	g miller frage fra
	Amendment
Disclosure Report Cover	
o Belosur e Report Cover	☐ Yes
[Too this form for compact and committee information	francisco de la constante de l

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 L	nformation	A Comment of the Comment				Astronomic States		o contracts
a. Full Name			The part of the				c. ID Number	
Gene Lowde	er for Commiss	sioner	_		_	_	MCQ5F5	
b. Mailing Address	s (include City, Stat	te and Zip Code)) <u>(</u>		-	7. N. A. J. T. B.	d. Date Filed	
2810 Griffith					NE!			<u></u>
Winston-Sa	alem, NC 27103	3		Was we			e. Phone Number	
							336-760-047	
2 Renort Year	3. Period Start	Note (mm/dd/	△ 4 Period	E-A Date (n	_/AA/vv)	5 Treasur	.4	
2012	4/22/12	Date dime	99) 4. Period i 6/15/		muw _{J,J}	Alice Ew		SAN SECTION OF SECTION
					······································			The second of th
6. Type of Com Candidate Cam	nmittee (Check Conpaign Part		9. Type of Rep Municipal		conly one te/County		ort from one cate Referendum	gory)
PAC	· · =	ferendum	Organizationa		Organizati		Referendum Organizationa	al
Independent Ex		nt Fundraiser	Thirty-five da	ı—	Quarterly		Pre-referendur	
Legal Expense	-	1	Pre-primary	[']	First		Final	11
		, , , , , , , , , , , , , , , , , , ,	Pre-election		Secon		Supplemental	l Final
7. Type of Fund	d (if applicable,	, check one)	Pre-runoff		Third	a 1	Annual	•
Booster Fund			Semi-annual	ļ	Fourt		Special	
Building Fund]/	Mid Yea	_	Semi-annu			
		! '	Year End	.d	Mid		10. Special Rep	port Name
Other:			Final	띭	Year	End		 _
8. Number of Fi	ındraisers uus	Report	Special			,		
					Special			·
11. Account Info			edución i se cuero	11. Accoun				// Notice of
a. Financial Institut	ion Full Name			a. Financial I	institution !	Full Name		
Allegacy]	··		· 	=
b. Purpose		c. Account Code	enindra i nega	b. Purpose	1 × 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	c. Account Code	200
i		C2012	· · · · · · · · · · · · · · · · · · ·				Jong Allows —	5 =
l		d. Period Begin		1		1	d. Period Begin Ba	alañce
·		\$.4,000.00	7439.59	1		1	\$	
CERTIFICATION	ON .	2-14-1-14-X-17-11			A. Philip			5
of the NC Genera		at no funds are c	commingled with	h prohibited or	or other non	n-disclosed fur	B & 22D-22M of Cunds. I further cert	Chapter 163
ALICE EW			Alice	Prvell			6/15	1,2
Pr	rinted Name of Signo	ier	Sig	gnature of Appoi	inted Treas	airer	<u> </u>	<u>/ </u>
FOR OFFICE U	JSE ONLY							
Date Receive	ed: <i>(d</i> /	20/12	Employ	yee: <u>Flut</u>	oySpc	eas 🗖	ivery Method Normal Mail	
Date Postmar	rked:		Employ	yee:		- D	Registered Mail Hand Delivered	l
Date Scanned			Employ	yee:			Electronically F	iled
Date Data En			Employ			- 1	Signer has not re mandatory traini	ing
	assistant	t treasurer, custo	o amend committedian of books of Organization	s information	n, or acco	ount informati		reasurer,

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

Amendment

Yes No

ommittee Full Name (and Fund if applicable) 2. Type of		Report	3. ID Number			
Gene Lowder for Commissioner	Quarter		MCQ5F5			
Start of Election Cycle: January 1,		Total this Reporting Period	Total this d Election Cycle			
4) Cash on Hand at Start		\$ 439.59	\$ 0			
RECEIPTS						
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$			
6) Contributions from Individuals	(CRO-1210)	\$ 1,640.00	\$ 7,340.00			
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	und deut d'année arrent d'année (un man					
11a) Interest on Bank Accounts	(CRO-1250)	\$.09	\$ 3.59			
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$	\$			
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,	<u> </u>	<u> </u>	\$ 7,343.59			
EXPENDITURES						
13) Disbursements	and the present of the second					
13a) Operating Expenditures	(CRO-1310)	\$ 2,071.90	\$ 7,135.81			
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	\$			
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)	\$ 7.78	\$ 7.78			
	(CRO-1510)	\$	\$ 200.00			
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15		\$ 2,079.68	\$ 7,343.59			
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18)	\$ 0	\$ 0			
ADDITIONAL INFORMATION						
	(CRO-1330)	\$				
	(CRO-1430)	\$				
	(CRO-1610)	\$				
THE COLUMN TO A COURSE OF THE PART OF THE COLUMN TO THE CO	(CRO-1620)	\$				
$\frac{1}{2} \left(\frac{1}{2} \left$	(CRO-1720)	\$				
To the state of th	(CRO-1710)	\$	\$			
A STATE OF THE PROPERTY OF THE	(CRO-1440)	\$	\$			
	(CRO-2220)	\$	\$			
28) Contributions to be Refunded	(CRO-1215)	\$	\$			

