

Amendment

Disclosure Report Cover

	or general report		information, n	nust be signed and	submitted alor	ا Yes اسا ng with other detail	ed forms.
	form to update in)WUMMUUU		
1. Committee I			Sinnoly Michigan A	arene Karatan Parti bar		alogosek vez elektrik e. Parteka	
a. Full Name	VINNE CONTRACTOR			-57-3165-Ciriating	Service Control of the Control of th	c. ID Number	Tager 1
James	s Irvina	Neal (ennit	tee		WCQ98	4
b. Mailing Address	s (include City, State					d. Date Filed	<u> </u>
484B	eickhuis	it De				11-21-	u
Kerne	ersville	, NCZ	27284			e. Phone Number	·
				nd Date (mm/dd/yy	15. Treasure	r Full Name	
	10-25	-//	11-	21-11			100000000000000000000000000000000000000
6. Type of Com	mittee (Check C)ne)9	. Type of Rep			ort from one catego	(צמי
Candidate Cam PAC	npaign Part Refe xpenditure Join		Municipal Organizationa Thirty-five day Pre-primary Pre-election	State/County Organiz Quarterl Fir	y ational ly	Referendum Organizational Pre-referendum Final Supplemental Fin	
7 Tyne of Fund	d (if applicable,	check one)	Pre-runoff	Thi		Annual	,
Booster Fund Building Fund			Semi-annual Mid Year	For Semi-an	urth mual	Special	· == menkass
Other:	undraisers this		Year End Final Special	==	d Year ar End	10. Special Repor	rt Name
8. Number of t	nuolaisers mo	Keborr	- Special	Special			ļ
						<u> </u>	
11. Account Inf				11. Account Infor			archanawi chánach Agus an thagas
11. Account Inf	ntion Full Name	Bank					N 1100 227 DE
		. Bank		11. Account Infor		C. Account Code	ADN 1100
a. Financial Institut	ntion Full Name		Balance	11. Account Infor a. Financial Institutio		-	21 <u>P</u>
a. Financial Institut Local Laboratoria b. Purpose	ntion Full Name	c. Account Code	Balance	11. Account Infor a. Financial Institutio		c. Account Code d. Period Begit Balar	2
b. Purpose CERTIFICATI I certify that the of the NC Gener report is completed.	ION Committee or Function Statutes and that the true and correct INIM	c. Account Code // O 6 d. Period Begin \$ / O 0 and is in compliant to funds are out and that I have NEAL	Balance OO nee with all application trained by	a. Financial Institution b. Purpose icable provisions of A prohibited or other in the NC State Board of the N	Article 22A, 22I non-disclosed functions.	c. Account Code d. Period Begit Balar	neel 122 22 163 of that this
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Detailed Summary Use this form to summarize all disclosure reporting forms and to total monetary information

Amendment ☐ Yes □ No

1. Committee Full Name (and Fund if applicable)	2. Type of	Report	
IRving NEA - Commetter	Fia	J41	WC 5984
Start of Election Cycle: January 1, <u>26((</u>	-	Total this Reporting Period	Total this d Election Cycle
4) Cash on Hand at Start		\$ 100-00	\$ 0
RECEIPTS	And the second s		
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$ 820.00	\$ 930.00
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	en an en a mer e paren		
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$
11b) Contributions from Not-For-Profit Organizations		\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	\$
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$.
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,	11d and 11e)	\$ 820.00	\$ 430.00
EXPENDITURES			
13) Disbursements			to the second of the second
13a) Operating Expenditures	(CRO-1310)	\$	\$
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 918.16	\$ 918.16
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$
15) Loan Repayments	(CRO-1420)	\$	\$
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$ 1,84	\$ 1.84
17) In-Kind Contributions	(CRO-1510)	\$	\$ 10.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1:	5, 16 and 17)	\$ 920.0	0 \$ 93.0.00
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	otract line 18)	\$ 0	\$ O
ADDITIONAL INFORMATION			For all the second second second
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	atau kan da kan basa
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$	
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$	
24) Account Transfers Within the Committee	(CRO-1720)	\$	
25) Administrative Support	(CRO-1710)	\$	\$
26) Forgiven Loans	(CRO-1440)	\$	\$
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$	\$
28) Contributions to be Refunded	(CRO-1215)	\$	\$ Angust 2008

		from Individu individual contributi		P _i	g of der \$50 if form C	RO	Amendment Yes No 1205 is not used	
1. Con	nmittee Full Na	me (and Fund if ap	plicable)		dor 450 ir form C		ID Number	
IRVING NEA Comittee							WCO 984	
	ntributor Inform			Add 🔲 Re	emove	· ····		
3	Name, Mailing Add			b. Job Title/Prof		d. (Comments	
(include city, state, & zip) Sales Trucku								
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2	724 Bus	akhust Q			-/	1		
				Glew LAVED			lection Sum to Date	
	-	ville MC	 	Logis ties		\$ 830.00		
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				c. Employer's Na	me/Specific Field	1		
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]			;			e. E	ection Sum to Date	
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f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy	/y)	k. Amount	
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	ributor Informa			Add Rer	nove			
	ame, Mailing Addre le city, state, & zip)	ess & Phone		b. Job Title/Profes	ssion	d. Co	mments	
(menuu	ie city, state, & zip)	 						
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		O-1210 Pages				\$	0) =	
(This lin	ie must be on line 6	of Detailed Summary Pa	ige CRO-1100)	· .		Ψ	00.060	

