

Amendment

Disclosure Report Cover

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 Information				F 1 150			
a. Full Name		· .				c. ID Number	
FORWARD TOGETHER W	INSTON-SALEM		!		- - · · · · · · · · · · · · · · · · · ·		
b. Mailing Address (include Ci	ty, State and Zip Code)					d. Date Filed	
315 NORTH SPRUCE STRE WINSTON-SALEM, NC 27	•	:				10/27/2014	
						e. Phone Number	
					_		
2. Report Year 3. Period Star	rt Date (mm/dd/yy)	4. Period	End Date (mm	ı/dd/yy)	5. Treasur	er Full Name	
2014 0	9/20/2014		10/20/2014		JACK H C	AMPBELL JR	
6. Type of Committee (Check		e of Report			type of repo	ort from one category)	
Candidate Campaign Pa	i			County		Referendum	
☐ Joint Fundraiser ☐ PA		Organizatio	ļ 	ganizatio	nal	Organizational	
	gal Expense Fund	Thirty-five		uarterly	-	Pre-referendum	
and the first of the contract	le, check one) 🔲	Pre-primary	/ □	First		☐ Final	
Booster Fund"		Pre-election	ւ 🗆	Second		Supplemental Final	
Building Fund		Pre-runoff		Third		Annual	
Presidential Election Year Car		Semi-annua	· 🗖	Fourth		Special	
NC Public Campaign Financin	g Fund	Mid Ye	ar Sei	mi-annual			
		Year Ei	nd 🔲	Mid Ye	ar	10. Special Report Name	
Other:	🗆	Final		Year En		- A CONTROL OF THE STATE OF THE	
8. Number of Fundraisers this	s Report 🔲	Special	Fit	nai			
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3. Account Information				· · · · · · · · · · · · · · · · · · ·			
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NEWBRIDGE BANK					·r		
b. Purpose	c. Account Code		b. Purpose			c. Account Code	
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DONATIONS AND		_					
PAYING EXPENSES	d. Period Begin Balan	ce			ļ	d. Period Begin Balance	
	\$					\$	
CERTIFICATION							
I certify that the Committee	or Fund is in compliand	e with all a	pplicable pro	visions o	of Article 22	2A. 22B & 22D-22M of	
Chapter 163 of the NC Gener	-						
funds. I further certify that							
	,	(4.6	a by the No otate Board	
JACK H. CAMPBE	LL JR.	l	Walland	11.10		10/27/2014	
Printed Name of S	igner	Sjøn	ature of Appoin	ed Freas	rrer	Date	
FOR OFFICE USE ONLY					·	- 11-1	
					Deli	ivery Method	
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Date Postmarked:		Emplo	yee:			Hand Delivered	
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						Signer has not received	
Date Data Entered:	<u></u>	Employ	yee:			_	
The Day			· · · · · · · · · · · · · · · · · · ·			mandatory training	
Please Note: This form of							
assista	nt treasurer, custodian	of books in	nformation, or	r accoun	t informatio	on.	
You must amen	d the Statement of Org	anization (CRO-2100A - F	to mak	e committee	e changes	