Conf	tributions fi	rom Individua	ale	pα	1 of 2	Amendment Yes No		
		individual contribution		Pg ontributions unde	<u>1</u> of <u>2</u> er \$50 if form CF			
						2. ID Number		
GE	NE LOWDER	FOR COMMISSION	NER			MCQ5F5		
1	tributor Inform	The contraction of the first of the State of the contraction for publication	凶	Add Ren	nove			
	lame, Mailing Addr			b. Job Title/Profes	sion	d. Comments		
	de city, state, & zip)			CONTROLL	ER ·	·		
	ER W. MAYHE			c. Employer's Nan	ne/Specific Field	1		
	SPRING CREEI STON SALEM,	•			LOWDER, INC			
) O C C C C C C C C C	110 27 100				e. Election Sum to Date		
					·	\$ 750.00		
f. Prior	g. Account Code	h. Form of Payment	i, In-Kind Descrip	tion	j. Date (mm/dd/yyy	yy) k. Amount		
	C2012	CHECK			4/24/12	\$ 500.00		
						\$		
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150 50 110	tributor Inform	E. N. J. B. V. B. V. M. (1997) 1500 1500 1500 1500 1500		Constitution of the section of the con-	nove			
and the second second second	ame, Mailing Addro le city, state, & zip)			b. Job Title/Profes	sion	d. Comments		
	E N. WITTY		<u>un Alban ditence</u>	RETIRED				
	OAKTON DRI\	√E.		c. Employer's Nam	ne/Specific Field			
	MMONS, NC 27		!	PHONE COM	//PANY			
			!			e. Election Sum to Date		
		·	<u> </u>	<u> </u>		\$50.00		
	g. Account Code	h. Form of Payment	i. In-Kind Descript	tion	j. Date (mm/dd/yyy			
	C2012	CHECK			4/26/12	\$ 50.00		
						\$		
						\$		
	ributor Informa			Add Ren	nove			
	ame, Mailing Addre le city, state, & zip)			b. Job Title/Profess SITE DEVELO		d. Comments		
	/IN E. LOWDER					CANDIDATE		
	GRIFFITH ROA			c. Employer's Nam				
WINS.	TON SALEM, N	IC 27103		CHARLES D.	LOWDER, INC	c. Election Sum to Date		
						\$ 4,790.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descript		j. Date (mm/dd/yyy			
	C2012		1. III-WIRG Describe	tion	j. Date (mm/dd/yyy) 5/2/12			
		CHECK		·		\$ 40.00		
	C2012	CHECK			5/7/12 ————————————————————————————————————	\$ 550.00		
		1.				\$		
			J.					
	l al only this Pa	i age kO-1210 Pages		I		\$ 1,140.00		

		from Individua individual contribution		Pg contributions und	· · ·	2 RO 1	Amendment Yes No 1205 is not used
		me (and Fund if app					ID Number
	'	FOR COMMISSION		Althor studyness press over the studyness of the studynes	Carried Street Control of the Contro		ICQ5F5
3. Con	tributor Inform	ation		Add Re	emove		
a. Full N	Name, Mailing Addre	ress & Phone	Become sense,	b. Job Title/Profe	may be a series of the series	d. (Comments
	de city, state, & zip)			OWNER		T	
	AD W. HARREL				ame/Specific Field	4	
	2 BETHEL VIE\ K RIDGE, NC 2				SOLUTIONS	7	
O/u	KIDGE, NO 2.	7310		'	JOEG	e. F	Election Sum to Date
<u> </u>	·———				<u></u>		500.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	ption	j. Date (mm/dd/yy)	уу)	k. Amount
	C2012	CHECK			5/4/12		\$ 500.00
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						_	\$
2.7	tributor Informa	e als de unitables a la citate d'un propriet avec de la reflectif de la citate de l	X	Add Rer	move		
	lame, Mailing Addre	the state of the s		b. Job Title/Profes	ession	d. C	Comments
· (inciua	de city, state, & zip)	<u> </u>		-			
				c. Employer's Nan	me/Specific Field	1	
				<u>.</u>			
			į			e. E	Election Sum to Date
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	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy	/y)	k. Amount
	<u> </u> '			·!		'	\$
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	ributor Informa			Add 🖟 🔲 Ren		kSP	
	ame, Mailing Addre: le city, state, & zip)			b. Job Title/Profes	ssion	d. C	comments
(incluse	e city, state, or Lip)				1	1	!
			1	c. Employer's Nan	ne/Specific Field	-	!
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	al only this Pa					\$	500.00
	The second secon	RO-1210 Pages	CPA 1100)			\$ 1	1,640.00

