (and Fund if applicable)  Chapel Hill Leadership Political Action Committee Full Name (and Fund if applicable)	Type of Repo	rt	3. ID Number
Chapel Hill Leadership Political Action Committee (CHL-PAC)	5-Day		STA-135AH3-C-001
Start of Election Cycle: January 1,	2017	Total this Reporting Pe	2 otal this
4) Cash on Hand at Start		\$ 753.66	Priod Election Cycle  \$ 753.66
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 135.00	\$ 135.00
6) Contributions from Individuals	(CRO-1210)	\$ 982.50	\$ 1512.50
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			<b>V</b> 0.00
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
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$ 0.00	\$ 0.00
2) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d	d and 11e)	\$ 1332.50	\$ 1647.50
EXPENDITURES			Ψ 1047.50
3) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 350.37	\$ 396.76
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 0.00	\$ 0.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0.00	\$ 0.00
Aggregated Non-Media Expenditures	(CRO-1315)	\$ 0.00	\$ 0.00
6) Loan Repayments	(CRO-1420)	\$ 0.00	\$ 0.00
Refunds/Reimbursements From the Committee	(CRO-1320)	\$ 0.00	\$ 0.00
) In-Kind Contributions	(CRO-1510)	\$ 162.50	\$ 162.50
TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 a		\$ 512.87	\$ 559.26
Cash on Hand at End (Add lines 4 and 12 together, then subtract li	ne 18)	\$ 1573.29	\$ 1841.90
DDITIONAL INFORMATION			¥ 10-11.70
Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0.00	
Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 0.00	
Debts and Obligations owed By the Committee	(CRO-1610)	\$ 0.00	
Debts and Obligations owed To the Committee		\$ 0.00	
Account Transfers Within the Committee		\$ 0.00	
Administrative Support		\$ 0.00	\$ 0.00
Forgiven Loans		\$ 0.00	\$ 0.00
48-Hour Notice Reports Sum	F		\$ 0.00
Contributions to be Refunded	-		\$ 0.00
O-1100 NC State Board of Elections	(CRO-1215) \$	0.00	\$ 0.00

		om Individuals adividual contributions		I 50 or contributions un	Pg nder \$	_1 of 50 if form CF	RO 1205 is		es N
1. Com	mittee Full Nam	e (and Fund if applic	able)				2. ID N		
Chapel	Hill Leadership P	Political Action Comm	ittee				S	ГА-135АН3	-C-001
	ributor Informa			Add 🔲 R	Remov	e			
	ame, Mailing Addres	s & Phone		b. Job Title/Profession	on		d. Comm	ents	
	le city, state, & zip)								
	Miller & David Ki akeshore Dr.	el					-		
	Hill, NC 27514			c. Employer's Name/Self-Employed	Specifi	c Field	-		
919-967				Sen-Employed			a Floation	Sum to Date	
			20				\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-	Kind Description	j.	Date (mm/dd/yy	ууу)	k. Amoun	t
	one	Check				07/19/2	017	\$	100.00
								\$	
								\$	
3. Conti	ributor Informat	ion	$\boxtimes$	Add Re	emove				
a. Full Na	me, Mailing Address	& Phone		b. Job Title/Profession			d. Comme	nts	
	e city, state, & zip)					-			
Rudy Ju									
408 Lyo				c. Employer's Name/S	Specific	Field			
_	Chapel Hill, NC 27514 119 929 0592			Retired			e. Election Sum to Date		
117 727	0372						e. Election	Sum to Date	
							\$	250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Description	j. I	Date (mm/dd/yy	yy)	k. Amount	
	one	PayPal				07/24/20	)17	\$	250.00
								\$	
								\$	
	ibutor Informati		$\boxtimes$	Add Re	move				
	ne, Mailing Address	& Phone		b. Job Title/Profession	1		d. Commen	its	
	city, state, & zip)								
Joan Gui 246 Glan	•			a Familian I. Nam (G		D: 11			
	ill, NC 27514			c. Employer's Name/Specific Field  Retired					
919-810-				Retired		+	e. Election Sum to Date		
						İ	\$	50.00	
. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	j. D	ate (mm/dd/yyy	y)	k. Amount	
	one	Cash				07/26/20	17	\$	50.00
								\$	
						***************************************		\$	
. Total	only this Page	e					\$		400.00
	of ALL CRO								
(This line	must be on line 6 of	Detailed Summary Page Cl	20-1100				\$		982.50

