| Ame | adment |
|-----|--------|
| Ē.  | Ves    |

 $\boxtimes$ No

sclosure Report Cover Se 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                 | · · · · · · · · · · · · · · · · · · ·          |                                       |                         | SYTH COUNTY  |  |  |
|---|---------------------------------------|--|---------------------------------------|-------------------------|--|--|--|
| 1. Committee Information                      |                                       |  |                                       |                         |  |  |  |
| a. Full Name                                  | c. ID Number                          |  |                                       |                         |  |  |  |
| United to Elect Ger                           | man Garcia                            |  |                                       | 2014 30                 | . 11 FN 8CQ175   |  |  |
| b. Mailing Address (inc                       | d. Date Filed-                        |  |                                       |                         |  |  |  |
| 824 Gehring Dr<br>Kernersville, NC 27         | 07/10/2014                            |  |                                       |                         |  |  |  |
|   |                                       |  |                                       |                         | e. Phone Number  |  |  |
|   |                                       |  |                                       |                         | 336-406-7323   |  |  |
| 2. Report Year                                | 3. Period Start Date (mm/d            | d/yy) 4. Period 1<br>(mm/dd/yy)                | End Date                              | 5. Treasurer Full       | Name   |  |  |
| 2014  | 04/20/2014                            | 06/3   | 0/2014                                | Gabriela D. Rocha       |  |  |  |
| 6. Type of Commit                             | tee (Check One)                       | 9. Type of Report                              | (check on                             | ly one type of report j |  |  |  |
| Candidate Camp                                | aign 🗌 Party                          | Municipal                                      | State/C                               |                         | Referendum   |  |  |
| PAC   | Referendum                            | Organizational                                 |                                       | Organizational          | Organizational   |  |  |
| Independent<br>Expenditure<br>Legal Expense F | Joint Fundraiser                      | Thirty-five day                                | y (                                   | Quarterly               | Pre-referendum   |  |  |
| 7. Type of Fund                               | (if applicable, check one)            | Pre-primary                                    |                                       | First                   | Final  |  |  |
| "Booster Fund"                                |                                       | Pre-election                                   |                                       | Second                  | Supplemental Final   |  |  |
| Building Fund                                 |                                       | Pre-runoff                                     |                                       | Third                   | Annual Annual  |  |  |
|   |                                       | Semi-annual                                    |                                       | Fourth                  | Special Special  |  |  |
|   |                                       | Mid Year                                       |                                       | Semi-annual             |  |  |  |
| Other:  |                                       | Year End                                       |                                       | Mid Year                | 10. Special Report Name  |  |  |
|   |                                       | Final 🗌  |                                       | Year End                |  |  |  |
| 8. Number of Fund                             | raisers this Report                   | Special Special                                |                                       | Final                   |  |  |  |
|   |                                       |  |                                       | Special                 |  |  |  |
| 11. Account Inform                            | nation                                | L  | 11. Account I                         | nformation              |  |  |  |
| a. Financial Institution                      |                                       |  | a. Financial Inst                     | itution Full Name       |  |  |  |
| Wells Fargo                                   |                                       |  |                                       |                         |  |  |  |
| b. Purpose                                    | c. Account Code                       |  | b. Purpose                            |                         | c. Account Code  |  |  |
| Fundraising                                   | DO                                    | M  |                                       |                         |  |  |  |
|   | d. Period Begin Balance               |  |                                       |                         | d. Period Begin Balance  |  |  |
|   | \$ 550.00                             |  |                                       |                         | \$   |  |  |
| CERTIFICATION                                 | · · · · · · · · · · · · · · · · · · · |  |                                       |                         |  |  |  |
| I certify that the Cor<br>the NC General Stat | nmittee or Fund is in compli          | mmingled with proh                             | ibited or other,                      | non-disclosed funds.    | & 22D-22M of Chapter 163 of I further certify that this report     |  |  |
| Gabriela Re                                   | ocha                                  | <u> </u>                                       |                                       | 7                       | 7/10/2014  |  |  |
|   | Printed Name of Signer                | S  | ignature of Appoint                   | ed Treasurer            | Date   |  |  |
| FOR OFFICE USE (                              |                                       |  | Λ                                     | Ŧ                       | Delivory Mathed  |  |  |
| Date Received:                                | 7-11-2014                             | Employee:                                      | /woh                                  | <u>Chunn</u>            | Delivery Method<br>Normal Mail<br>Registered Mail                  |  |  |
| Date Postmarke                                | d: <u>7-10-2014</u>                   | Employee:                                      |                                       | [                       | Hand Delivered<br>Electronically Filed                             |  |  |
| Date Scanned:                                 | <u> </u>                              | Employee:                                      |                                       | [                       | <ul> <li>Signer has not received<br/>mandatory training</li> </ul> |  |  |
| Date Data Enter                               | ed:                                   | Employee:                                      | · · · · · · · · · · · · · · · · · · · |                         |  |  |  |
| Please Note: Th                               |                                       | end committee information of books information |                                       |                         | ss, treasurer, assistant treasurer,                                |  |  |
|   |                                       |  |                                       |                         |  |  |  |

