| Disclosure R<br>Use this form for g            | general report and committee   | e information, must l           | be signed and su     | ibmitted along wit   | Amendment  Yes No th other detailed forms.                            |
|--|--|---------------------------------|----------------------|--|---|
| Do not use this form                           | m to update information  | <del></del>                     |                      |  |   |
| 1. Committee Info                              | rmation  |                                 |                      |  |   |
| United to Elect Ge                             | rman Garaja  | <del></del>                     |                      |  | c. ID Number  |
| Office to Lieut Go                             | Illian Calcia  | a st                            | 1 (1) (1) (1)        |  | 8CQ175  |
|  | clude City, State and Zip Code)  |                                 |                      |  | d. Date Filed   |
| 824 Gehring Dr                                 |  |                                 |                      |  |   |
| Kernersville, NC 27                            | 7284   |                                 |                      |  | 10/26/2014  |
|  |  |                                 |                      |  | e. Phone Number   |
|  | T  |                                 |                      |  | 336-406-7323  |
| 2. Report Year                                 | 3. Period Start Date (mm   | 1/dd/yy) 4. Period<br>(mm/dd/yy | l End Date           | ull Name   |   |
| 2014   | 07/01/2014   | 10/                             | /18/2014             | ocha   |   |
| 6. Type of Commit                              |  | 9. Type of Repor                | rt (check or         | nlv one type of rep  | ort from one category)  |
| Candidate Camp                                 | paign Party  | Municipal                       | State/C              |  | Referendum  |
| PAC Independent                                | Referendum   | Organization                    | nal 📗                | Organizational   | Organizational  |
| Expenditure Legal Expense F                    | Joint Fundraiser   | Thirty-five da                  | ay                   | Quarterly  | Pre-referendum  |
| 7. Type of Fund                                | (if applicable, check one)   | Pre-primary                     | \ <u></u>            | First  | Final   |
| Booster Fund"                                  |  | Pre-election                    |                      | Second   | Supplemental Final  |
| Building Fund                                  |  | Pre-runoff                      |                      | Third  | Annual  |
|  |  | Semi-annual                     |                      | Fourth   | Special   |
|  | •  | Mid Yea                         | ·                    | Semi-annual  |   |
| Other:   | •  | Year End                        | ıd   📙               | Mid Year   | O Special Topy of ame   |
| O Manhau of Fund                               | 41 * TO  | Final                           |                      | Year End   | CUPI  |
| 8. Number of Fund                              | raisers this Keport  | Special                         |                      | Final<br>Special   |   |
| 11. Account Inform                             | estinn   |                                 | <u> </u>             | Special  |   |
| a. Financial Institution F                     |  |                                 | 11. Account I        | information<br>itution Full Name   |   |
| Wells Fargo                                    |  | <u></u>                         | d. Piliantias Ange   | HUGOR FOR PARIC  |   |
| b. Purpose                                     | c. Account Code  |                                 | b. Purpose           | The state of the s | c. Account Code   |
| Fundraising                                    |  |                                 |                      |  | C. Account Cour   |
|  | DO   |                                 |                      |  |   |
|  | d. Period Begin Balance  |                                 |                      |  | d. Period Begin Balance   |
|  | \$ 224.77  | 1                               |                      |  | \$  |
| CERTIFICATION                                  |  |                                 |                      |  |   |
| I certify that the Com<br>the NC General Statu | correct and that I have been   | ommingled with proh             | ubited or other n    | ion-disclosed fund   | B, & 22D-22M of Chapter 163 of is. I further certify that this report |
|  | Printed Name of Signer   | , <u></u> §                     | ignature of Appointe | ed Treasurer   | Date  |
| FOR OFFICE USE OF                              | and the second of the second o |                                 | V res                | <b>1</b>   |   |
| Date Received:                                 | 10-28-14   | Employee:                       | (Mis                 | Myg  | Delivery Method Normal Mail   |
| Date Postmarked                                | : 10-27-14   | Employee:                       | - <u> </u>           |  | Registered Mail Hand Delivered  |
| Date Scanned:                                  |  | Employee:                       | <u> </u>             |  | Electronically Filed Signer has not received                          |
| Date Data Entered                              | d:   | Employee:                       |                      |  | mandatory training  |
|  | custodiai  | n of books information          | on, or account in    | nformation.  | ress, treasurer, assistant treasurer,                                 |
|  | You must amend the Statem  | nent of Organization            | (CRO-2100A-E         | ) to make commit   | tee changes.  |