Amendment

		om Individuals  dividual contributions		50 or cont	P ributions un	g dan 6	2 of	f4	∑ Ye	es No
1. Con	mittee Full Name	e (and Fund if applic	able)	o or com	ributions un	ider 5	530 II form CI	2. ID N	The same of the sa	
		olitical Action Comm		***************************************					TA-135AH3-	C-001
	tributor Informat			Add	□ p.	emov	VA.		111 15511115	C-001
	ame, Mailing Address				Title/Professio		VE	d. Comm	ents	
(inclu	de city, state, & zip)							u. comm	ciito	
	Henschel									
	nory Dr.				oyer's Name/S	Specif	ic Field			
	Hill, NC 27517 9-8032			Retire	d					
717-72	37-0032							e. Election	n Sum to Date	
								\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-	Kind Descr	iption	j.	Date (mm/dd/y	ууу)	k. Amount	
Ш	one	Check					08/15/2	017	\$	100.00
									\$	
						1			\$	
3. Cont	ributor Informati	ion		Add	□ Re	move	e			
	nme, Mailing Address	& Phone			itle/Profession	and all the second		d. Comme	nts	
	e city, state, & zip)									*
Sharon I	Epstein vidence Glen									
	Hill, NC 27514			Retired	yer's Name/S	pecific	c Field			
919-903				Retifed				a Floation	Sum to Date	
								\$	35.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Kind Descrip	ption	j.	Date (mm/dd/yy	yy)	k. Amount	
	one	Check			-		08/24/20	)17	\$	35.00
									\$	
									\$	
	ibutor Informatio			Add	Rer	nove				
	me, Mailing Address & city, state, & zip)	& Phone		b. Job Tit	le/Profession			d. Commen	its	
(include	city, state, & zip)									
				c. Employ	er's Name/Sp	ecific	Field			
							-	e. Election S	Sum to Date	
2 2000		<b>*</b>						\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-Ki	ind Descrip	tion	j. D	ate (mm/dd/yyy	y)	k. Amount	
Ш									\$	
									\$	
									\$	
1. Total	only this Page	e						\$		135.00
5. Total	of ALL CRO-	-1210 Pages								
(This line	must he on line 6 of 1	Datailed Cummany Base Ci	00 1100					\$		982.50

Amendment

Use this form to repor	t individual contributions	s over \$5	0 or contributions u	nder \$50 if form C	of <u>4</u> CRO 1205 is	not used		
1. Committee Full Na	ame (and Fund if applic	able)			2. ID No			
Chapel Hill Leadershi	p Political Action Comm	ittee				ТА-135АН3-С	C-001	
3. Contributor Inform				Remove				
a. Full Name, Mailing Add			b. Job Title/Profession	on	d. Comme	ents		
(include city, state, & zij Henry Oglesby	))							
1830 N. Lakeshore			c. Employer's Name/	m de maia	_			
Chapel Hill, NC 27514	į.		Retired	Specific Field	_			
919-967-1982			Tiothou		e. Election	n Sum to Date		
					\$	150.00		
f. Prior g. Account Co	de h. Form of Payment	i. In-J	Kind Description	j. Date (mm/dd/y		k. Amount		
one	PayPal			09/07/		\$	150.00	
						\$	55523 VIII.	
						\$		
3. Contributor Inform	ation		Add Re	emove		Ψ		
a. Full Name, Mailing Addr			b. Job Title/Profession		d. Commer	nts		
(include city, state, & zip	)							
Frank Dain 408 Holly Lane								
Chapel Hill, NC 27517		1	c. Employer's Name/S Retired	pecific Field	4			
919-968-2426		1	Reurea		a Flaction	Com to Date		
		-				Sum to Date		
					\$	25.00		
f. Prior g. Account Cod		i. In-K	and Description	j. Date (mm/dd/y	ууу)	k. Amount		
one	PayPal			09/19/2	2017	\$	25.00	
						\$		
						\$		
3. Contributor Informa				move				
<ul> <li>a. Full Name, Mailing Addre (include city, state, &amp; zip)</li> </ul>	ss & Phone	-	b. Job Title/Profession		d. Comment	ts		
Julie McClintock								
614 Beechtree Ct		F	c. Employer's Name/Sp	necific Field	-			
Chapel Hill, NC 27514			Retired	etine Field	-			
019 967-3661					e. Election S	e. Election Sum to Date		
		1			\$	162.50		
				l)	1			
f. Prior g. Account Code	h. Form of Payment	i. In-Kir	nd Description	j. Date (mm/dd/yy		k. Amount		
f. Prior g. Account Code one	h. Form of Payment Check		nd Description  Services	j. Date (mm/dd/yy) 08/31/20	ryy)	k. Amount	162.50	
					ryy)		162.50	
					ryy)	\$	162.50	
	Check				ryy)	\$	162.50 337.50	