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

## **Detailed Summary** Use this form to summarize

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

Amendment

No No

| 1. Committee Full Name (and Fund if applicable)                | 2. Type of Report       | · · · · · · · · · · · · · · · · · · · | 3. ID Number                          |
|--|-------------------------|---------------------------------------|---------------------------------------|
| United to Elect German Garcia                                  | 2 <sup>nd</sup> Quarter | · · · · · · · · · · · · · · · · · · · | 8CQ175                                |
| · · · · · · · · · · · · · · · · · · ·                          |                         |                                       |                                       |
| Start of Election Cycle: January 1,                            | 2014                    | Total this<br>Reporting Period        | Total this<br>Election Cycle          |
| 4) Cash on Hand at Start                                       |                         | \$ 550.00                             | \$ 0.00                               |
| RECEIPTS   |                         | · · · · · · · · · · · · · · · · · · · | • • • • • • • • • • • • • • • • • • • |
| 5) Aggregated Contributions from Individuals                   | (CRO-1205)              | \$                                    | \$                                    |
| 6) Contributions from Individuals                              | (CRO-1210)              | \$ 200.00                             | \$ 549.00                             |
| 7) Contributions from Political Party Committees               | (CR0-1220)              | \$                                    | \$                                    |
| 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                                      |                         |                                       |                                       |
| 11a) Interest on Bank Accounts                                 | (CRO-1250)              | \$                                    | \$                                    |
| 11b) Contributions from Not-for-Profit Organizati              | ions <i>(CRO-1250</i> ) | \$                                    | \$                                    |
| 11c) Outside Sources of Income                                 | (CRO-1250)              | \$                                    | \$                                    |
| 11d) Legal Expense Fund – Other Sources                        | (CRO-1270)              | \$                                    | \$                                    |
| 11 e) Exempt Purchase Price Sales                              | (CRO-1265)              | \$                                    | \$                                    |
| 12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11  | c, 11d and 11e)         | \$ 200.00                             | \$ 849.00                             |
| <b>EXPENDITURES</b>  |                         |                                       |                                       |
| 13) Disbursements  |                         |                                       |                                       |
| 13a) Operating Expenditures                                    | (CRO-1310)              | \$ 357.64                             | \$ 456.64                             |
| 13b) Contributions to Candidates/Political Commis              | ttees (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)              | \$                                    | \$                                    |
| 17) In-Kind Contributions                                      | (CRO-1510)              | \$ 167.59                             | \$ 167.59                             |
| 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1         | 5, 16 and 17)           | \$ 525.23                             | \$ 624.23                             |
| 19) Cash on Hand at End (Add lines 4 and 12 together, then sub | tract line 18)          | \$ 224.77                             | \$ 224.77                             |
| ADDITIONAL INFORMATION   |                         |                                       |                                       |
| 20) Non-Monetary Gifts Given to Other Committees               | (CRO-1330)              | \$                                    |                                       |
| 21) Outstanding Loans (incl. ones from other campaigr          | ns) <i>(CRO-1430</i> )  | \$                                    |                                       |
| 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-2200)              | \$                                    | \$                                    |
| 28) Contributions to be Refunded                               | (CRO-1215)              | \$                                    | \$                                    |