MC State Board of Flections

Attended 2000

Amendment

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

| United to Elect German Garcia                                    | 2. Type of Report<br>2 <sup>nd</sup> Quarter   |                                       | 3. ID Number 8CQ175        |  |  |
|--|--|---------------------------------------|----------------------------|--|--|
|  | 2 Quarter  |                                       |                            |  |  |
| Start of Election Cycle: January 1,                              | 2014   | Total this Reporting Period           | Total this Election Cycle  |  |  |
| 4) Cash on Hand at Start   |  | \$ 224.77                             | \$ 0.00                    |  |  |
| RECEIPTS   |  |                                       |                            |  |  |
| 5) Aggregated Contributions from Individuals                     | (CRO-1205)   | \$                                    | \$                         |  |  |
| 6) Contributions from Individuals                                | (CRO-1210)   | \$ 1100.00                            | \$ 1649.00                 |  |  |
| 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  |  |                                       |                            |  |  |
| 11a) Interest on Bank Accounts                                   | (CRO-1250)   | \$                                    | \$                         |  |  |
| 11b) Contributions from Not-for-Profit Organization              | ns <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, 11c,  | 11d and 11e) =   | \$ 1100.00                            | \$ 1949.00                 |  |  |
| EXPENDITURES 2   |  |                                       |                            |  |  |
| 3) Disbursements   | and the second of the second o |                                       |                            |  |  |
| 13a) Operating Expenditures                                      | (CRO-1310)   | \$ 356.14                             | \$ 812.78                  |  |  |
| 13b) Contributions to Candidates/Political Committee             | es <i>(CRO-1310)</i>   | \$                                    | \$                         |  |  |
| 13c) Coordinated Party Expenditures                              | (CRO-1310)   | \$                                    | \$                         |  |  |
| 4) Aggregated Non-Media Expenditures                             | (CRO-1315)   | \$                                    | \$                         |  |  |
| 5) Loan Repayments   | (CRO-1420)   | \$                                    | \$                         |  |  |
| 6) Refunds/Reimbursements From the Committee                     | (CRO-1320)   | \$                                    | \$                         |  |  |
| 7) In-Kind Contributions   | (CRO-1510)   | \$ 0.00                               | \$ 167.59                  |  |  |
| 8) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15,          |  | \$ 356.14                             | \$ 980.37                  |  |  |
| 9) Cash on Hand at End (Add lines 4 and 12 together, then subtra |  | \$ 968.63                             | \$ 968.63                  |  |  |
| ADDITIONAL INFORMATION   |  | · · · · · · · · · · · · · · · · · · · |                            |  |  |
| 0) Non-Monetary Gifts Given to Other Committees                  | (CRO-1330)   | \$                                    | Proceedings of the Control |  |  |
| 1) Outstanding Loans (incl. ones from other campaigns)           | (CRO-1430)   | \$                                    | 200 Marie 18               |  |  |
| 2) Debts and Obligations owed By the Committee                   | (CRO-1610)   | \$                                    |                            |  |  |
| 3) Debts and Obligations owed To the Committee                   | (CRO-1620)   | \$                                    |                            |  |  |
| 4) Account Transfers Within the Committee                        | (CRO-1720)   | \$                                    |                            |  |  |
| 5) Administrative Support  | (CRO-1710)   | \$                                    |                            |  |  |
| 6) Forgiven Loans  |  |                                       | \$                         |  |  |
| •  | }-   | \$                                    | \$                         |  |  |
| 7) 48-Hour Notice Reports Sum                                    | ļ  | \$                                    | \$                         |  |  |
| B) Contributions to be Refunded                                  | (CRO-1215)   | \$                                    | \$                         |  |  |