	· ·		ttee for	operating ex	Pg spenses	o., contribu	_	Amendment Yes No to candidate/political
	Full Name (and Fur							2. ID Number
TRUI	og NEAL -	Committe	ee					WCOPEY
3. Type of Dis	bursement- (<i>Pleas</i>	e use separate C.	RO-131	0 forms for	each ty	pe of Dis	burs	ement.)
Operating Ex		ntributions to Candid	ates/Polit	·			ordina	ted Party Expenditures
4. Payee Infor	CONTRACTOR STATE OF THE STATE O		L	Add	Jan House Charles			Brising the property of the control
a. Full Name, N (include city, state	Mailing Address & Pl , & zip)	ione		b. Coordina	ted Com	mittee Nan	ie	d. Comments
Pura				c: Level Reg	7 · · · ·			
	× 708			Federal State	L [County: Municip	ality:	e. Election Sum to Date
Kerne	rsville no	27284						\$ 918.16
7-7-	g. Form of Payment	h. Purpose Code	i. Date	mm/dd/yyyy)				equired Remarks
1106	Check	B	11.	11.16	\$#9	18.16		Signs
					\$			
4. Payee Infort	nation	en i green service de		Add	Remo	ye'	3/22	
men and the second of the seco	ing Address & Phone			b. Coordinat	ed Com	nittee Nam	е	d. Comments
(include city, sta	te, & zip)							
i				c. Level Regi	stered (S	pecify)	1 1/2	
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4. Payee Inforn	ng Address & Phone			Add	Remo	v _{3-y} 3.7.227		d. Comments
(include city, stat	3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3			n. Coordinate	or Collin	uttee i taint		u. commens
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				c. Level Regis	stered (S		1.00	
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5. Total only thi	s Page				n de per		\$4.7% 2.20	\$ 918.16
(This line goes in (This line goes in	CRO-1310 Pages line 13a of Detailed Sum line 13b of Detailed Sum	mary Page CRO-110	0 if Cont	rib to Candida	tes/Polit			\$ 918.16 \$ 918.16
A CONTROL OF THE PROPERTY AND A SECOND CONTROL O	line 13c of Detailed Sum	NAMES OF TAXABLE PARTY OF THE PARTY.	U KASE BERESER	reconstante la constante de	ьхрепан	ures)	A SHOW	
7. Purpose Co A* - Media	des (Last detailed) B* - Printin			ndraising		D - To	\ not1	ner Candidate
E - Salaries	F* - Equipn			tical Party				g Public Office Expenses
I - Postage	J - Penaltie			fice Expens	ses			on to Legal Expense Fund
O* Other	e programme in the state of the		EECCANDON		-807cm	112 12 40 to 24 57 11		
* Codes require CRO-1310	detailed explanation			field (k)		energiale.	*****	December 2009

Refunds/Rei	mbur	sements From the Cor	nmittee P	a of		Amendment Yes No	
		inds/reimbursements, including c			outo		
		and Fund if applicable)				ID Number	
IRVIN		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				WCO 984	
3. Payee Informat	ion .		Add R	emove	9.00.4		
a. Full Name, Mailing	Address &	& Phone	d. Type of Comm	,, ., ., ., ., , , ,	Th. (Original Receipt Date	
(include city, state,	& zip)		Candidate	PAC	+	1. /	
10.00	100	1/	Referendum	Party	L	11.27.11	
U/MUES 2	1/2/8/	ng NEAR	e. Level Register	ed	i. C	riginal Receipt Amount	
		hust Dr	Federal State	County: Municipality:	\$	820.00	
Keaner	25116	le Mc 27284	f. Purpose Code		j. E	lection Sum to Date	
	~ , ,	7		6	\$ 830.00		
b. Job Title/Profession		c. Employer's Name/Specific Field	g. Comments		k. A	Account Code	
SAles Transp	achoty	- Glew RAKEN hogistes	,		Г	1106	
l. Form of Payment	m. Requ	nired Remarks		n. Date (mm/dd/yy	<u>yy)</u>	o. Amount	
CABh				11.21.11		\$ 1.84	
3. Payee Informati	1,000 N 1, 185.		Add 🔲 Re				
a. Full Name, Mailing		2 Phone	d. Type of Comm	iittee	h. C	Original Receipt Date	
(include city, state, &	k zip)		Candidate	PAC		- ''	
			Referendum	Party	<u> </u>		
			e. Level Registere		i.O	riginal Receipt Amount	
			State	County: Municipality:	\$		
			f. Purpose Code	wumerpanty.	j. E	lection Sum to Date	
					\$		
b. Job Title/Profession		c. Employer's Name/Specific Field	g. Comments		k. A	ccount Code	
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	1					\$	
3. Payee Informati	On		Add 🔲 Re	.I move			
a. Full Name, Mailing A		Phone	d. Type of Comm	A DECEMBER OF THE PROPERTY OF	h O	riginal Receipt Date	
(include city, state, &			Candidate	PAC		riginal Metelpt Date	
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			e. Level Registere		i. Oı	riginal Receipt Amount	
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			f. Purpose Code		j. El	ection Sum to Date	
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						\$	
. Total only this Pa	age		og Maria, grassener i "Jacksen i Sudi Barta de Santa de Santa	'aloguares a mag	\$	1.84	
. Total of ALL CR	O-1320	Pages Detailed Summary Page CRO-1100)		65	\$	1.84	
		lled disbursement code in (f) abo	ve)		(M.1316)		
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P* - Reimburseme		-Kind O* Other					
* Codes require d	etailed o	explanation in required remark	s field (m)				