## **Contributions from Individuals**

| <u>1</u> of |
|-------------|
|-------------|

No

| Contributions from Individuals  | Pg    | 1            | of   |
|---|-------|--------------|------|
| Use this form to report individual contributions over \$50 or contributions | under | \$50 if form | 1 CR |

RO 1205 is not used

1

| 1. Committee Full Name (and Fund if applicable) |                                       |                                       |            |                |   |         | 2. ID Number                          |                                       |   |              |
|---|---------------------------------------|---------------------------------------|------------|----------------|---|---------|---------------------------------------|---------------------------------------|---|--------------|
| United to Elect German Garcia                   |                                       |                                       |            |                |   |         | 8CQ175                                |                                       |   |              |
| 3. Contri                                       | ibutor Informatio                     | 200                                   |            | Add            |   | Rem     | ove                                   |                                       |   |              |
| a. Full Name, Mailing Address & Phone           |                                       |                                       |            | b. Job Tit     | le/Profe                                      | ssion   |                                       | d. Comments                           | •   |              |
| (include city, state, & zip)                    |                                       |                                       |            | Attorne        | у   |         |                                       |                                       |   |              |
| Robert E  | wing                                  |                                       |            |                |   |         |                                       |                                       |   |              |
|   | gemoor Ct                             |                                       |            |                |   |         | cific Field                           |                                       |   |              |
| Clemmor   | ns, NC 27012                          |                                       |            | Ewing Law Firm |   |         |                                       |                                       |   |              |
|   |                                       |                                       |            |                |   |         |                                       | e. Election Sum to Date               |   |              |
|   |                                       |                                       |            |                |   |         |                                       | \$                                    | 100.00  |              |
| f. Prior  | g. Account Code                       | h. Form of Payment                    | i. In-K    | and Descrip    | tion  |         | j. Date (mm/dd/yy                     | yy)                                   | k. Amount                                     |              |
|   |                                       | Check                                 |            |                |   |         | 05/02/20                              | )14                                   | \$  | 100.00       |
|   |                                       |                                       | <u> </u>   |                | <u> </u>                                      |         | · · · · · · · · · · · · · · · · · · · |                                       | \$  |              |
|   |                                       |                                       | <u> </u>   |                | <u></u> .                                     |         |                                       | ·····                                 | \$  | <del> </del> |
| 3. Contri                                       | ibutor Informatio                     | n                                     |            | Add            |   | Rem     | ove                                   | · · · · · · · · · · · · · · · · · · · |   |              |
| a. Full Nan                                     | ne, Mailing Address &                 | & Phone                               |            | b. Job Tit     |   | ssion   |                                       | d. Comments                           | <u>،                                     </u> |              |
| (include  | city, state, & zip)                   |                                       |            | Logistic       | cian  |         |                                       |                                       |   |              |
| Juan Mor  |                                       |                                       |            |                |   |         |                                       |                                       |   |              |
|   | nters Glenn Dr                        |                                       |            |                |   |         | cific Field                           |                                       |   |              |
| Plainsbor                                       | o, NJ 08536                           |                                       |            | Logistic       | c Corp  | oration | n                                     |                                       |   |              |
|   |                                       |                                       |            |                |   |         |                                       | e. Election St                        | im to Date                                    |              |
|   |                                       |                                       |            |                |   |         |                                       | \$                                    | 100.00  |              |
| f. Prior  | g. Account Code                       | h. Form of Payment                    | i. In-K    | ind Descrip    | otion   |         | j. Date (mm/dd/yy                     | yy)                                   | k. Amount                                     |              |
|   | · · · · · · · · · · · · · · · · · · · | Moneygram                             |            |                | <u> </u>                                      |         | 6/22/20                               | 14                                    | \$  | 100.00       |
|   | . <u></u>                             |                                       | -          |                |   |         |                                       |                                       | \$  | <u> </u>     |
|   | ,                                     |                                       |            |                | <u>,                                     </u> |         |                                       | <u>,</u>                              | . \$  |              |
| 3. Contri                                       | butor Informatio                      | n                                     |            | Add            |   | Rem     | ove                                   |                                       |   |              |
|   | ie, Mailing Address &                 | k Phone                               |            | b. Job Tit     | le/Profe                                      | ssion   |                                       | d. Comments                           | •   |              |
| (include  | city, state, & zip)                   |                                       |            |                |   |         |                                       |                                       |   |              |
|   |                                       |                                       |            | c. Employ      | er's Na                                       | me/Spe  | cific Field                           |                                       |   |              |
|   |                                       |                                       |            |                |   |         |                                       |                                       |   | <u></u> _    |
|   |                                       |                                       |            |                |   |         | e. Election Sum to Date               |                                       |   |              |
|   |                                       | · · · · · · · · · · · · · · · · · · · | <u>_</u> . |                |   |         |                                       | \$                                    | r   |              |
| f. Prior  | g. Account Code                       | h. Form of Payment                    | i. In-K    | ind Descrip    | tion  |         | j. Date (mm/dd/yy                     | yy)                                   | k. Amount                                     |              |
|   |                                       |                                       | ļ          |                |   |         |                                       |                                       | \$  | <del>.</del> |
|   |                                       | ·<br>·                                | ļ          |                |   |         | · · · · · · · · · · · · · · · · · · · |                                       | \$  |              |
|   | · · · · · · · · · · · · · · · · · · · | !<br>                                 | <u> </u>   |                | <u></u>                                       |         |                                       |                                       | \$  |              |
| 4. Total  | only this Page                        | e                                     |            |                |   |         |                                       | \$                                    |   | 200.00       |
|   | of ALL CRO                            |                                       | 00 1100    |                |   |         |                                       | \$                                    |   | 200.00       |
| (This line                                      | must be on line 6 of 1                | Detailed Summary Page C               | KU-1100)   | }              |   |         |                                       |                                       |   |              |