Othor Doo	aint Carrage				4	Amendment
	eipt Sources		Pg	of	!	☐ Yes ☒ No
		orted on another form.		_		
1. Committee I	ull Name (and Fund	if applicable)	<u>alderförbördete</u>			D Number
Gene Lowde	er for Commissioner				N	MCQ5F5
3. Type of Reco		ise separate CRO-1250		type of Receipt S	Sour	ce.)
X Interest		ibutions from Not-for-Profit			ource	es of Income
4. Contributor				nove		
a. Full Name, Mail (include city, sta	ling Address & Phone		b. Not-for-Profit I	ederal ID #	a. C	Comments
	deral Credit Union		1			
			c. Outside Source	Explanation]	
					0 E	lection Sum to Date
					<u> </u>	
					\$	3.59
f. Account Code	g. Form of Payment	h. In-Kind Description		i. Date (mm/dd/yyy	/y)	j. Amount
C2012	Deposit			4/30/12		\$.07
C2012	Deposit			5/31/12		\$.02
4. Contributor	Information		Add 🔲 Rer	nove		
	ling Address & Phone		b. Not-for-Profit I	ederal ID #	d. C	Comments.
(include city, sta	te, & zip)		1			
			c. Outside Source	Explanation	ł	
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					e. E	lection Sum to Date
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f. Account Code	g. Form of Payment	h. In-Kind Description		i. Date (mm/dd/yyy	(y)	j. Amount
						\$
						\$
4. Contributor	Information		Add Rer	nove		
a. Full Name, Mai	ling Address & Phone		b. Not-for-Profit I	ederal ID#	d. C	Comments
(include city, sta	te, & zip)		_			
			c. Outside Source	Explanation	1	
					L	
					e. E	lection Sum to Date
					\$	
f. Account Code	g. Form of Payment	h. In-Kind Description	!	i. Date (mm/dd/yyy	/y)	j. Amount
						\$
						\$
5. Total only	this Page				\$.09
6. Total of A	LL CRO-1250 Pa	ges			and the second	
(This line goes to	n line 11a of Detailed Sumn	nary Page CRO-1100 if Inte			\$.09
		nary Page CRO-1100 if Not				
CRO-1250	i une 110 of Detauea Sumn	nary Page CRO-1100 if Out. NC State Boa	stae Sources of Inco ard of Elections	me Jamaresa kan ilah b	· E	December 200