Amendment

	torm to report in	dividual contribution	s over \$3	50 or contributions ur	nder \$50 if form (	CRO 1205 i	s not used	es
1. Com	mittee Full Name	e (and Fund if appli	cable)			The second name of the local n	Number	
Chapel I	Hill Leadership P	olitical Action Comm	nittee			5	STA-135AH3-	C-001
	ributor Informat			Add R	temove			
	me, Mailing Address	s & Phone		b. Job Title/Profession		d. Comr	nents	
	e city, state, & zip)							
Helen Ta								
	tington Dr.			c. Employer's Name/	Specific Field			
	Hill, NC 27514			Retired				
919-929-	-3664					e. Electio	on Sum to Date	
						\$	110.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-	Kind Description	j. Date (mm/dd/	уууу)	k. Amount	
	one	PayPal			09/25	/2017	\$	110.00
							\$	
							\$	
	butor Informati			Add Re	emove			
	ne, Mailing Address	& Phone		b. Job Title/Profession	1	d. Comme	ents	
(include	city, state, & zip)				.,			
				c. Employer's Name/S	pecific Field	e. Election	1 Sum to Date	
						\$		
Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/y	ууу)	k. Amount	
				7			\$	
							\$	
							\$	1530
	outor Informatio				nove			
	ty, state, & zip)	e i none		b. Job Title/Profession		d. Commer	nts	
			-	c. Employer's Name/Sp	ecific Field			
						e. Election	Sum to Date	
Prior	g Assount Cod.	l E co				\$		
	g. Account Code	h. Form of Payment	i. In-Kii	nd Description	j. Date (mm/dd/yy	yy)	k. Amount	
							\$	
							\$	
T-( 1	1 /1						\$	30000
	only this Page					\$		110.00
	of ALL CRO-	1210 Pages				\$		982.50

Amendment

Disburse				Pg 1	Amendment  of 2 Yes
Committees	1 to report expenditur	res from the comm	nittee for; operating expe	enses, contribution	of 2 Yes S to candidate/political
THE RESERVE TO SHARE THE PARTY OF THE PARTY	and coordinated party ee Full Name (and Fi	onpondituios.			Postal Postal
Chapel Hill	Leadership Political A	Action Committee			2. ID Number
3. Type of Di					STA 125 ATTO C
	ing Expenses	Contributions to (	Candidates/Political Committee	ach type of Disbur	rsement.)
4. Payee Info		Contributions to C			Coordinated Party Expenditures
a. Full Name, Ma	Mailing Address & Phone		b. Coordinated Commit	Remove Remove	
(include city, stat	ate, & zip)		Di Coordinated Committee	tee Name	d. Comments
US Postal Ser					
125 S. Estes I			c. Level Registered (Spec	ecify)	-0.72
Chapel Hill, N			Federal [	County:	
800-275-8777	7		State	Municipality:	e. Election Sum to Date
f. Account Code	T	C.1			\$ 98.00
I. Account Couc	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
one	Debit Card	I	07/19/2017		
			0//19/2017	\$49.00	
one	Debit Card	I	09/15/2017	\$49.00	
4. Payee Inform	rmation				
	ailing Address & Phone		Add [	Remove	
include city, state	ming Address & I none		b. Coordinated Committe	ee Name	d. Comments
Envelopes.Con	om		-		
5300 New Hori	rizons Blvd		Torral Degistered (Speci		
Amityville, NY	Y 11707		c. Level Registered (Special		
631-225-3900				County:	
			☐ State 区	Municipality:	e. Election Sum to Date
		,			\$ 128.41
Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	
one	Debit Card	С			k. Required Remarks Remittance
	Doon cara	C	09/05/2017	\$128.41	Envelopes
					Envelopes
Danie Inform				\$	
Payee Inform			Add	] Remove	
Full Name, Main	ling Address & Phone		b. Coordinated Committee	Name	d. Comments
clude city, state, c taples	& zip)		I		
tapies 710 E. Franklin	- C+	ŀ		·	
hapel Hill, NC		-	c. Level Registered (Specify	y)	
19-942-4115	,2/314		Federal	County:	
7 / 12 1112		F	State 🖂	Municipality:	e. Election Sum to Date
				2.4000.00 (0.000.00.000.000.000.000.000.000	\$
account Code	g. Form of Payment	h. Purpose Code	1 To 4 - ( (3.3 ()		
			i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
ie	Debit Card	C	09/18/2017	\$51.56	Paper &
					Envelopes
e	Debit Card	С	09/19/2017	\$52.68	Printing
Total only this	s Page				1 11111
Total of ALL (	CRO-1310 Pages				\$ 330.65
This line goes in li	line 13a of Detailed Summ	nary Page CRO-1100 į	f Operating Expenses)		4
i nis tine goes in til	line 13b of Detailed Summ	nary Page CRO-1100 if	if Contrib to Candidates (D-1:4:	ical Comm)	\$ 350.37
ms tine goes in til	une 13c of Detailed Summ	nary Page CRO-1100 if	f Coordinated Party Fynondite	tures)	
Purpose Codes - Media	es (List detailed expe	enditure code in (h.	a.) above)		
- Media Salaries	B* - Printing F* - Equipment	C* - Fundra	aising	D - To Anothe	er Candidate
Postage	J - Penalties	G - Political K* - Office I	Party	H* - Holding	Public Office Expenses
- Other	o i viinitivo	V Ollice 1	Expenses	Q* - Donation	n to Legal Expense Fund