Amendment 

| Disburseme | nts |
|------------|-----|
|------------|-----|

<u>1</u>

Yes

No

 $\boxtimes$ 

Pg of <u>1</u> Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

| 1. Committee F   | 'ull Name (and Fun  | d if applicable)   |  | inder and the first of the second             | 2. ID Number  |  |
|--|---|--|--|---|---|--|
| United to Elect  | German Garcia   |  | · · · · · · · · · · · · · · · · · · ·  |   | 8CQ175  |  |
| 3. Type of Disb  | ursement (Plea  | ise use separate C   | RO-1310 forms for each ty  | voe of Disbursem                              | ent.)   |  |
| Operating E  |   |  | ndidates/Political Committees  |   | ordinated Party Expenditures  | <u></u>  |
| 4. Payee Inform  |   |  | Add  | Remove  |   |  |
|  | ing Address & Phone   |  | b. Coordinated Committee Na  |   | d. Comments   | <u>. Victoria e e e e</u>  |
|  | • • • • • • • • • • • • • • • • • • •   | [일종 문화 문화 문화]  | B. Cool diante Committee   |   | u. communic   | <u></u>  |
| (include city, state,  |   |  |  |   |   |  |
| Staples Office S   |   |  |  | The first of the second second                | 4   |  |
| 210 Harmon Cr  |   | 1  | c. Level Registered (Specify)  | an a      | -   |  |
| Kernersville, N  | C 27284   |  | Federal  | County:                                       |   |  |
| 336-993-7474   |   |  | State  | Municipality:                                 | e. Election Sum to Date   |  |
|  |   |  |  |   | \$ 92.64  |  |
|  |   |  |  |   | φ 72.04   |  |
| f. Account Code  | g. Form of Payment  | h. Purpose Code  | i. Date (mm/dd/yyyy)   | j. Amount                                     | k. Required Remarks   |  |
|  |   |  |  |   | Business cards  |  |
| DOM  | Check   | В  | 4/26/2014  | \$92.64                                       | & Post cards  |  |
|  | <u> </u>  | <u> </u>   |  |   |   |  |
|  |   |  |  | \$  |   |  |
| 4 Dama Inform  | 1   |  | Add  | Remove  |   | a sure of a  |
| 4. Payee Inform  |   | en State (Seiter) (European<br>The second se | b. Coordinated Committee Na  |   | d. Comments   |  |
| and the second | ng Address & Phone  |  | b, Coordinated Committee Na  | THE CONTRACTOR OF STREET                      |   |  |
| (include city, state,  |   |  |  |   |   | I  |
| Wells Fargo Ba   |   |  |  |   | 4   |  |
| 221 E Mountain   | i St  |  | c. Level Registered (Specify)  |   |   | İ  |
| Kernersville, NO   | C 27284   |  | Federal 🗌  | County:                                       |   |  |
|  |   |  | State  | Municipality:                                 | e. Election Sum to Date   |  |
|  |   | 1  |  |   |   | <u></u>  |
|  |   |  |  |   | \$ 15.00  |  |
| f. Account Code  | g. Form of Payment  | h. Purpose Code  | i. Date (mm/dd/yyyy)   | j. Amount                                     | k. Required Remarks   | <u> </u>   |
| LACCOUR COUL   | g. Polin of Layment   |  | it pare (mm/uu, j j j j j  | J. Zimbani                                    | Bank servic fee   |  |