Disbursem	nents				Pg	_1 of	2	Amendment Yes	No No	
Use this form to	report expenditures		tee for (operating exp				VICTORY THE PARTY AND THE PROPERTY AND	COMMENTAL CHARACTER	
	coordinated party ex		· same	ene manuto la loga e pagina agric	· nostucial postaria	na Carlos Nacional Makana Varios	on the suggestion		and the state of t	
	Full Name (and Fund		批准经验的				(明)	2. ID Number		
	VDER FOR COMM							MCQ5F5		
	oursement (Please						- ,	A STANTAGE CONTRACTOR AND A STANTAGE AND A		
Operating Exp	nation	ntributions to Candida					rdinat	ed Party Expenditures	25.91 × 1.54.54	
	failing Address & Ph			b. Coordinat		mater or other parts of the building	e	d. Comments	* Control of the	
(include city, state,								POLITICAL AD)	
CLEMMONS]		77 78 3				
P.O. BOX 76				c. Level Regi		(Specify) County:	A* -			
CLEMMONS	, NC 27012			State	ļ	Municipa	ality:	e. Election Sum to Dat	te	
i			-					\$ 540.00		
		T						<u> </u>	 	
f. Account Code	g. Form of Payment			mm/dd/yyyy)		ount 40.00		equired Remarks		
C2012	CHECK	Α .	4/24	/12	\$ 54	40.00	A	DS		
					\$	· .			•	
4. Payee Inform	Control of the contro			Add 🖟 🔲	Rem	ove				
	ing Address & Phone			b. Coordinate	ed Con	nmittee Name	е	d. Comments	1974. A.L.	
(include city, stat		<u> </u>		1				WEBSITE		
MATT BROW	_			c. Level Regis	stered	(Specify)				
	CE HAVEN ROAD	#142		☐ Federal						
WINSTON SA	ALEM, NC 27106			State				e. Election Sum to Date		
			į					\$ 518.34		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Am	ount		quired Remarks		
C2012	CHECK	0	5/2/2	2012	_{\$} 51	8.34	PC	LITICAL WEBSIT	ΓΕ	
			-	:	\$			···· -		
4. Payee Inform	nation			Add 🗆 🗖	Rem	ove				
Constitution to the control of the c	ing Address & Phone	Market Spirit Superior Spirit	4 - A - A - A - A - A - A - A - A - A -	b. Coordinate	a leading to the control of	alian remaind and half with the second	garny, ∞	d. Comments		
(include city, stat		eri Nagilak <u>1901-</u> an dari baran <u>e</u> r	tale a					POLITICAL ART		
KERNERSVII			J	T in 1 Dank	4	<u> </u>	\dashv	· Omition in the		
	NTAIN STREET		ļ	c. Level Regis		(Specify) County:	-			
KERNERSVILLE, NC 27284 Federal							lity:	e. Election Sum to Date	e	
								\$ 463.90	·······	
f. Account Code	- W Pormout	L Disease Code	li Baki ((334	1	1 1 1	n Do		- 12 T	
	g. Form of Payment	h. Purpose Code A	i. Date (2)		j. Amo			quired Remarks LITICAL ADVERT	LIGING	
C2012	CHECK	^	SIGI 12		-	3.50	, `		101140	
					\$					
5. Total only thi	is Page	2 (C. C. E. C.	Carrier of the Const				15/4/2 16/4/3	\$ 1,522.24		
6. Total of ALL	CRO-1310 Pages									
(This line goes in	line 13a of Detailed Sum	mary Page CRO-110	00 if Oper	rating Expense	?S)	PURPLY TONGER AND THE SERVE		\$ 1.522.24		

7. Purpose Codes (List detailed expenditure code in (h.) above) A* - Media B* - Printing

(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)

C* - Fundraising

D - To Another Candidate

E - Salaries

G - Political Party

I - Postage

F* - Equipment

H* - Holding Public Office Expenses

O* Other

J - Penalties

K* - Office Expenses

Q* - Donation to Legal Expense Fund

1,522.24

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

					Amendmen	ı t
Disbursements	Pg	2	of	2	☐ Yes	⊠ No
						and street and a supplementary to the second

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

1. Committee 1	Full Name (and Fur	nd if applicable)	46.67	為的學家的		等的数	2. ID Number
GENE LOV	WDER FOR COMM	MISSISONER					MCQ5F5
3. Type of Disl	Straight and Charles Courses March and	e use separate Cl				burse	ement.)
Operating Exp		ntributions to Candid	ates/Politi	cal Committees	s 🔲 Co	ordina	ted Party Expenditures
4. Payee Infor	and the second to be a second to the second	11 (12) Sec. 141		Carlie Section 1 (Management)	Remove		
	failing Address & Pl	ione		b. Coordinat	ed Committee Nan	ie.	d. Comments
(include city, state			<u> </u>	4			HANDOUTS
	PRINT & IMAGING			a Lorel Posi	stered (Specify)	-	
i	ITRY CLUB ROAD			Federal	County:	•	
WINSTONS	SALEM, NC 27104			State	Municip	ality:	e. Election Sum to Date
					-·· ·		\$ 1,099.32
							\$ 1,099.32
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount		equired Remarks
C2012	CHECK	В	5/7/	12	\$ 549.66	CA	MPAIGN HANDOUTS
					\$		
4. Payee Inform	nation			Add 🔲	Remove		
The state of the s	ing Address & Phone	est anno encos comens special subject (con-	**************************************	Control Control Days Control	ed Committee Nam	e	d. Comments
(include city, sta	te, & zip)						
			-				
					stered (Specify)		
				Federal	County:		
•				State	Municip	ality:	e. Election Sum to Date
							\$
. Account Code	g. Form of Payment	h. Purpose Code	i. Date (nm/dd/yyyy)	j. Amount	k. Re	quired Remarks
		- · · · · · · · · · · · · · · · · · · ·			\$	1	A CONTRACTOR OF THE SECOND CONTRACTOR
			. <u></u>			╁	<u>.</u>
					\$		
1. Payee Inforn		2.有效的数据 (A)		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	Remove	30%	Section Commence of the Commence
	ing Address & Phone			b. Coordinate	d Committee Nam	Р	d. Comments
(include city, stat	te, & zip)		<u>,, (77.5)</u>				
				c Level Regis	tered (Specify)		
	*		1	Federal	County;		
				State		dity:	e. Election Sum to Date
	÷		-				\$
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Account Code	g. Form of Payment	h. Purpose Code	i. Date (r	nm/dd/yyyy)	j. Amount	k. Re	quired Remarks
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					\$		
. Total only th	is Page		Designation of the				\$ 549.66
	CRO-1310 Pages		en e			Se fi	Ψ 0-10.00
and the state of the state of the state of	line 13a of Detailed Sun	mary Page CRO-111	Mild One	atina Evnança			
	line 13b of Detailed Sum					,	\$ 2,071.90
	line 13c of Detailed Sum					´	
	odes (List detailed						
* - Media	B* - Printir			ndraising	D - To	4noth	er Candidate
C - Salaries	F* - Equip	—		tical Party			g Public Office Expenses
- Postage	J - Penaltie	the state of the s		fice Expens			on to Legal Expense Fund
)* Other	S STONE (A.S. S. N. CONTEST STONE STONE) A STONE A VINTE BEST HOMEON CONTEST.	The first of the f		September 100 days a manage accord		a proprieta de la colo	_ ^
Codes require	e detailed explanati	on in required re	marks	field (k)			