| Use this   | form to report in                       | dividual contributions                | over \$5    | 0 or contributions ur   | g <u>1</u><br>oder \$50 if form C                     |             |                                       | es 🔲 1      |
|------------|---|---------------------------------------|-------------|-------------------------|---|-------------|---------------------------------------|-------------|
|            |   | e (and Fund if applica                | ible)       |                         |   | 2. ID N     | umber                                 | · · ·       |
| United t   | o Elect German G                        | arcia                                 |             |                         |   |             | 8CQ175                                |             |
|            | ributor Informat                        |                                       |             | Add □ R                 | emove   |             |                                       |             |
|            | me, Mailing Address                     | & Phone                               |             | b. Job Title/Professio  |   | d. Comm     | ents                                  |             |
|            | e city, state, & zip)                   |                                       |             | Retired Universit       | y Coach   |             |                                       |             |
| -          | Littlejohn                              |                                       |             |                         |   |             |                                       |             |
|            | mount Rd                                |                                       |             | c. Employer's Name/s    | Specific Field  |             |                                       |             |
| Gastonia   | , NC 28054                              |                                       |             |                         |   |             |                                       |             |
|            |   |                                       |             |                         | •   |             | n Sum to Date                         | <del></del> |
| f. Prior   | a Assert Colle                          | I Book CD                             | T           |                         | ·· <sub>1</sub> · · · · · · · · · · · · · · · · · · · | \$          | 1000.00                               |             |
| 1. Prior   | g. Account Code                         | h. Form of Payment                    | i. In-I     | Kind Description        | j. Date (mm/dd/                                       |             | k. Amount                             |             |
|            |   | Cash                                  | ļ           |                         | 10/17/  | 2014        | \$                                    | 1000.00     |
|            |   |                                       |             |                         |   |             | \$                                    | -           |
|            |   |                                       |             |                         |   |             | \$                                    | -           |
|            | ibutor Informati                        |                                       |             | Add 🔲 🕳 Re              | move  |             | #1945 (Min 1945)                      | Ţ <u></u>   |
|            | ne, Mailing Address                     | & Phone                               |             | b. Job Title/Profession |   | d. Comme    | ents                                  | <u> </u>    |
|            | city, state, & zip)                     |                                       | ····        | Retired COL US A        | Army  |             |                                       | · · · ·     |
| lose Enri  | -                                       |                                       |             |                         |   |             |                                       |             |
|            | ayers Way                               |                                       |             | c. Employer's Name/S    | pecific Field   |             |                                       |             |
| nenwoo     | d, MD 21738                             |                                       |             | •                       |   |             |                                       |             |
|            |   |                                       |             |                         |   | e. Election | e. Election Sum to Date               |             |
|            |   |                                       |             |                         |   | \$          | 100,00                                |             |
| . Prior    | g. Account Code                         | h. Form of Payment                    | i. In-K     | ind Description         | j. Date (mm/dd/y                                      | ууу)        | k. Amount                             | <u> </u>    |
| Ш.,        | • | Check                                 |             |                         | 10/16/2   | 2014        | \$                                    | 100.00      |
|            |   |                                       |             |                         |   |             | \$                                    |             |
|            |   |                                       |             |                         |   |             | \$                                    |             |
|            | butor Informatio                        |                                       |             | Add Rei                 | nove  |             |                                       | 1 2 2 2 2 3 |
|            | e, Mailing Address &                    | k Phone                               | : [         | b. Job Title/Profession |   | d. Comments |                                       |             |
| (include o | rity, state, & zip)                     |                                       |             |                         |   |             |                                       | ·           |
|            | •                                       |                                       | ŀ           | c. Employer's Name/Sp   | ecific Field  | -           |                                       |             |
|            |   |                                       | ŀ           |                         |   |             |                                       |             |
|            |   |                                       | •           |                         | e. Election Sum to Date                               |             | · · · · · · · · · · · · · · · · · · · |             |
|            | <del></del>                             |                                       |             |                         |   | \$          |                                       |             |
| Prior      | g. Account Code                         | h. Form of Payment                    | i. In-Ki    | nd Description          | j. Date (mm/dd/yy                                     | уу)         | k. Amount                             |             |
|            | <del></del>                             |                                       | <del></del> |                         |   |             | \$                                    | <del></del> |
|            |   |                                       |             |                         |   |             | \$                                    |             |
|            |   |                                       |             |                         |   |             | \$                                    |             |
|            | only this Page                          |                                       |             |                         |   | \$          |                                       | 1100.00     |
|            | of ALL CRO-                             | 1210 Pages<br>etailed Summary Page CR | A 7100      |                         |   | \$          |                                       | 1100.00     |
| RO-1210    |   | Gananas y Fage CR                     | V-1100)     |                         |   |             |                                       |             |