| DOM  | Auto Draft  | 0  | 5/6/2014   | \$10.00                                       | Dalik Scivic 100  | 1  |
|  |   |  |  | <u>∤                                     </u> | Bank servic fee   |  |
| DOM  | Auto Draft  | 0  | 6/5/2014   | \$5.00  | Bank servic iee   |  |
|  | a la contra de la co | i<br>Litra e su luci di Cara   | n ni∎na denati na nationalitana por ditat  |   | l<br>A na stát start statégické szárásátás a sztrada  | 1-1  |
| 4. Payee Inform  |   |  | Add  | Remove  | d Commonto  |  |
|  | ng Address & Phone  |  | b. Coordinated Committee Na  | me  | d. Comments   |  |
| (include city, state, d  |   |  |  |   |   |  |
| Forsyth County   | Democratic Part   |  |  |   |   |  |
| 1128 Burke St.   |   | [  | c. Level Registered (Specify)  |   |   |  |
| Winston Salem,   | NC 27101  | i  | Federal  | County:                                       |   | 1  |
| 336-724-5941   |   |  | State  | Municipality:                                 | e. Election Sum to Date   |  |
|  |   |  |  |   |   |  |
|  |   |  |  |   | \$  | -  |
| f. Account Code  | g. Form of Payment  | h. Purpose Code  | i. Date (mm/dd/yyyy)   | j. Amount                                     | k. Required Remarks   |  |
|  |   |  |  |   | Votebuilder   |  |
| DOM  | Check   | F  | 6/27/2014  | \$250.00                                      | software  |  |
|  |   |  |  |   | Suitwale  |  |
|  |   |  |  | \$  |   |  |
|  | <u> </u>  | and the second second second second  |  |   | <b>• • • • • • • • • •</b>  |  |
| 5. Total only this   |   |  | <u>e server de la construction de </u> |   | \$ 357.64   |  |
|  | CRO-1310 Pages  |  |  | MUS EVENILLA INTE                             |   |  |
| -  | line 13a of Detailed Sum  |  |  |   | \$ 357.64   |  |
|  | •   | • •  | if Contrib to Candidates/Politica  |   | ф <i>227</i> .01  |  |
|  |   |  | if Coordinated Party Expenditur  | res)  |   |  |
| 7. Purpose Code  | s (List detailed exp  | enditure code in (   | h.) above)   |   |   |  |
| A* - Media   | B* - Printing   | C* - Fund  |  | D - To Another                                |   |  |
| E - Salaries   | F* - Equipment  |  |  |   | Public Office Expenses  | N 45 Z   |
| I - Postage  | J - Penalties   | K* - Office  | e Expenses   | Q* - Donation                                 | ı to Legal Expense Fund   | ļ  |
| O* - Other   | ing<br>Anglan ang Palatakan Manaka  |  |  | alia<br>Amerika sense sense a market          | 1997 - State St | Server l   |
| * Codes require  | detailed explanation  | on in required re  | marks field (k)  |   |   | 1946 - 1947 - 1947<br>1947 - 1947 - 1947 - 1947 - 1947 - 1947 - 1947 - 1947 - 1947 - 1947 - 1947 - 1947 - 1947 - 1947 - 1947 - 1947<br>1947 - 1947 - 1947 - 1947 - 1947 - 1947 - 1947 - 1947 - 1947 - 1947 - 1947 - 1947 - 1947 - 1947 - 1947 - 1947 - |