D-A-mda/Dain	Lume		<u>-</u> -44~~	4	a.	Amendment
		sements From the Com		,	T vitor	Yes No
		and Fund if applicable)				D Number
		COMMISSIONER		3.00 000.000000	1	MCQ5F5
3. Payee Informatio	מנ		Add 🔲 Re	move	1500 P	
a. Full Name, Mailing A	ddress &	: Phone	d. Type of Comm	the first of the training of prints about a province chain	h. C	Original Receipt Date
(include city, state, & :	zip)		Z Candidate	PAC		6/15/12
MARVIN E. LOV			Referendum e. Level Registere	Party	<u></u>	riginal Receipt Amount
2810 GRIFFITH			Federal	County:	 	
WINSTON-SAL	ĖΜ, Nι	J 27103	State	Municipality:	3	550.00
			f. Purpose Code			lection Sum to Date
			L		\$	4,790.00
b. Job Title/Profession		c. Employer's Name/Specific Field	g. Comments		k. A	ccount Code
SITE DEVELOPM	IENT	CHARLES D. LOWDER, INC	REFUND		(2012
l. Form of Payment		ired Remarks		n. Date (mm/dd/yy	yy)	o. Amount
CHECK	REFL	UND TO CLOSE COMMISSIC	NER ACCOU	NT		\$ 7.78
3. Payee Informatio	2 4 4 1% contain		- British start of the State of the Control of the State	move		
a. Full Name, Mailing Ac	20 March 2015	Phone	d. Type of Commi		h. O	riginal Receipt Date
(include city, state, & z	zip)		Candidate Referendum	PAC Party		
		•	e. Level Registere		i. O	riginal Receipt Amount
ı			Federal	County:	\$	-
ı			State	Municipality:		
			f. Purpose Code		<u> </u>	ection Sum to Date
			J <u></u>		\$	
b. Job Title/Profession	, √y,	c. Employer's Name/Specific Field	g. Comments		k. A	ccount Code
			<u></u>		l _	
. Form of Payment r	m. Requi	ired Remarks		n. Date (mm/dd/yy	yy)	o. Amount
						\$
3. Payee Information	Carter Segment Carter Ca		Marie Contract Contra	nove		an a state of the second second
a. Full Name, Mailing Ad include city, state, & z	and the state of the	Phone	d. Type of Commi Candidate	ttee PAC	h. O	riginal Receipt Date
(Hictory City) Smeet, & a	тр)	<u>a. B. John W. B. Dalam M. Maraya</u>	Referendum	Party		
			e. Level Registered		i. Or	riginal Receipt Amount
		•	Federal State	County: Municipality:	\$	
		!	f. Purpose Code		j. Ek	ection Sum to Date
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Tab Tista/Drofession		- Francisco Nama/Specific Piold	Comments			THE ME SEE STORY OF THE SECOND
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