NC State Board of Elections

**Contributions from Individuals** 

Amendment

April 2007

Disbursements

Pg 1 of 1 Yes No

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

|                         | Full Name (and Fu         | nd if applicable)   |            |                               |                                    | garagas s                             |               | 2. ID Number   |
|-------------------------|---------------------------|---------------------|------------|-------------------------------|------------------------------------|---------------------------------------|---------------|--|
|                         | ct German Garcia          |                     |            |                               |                                    |                                       |               | 8CQ175   |
| 3. Type of Dis          |                           | ease use separate ( | <u>CRO</u> | -1310 forms                   | for each                           |                                       |               |  |
|                         | g Expenses                | Contributions to Ca |            |                               | nmittees                           |                                       | oordinate     | ed Party Expenditures  |
| 4. Payee Infor          |                           | <u> </u>            |            | .dd                           |                                    | Remove                                |               |  |
| B .                     | ailing Address & Phone    |                     | b.         | Coordinated Co                | mmittee N                          | lame                                  | d. Co         | omments  |
| (include city, state    |                           |                     | _          |                               |                                    |                                       | 7             |  |
| The Hispanic I          | _                         |                     |            |                               |                                    | · · · · · · · · · · · · · · · · · · · |               |  |
| 690 Coliseum            |                           |                     | c.         | Level Registered              | i (Specify)                        |                                       | .]            |  |
| Winston-Salen           | -                         |                     |            | Federal County:               |                                    |                                       | 7             |  |
| 336-770-1228            | •                         |                     |            | State Municipality:           |                                    | Municipality:                         | e. Ele        | ection Sum to Date   |
|                         |                           |                     | 1          |                               | ——                                 |                                       | \$ 2          | 25.00  |
|                         | <del></del>               | <del></del>         |            |                               |                                    |                                       | Φ 4           | .3.00  |
| f. Account Code         | g. Form of Payment        | h. Purpose Code     |            | i. Date (mm/dd/               | /уууу)                             | j. Amount                             | k. Rec        | quired Remarks   |
| DOM                     | Check                     | C                   |            | 8/18/2014                     |                                    | \$25.00                               | Cam           | paign booth  |
|                         |                           |                     | _          | 0/10/2014                     | 4                                  | Φ23.00                                | at FI         | ESTA.  |
|                         |                           | ľ                   |            | 1,                            |                                    | \$                                    | T -           |  |
| · - r e                 |                           |                     |            |                               |                                    |                                       |               | ····   |
| 4. Payee Inform         |                           |                     | Ad         |                               | 1 2                                | Remove                                |               |  |
|                         | iling Address & Phone     |                     | b. C       | Coordinated Cor               | mmittee N:                         | ame                                   | d. Cor        | mments   |
| (include city, state,   |                           |                     | _          |                               |                                    |                                       |               |  |
|                         | y Democratic Part         |                     |            |                               |                                    |                                       |               |  |
| 1128 Burke St.          |                           |                     | c. I       | Level Registered              | (Specify)                          |                                       | 1             |  |
| Winston Salem           | i, NC 27101               |                     |            | Federal                       |                                    | County:                               | 1             |  |
| 336-724-5941            |                           |                     |            | State                         |                                    | Municipality:                         | e. Elec       | ction Sum to Date  |
| •                       | ٠.                        |                     |            |                               |                                    |                                       |               |  |
|                         | ·                         |                     |            |                               |                                    |                                       | \$ 30         | 00.00  |
| f. Account Code         | g. Form of Payment        | h. Purpose Code     | $\Box$     | i. Date (mm/dd/               | уууу)                              | j. Amount                             | k. Reg        | uired Remarks  |