## **In-Kind Contributions**

1 of Amendment Yes

No No Pg <u>1</u> Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund. Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

| Use CRU-1215 II III-KING Cond Fund if applicable)                |  |   | 2 m                                      | Num                     | her  |  |  |
|--|--|---|--|-------------------------|--|--|--|
|  |  |   |  |                         | 2. ID Number<br>8CQ175   |  |  |
| United to Elect German Garcia                                    |  |   |  |                         | 800175   |  |  |
| 3. Contributor Information                                       | Remove                                   |   | an a |                         |  |  |  |
| a. Full Name, Mailing Address & Phone                            |  | Contributor   | c. Cor                                   | oments                  |  |  |  |
| (include city, state, & zip)                                     |  | ividual   |  |                         | <u>i de la construcción de la constru<br/>La construcción de la construcción d</u> |  |  |
| Marilynn Baker   |  | ndidate   |  |                         |  |  |  |
| 209 Rockford Rd  |  |   |  |                         |  |  |  |
| Kernersville, NC 27284   |  | •   | ł  | d. Election Sum to Date |  |  |  |
|  |  | ~<br>ferendum   | d Fie                                    |                         |  |  |  |
| 336-813-6556   | hl                                       | er Receipt Source   | u, Die                                   |                         |  |  |  |
|  |  | ter Receipt Source  | \$                                       | \$ 167.59               |  |  |  |
| e. Description   |  | f. Date (mm/dd/yy   | yy)                                      | g. Fa                   | ir Market Amount   |  |  |
| Staples - Campaign postcards                                     |  | 4/25/2014   |  | \$                      | 69.99  |  |  |
|  |  |   |  | <u>}</u>                |  |  |  |
| Davidson Mills - 3 Campaign T-Shirts                             |  | 6/4/2014  |  | \$                      | 15.21  |  |  |
| Framed Impressions - Print 3 Ts front & back color               |  | 6/6/2014  |  | \$                      | 12.72  |  |  |
| 3. Contributor Information                                       | Remove                                   |   |  |                         |  |  |  |
| a. Full Name, Mailing Address & Phone                            |  | Contributor   | c. Con                                   | nments                  | a departe a la departe de  |  |  |
| (include city, state, & zip)                                     |  | ividual   |  | <u> </u>                |  |  |  |
| Marilynn Baker   | 1 ==                                     | ndidate   |  |                         |  |  |  |
| 209 Rockford Rd  | Pa                                       | ty  |  |                         |  |  |  |
| Kernersville, NC 27284   | П РА                                     |   |  |                         |  |  |  |
| 336-813-6556   | Re                                       | ferendum  | d. Ele                                   | ction S                 | um to Date   |  |  |
| 550-015-0500   |  | er Receipt Source   | \$                                       | 167.59                  |  |  |  |
|  |  |   |  |                         |  |  |  |
| e. Description   |  | f. Date (mm/dd/yy   | уу)                                      | g. Fa                   | ir Market Amount   |  |  |
| Rite Aid - 4x6 envelopes   |  | 6/16/2014   |  | \$                      | 3.56   |  |  |
| Staples - Black HP88XL Ink for campaign brochures                |  | 6/25/2014   | Ļ  | \$                      | 52.99  |  |  |
| Staples - 1 ream paper for support brochures                     |  | 6/26/2014   | ŀ  | \$                      | 13.12  |  |  |
| 3. Contributor Information                                       | Remove                                   |   |  |                         |  |  |  |
| a. Full Name, Mailing Address & Phone                            | 1. | Contributor   | c. Con                                   | nments                  |  |  |  |
| (include city, state, & zip)                                     | Ind Ind                                  | ividual   |  |                         |  |  |  |
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|  | i konstante                              |   | \$                                       | م<br>167.               | 59   |  |  |
| 4. Total only this Page<br>5. Total of ALL CRO-1510 Pages        | <u>e overlett</u><br>Edole se d          | en de la compañía de<br>Na fel de la compañía |  |                         |  |  |  |
| (This line must be on line 17 of Detailed Summary Page CRO-1100) |  |   | \$                                       | 167.                    | 59   |  |  |