| DOM                     | Check                     | В                   |            | 8/18/2014                     |                                    | \$50,00                               | Flyers        | the state of the s |
|                         | 1                         |                     | _          | 0/10/2017                     |                                    | \$30,00                               |               |  |
|                         |                           | 1                   |            |                               | ļ                                  | \$                                    |               |  |
|                         |                           | <u> </u>            |            | ····                          |                                    |                                       |               |  |
|                         | nation                    |                     | Ado        |                               |                                    | Remove                                |               | the same same and the same and  |
|                         | ling Address & Phone      |                     | b. C       | Coordinated Con               | amittee Na                         | me !                                  | d. Com        |  |
| (include city, state,   |                           |                     | 1          |                               |                                    |                                       |               |  |
|                         | Democratic Part           | ,                   | <u></u>    |                               |                                    |                                       | 1             |  |
| 1128 Burke St           |                           | 1                   | c. L       | c. Level Registered (Specify) |                                    |                                       | 1             |  |
| Winston Salem,          | , NC 27101                | J                   | ( D        | Federal                       | +                                  | County:                               | I             |  |
| 336-724-5941            |                           |                     |            | State                         |                                    | Municipality:                         | e. Elect      | tion Sum to Date   |
|                         |                           | ,                   | 1          |                               |                                    | ,                                     | 0 50          | 11 14  |
|                         | T                         |                     | <u></u>    |                               |                                    |                                       | \$ 58         | 31.14  |
| f. Account Code         | g. Form of Payment        | h. Purpose Code     | i          | . Date (mm/dd/y               | ууу)                               | j. Amount                             | k. Requ       | uired Remarks  |
| DOM                     | Check                     | В                   |            | 09/09/2014                    |                                    | #201 1 <i>4</i>                       | Ballots       | s with   |
|                         | CHOCK                     |                     | 上`         | J9/09/2014                    |                                    | \$281.14                              | candid        | late photo   |
| 1                       | [                         |                     | $\neg$     |                               |                                    | Φ.                                    |               |  |
|                         |                           |                     |            |                               |                                    | \$                                    | : .           |  |
| 5. Total only this      |                           |                     |            |                               |                                    |                                       | \$            | 356.14   |
|                         | CRO-1310 Pages            |                     |            |                               |                                    |                                       | <del></del>   |  |
| (This line goes in l    | line 13a of Detailed Sumn | nary Page CRO-1100  | if Ope     | erating Expense:              | 5)                                 |                                       | ው             | APC 11   |
| (This line goes in I    | line 13b of Detailed Sumn | nary Page CRO-1100  | if Cor     | ntrib to Candidat             | tes/Political                      | u Comm)                               | \$            | 356.14   |
| (This line goes in l    | line 13c of Detailed Sumn | nary Page CRO-1100  | if Coo     | rdinated Party I              | expenditure                        | es)                                   |               |  |
|                         | es (List detailed expe    |                     |            |                               |                                    |                                       | Andreas Agent | song paramagang ang ang ang ang ang ang ang ang an   |
| A* - Media              | B* - Printing             | C* - Fundr          |            |                               | 7                                  | D - To Another                        |               |  |
| E - Salaries            | F* - Equipment            | G - Politica        |            | l Party H* - Holding I        |                                    |                                       | Public O      | Office Expenses  |
| - Postage<br>O* - Other | J - Penalties             | K* - Office         | Exp        | enses                         |                                    | Q* - Donation                         | to Lega       | ıl Expense Fund  |
|                         | detailed explanatio       | an harimaar ei er   | aul        | #-14 (IA)                     |                                    | ine.<br>Angsaka sa matangga           | e telle gyet  | And white was a second   |
| Cones redains           | , actanco expianatio      | A III Feauifea fer  | narr       | AS TIEIG (K)                  | <ul> <li>10 (1) (1) (2)</li> </ul> | 推荐 化硫酸钾 有证证据 电影性多数                    | 1,970,000     |  |