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

Amendment **⊠** No

August 2008

☐ Yes

1. Committee Full Name (and Fund if applicable) 2. Type of Report 3. ID Number FORWARD TOGETHER WINSTON-SALEM 2014 Pre-Referendum Start of Election Cycle: January 1, Total this 1914 Total this Reporting Period **Dection Cycle** 4) Cash on Hand at Start 50.00 0.00 RECEIPTS 5) Aggregated Contributions from Individuals (CRO-1205) 101.97 \$ 151.97 6) Contributions from Individuals (CRO-1210) 6,905.00 \$ 6,905.00 7) Contributions from Political Party Committees (CRO-1220) \$ 0.00 \$ 0.00 8) Contributions from Other Political Committees (CRO-1230) 0.00 \$ 0.00 9) Loan Proceeds (CRO-1410) 0.00 \$ 0.00 0) Refunds/Reimbursements to the Committee (CRO-1240) 0.00 0.00 1) Other Receipt Sources 11a) Interest on Bank Accounts (CRO-1250) 0.00 \$ 0.00 11b) Contributions from Not-For-Profit Organizations (CRO-1250) 0.00 \$ 0.00 11c) Outside Sources of Income (CRO-1250) 13,500.00 \$ 13,500.00 11d) Legal Expense Fund - Other Sources (CRO-1270) \$ 0.00 \$ 0.00 11e) Exempt Purchase Price Sales (CRO-1265) \$ 0.00 0.00 2) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e) 20,506.97 20,556.97 EXPENDITURES 3) Disbursements 13a) Operating Expenditures (CRO-1310) 102.99 102.99 13b) Contributions to Candidates/Political Committees (CRO-1310) \$ 0.00 0.00. 13c) Coordinated Party Expenditures (CRO-1310) \$ \$ 0.00 0.00 4) Aggregated Non-Media Expenditures (CRO-1315) \$ \$ 19.85 19.85 (5) Loan Repayments (CRO-1420) \$ 0.00 \$ 0.00 6) Refunds/Reimbursements from the Committee (CRO-1320) \$ \$ 0.00 0.00 7) In-Kind Contributions (CRO-1510) \$ 26.97 \$ 26.97 (8) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) \$ 149.81 \$ 149.81 (9) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) \$ 20,407.16 20,407.16 ADDITIONAL INFORMATION 20) Non-Monetary Gifts Given to Other Committees (CRO-1330) \$ 0.00 21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430) \$ 0.00 22) Debts and Obligations owed by the Committee (CRO-1610) \$ 19,164.27 23) Debts and Obligations owed to the Committee (CRO-1620) \$ 0.00 24) Account Transfers Within the Committee (CRO-1720) \$ 0.00 25) Administrative Support (CRO-1710) \$ 0.00 0.00 26) Forgiven Loans (CRO-1440) \$ 0.00 \$ 0.00 27) 48-Hour Notice Reports Sum (CRO-2220) \$ 0.00 \$ 0.00 28) Contributions to be Refunded (CRO-1215) 0.00 0.00 CRO-1100 NC State Board of Elections

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☐ Add ☐ Remove	C-1	Credit Card		09/30/201	4	\$	50.00
☐ Add ☐ Remove	C-1	In-Kind	FACEBOOK PROMO FEES	10/03/201	4	\$	26.97
4. Total or	lly this Page				\$		\$101.97
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CRO-1205

NC State Board of Elections

April 2007

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	al of ALL CRO	O-1210 Pages 6 of Detailed Summary P	Page CRO-1100)		Win	\$		6,905.00

Contributions from Individuals

Amendment **Contributions from Individuals** 2 of X No ☐ Yes Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used 1. Committee Full Name (and Fund if applicable) 2. ID Number FORWARD TOGETHER WINSTON-SALEM 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) RETIRED JACK H CAMPBELL JR c. Employer's Name/Specific Field 1208 BROOKSTOWN AVE WINSTON-SALEM, NC 27101 RETIRED e. Election Sum to Date 580.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Check C-1 X 09/17/2014 \$ 50.00 Credit Card C-1 09/22/2014 \$ 5.00 Credit Card C-1 09/22/2014 25.00 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) RETIRED JACK H CAMPBELL JR c. Employer's Name/Specific Field 1208 BROOKSTOWN AVE WINSTON-SALEM, NC 27101 RETIRED e. Election Sum to Date 580.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Check C-1 10/06/2014 \$ 500.00 \$ \$ 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) MANAGING DIRECTOR JOHN DAVIS III c. Employer's Name/Specific Field 411 S MARSHALL ST #401 WINSTON-SALEM, NC 27101 DEUTSCHE BANK e. Election Sum to Date SECURITIES INC 500.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount C-1 Check 10/13/2014 \$ 500.00 \$ \$ 4. Total only this Page 1,030.00

5. Total of ALL CRO-1210 Pages

(This line must be on line 6 of Detailed Summary Page CRO-1100)

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Contributions from Individuals

Amendment

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5. Total of ALL CRO-1210 Pages

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Con	tributions fr	rom Individual	ls	P	g5 of 7		Amendme Yes	nt XINo
Use thi	is form to report in	ndividual contribution	ıs over \$50 or c	ontributions u	inder \$50 if form CRO	_ 1205	is not used	124 1₹0
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Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used 1. Committee Full Name (and Fund if applicable) 2. ID Number 2. ID Number 3. Contributor Information 3. Contributor Information 3. Full Name, Mailing Address & Phone (include city, state, & zip) JOHN MILLICAN 145 NORTHPOND LANE WINSTON-SALEM, NC 27106 5. Employer's Name/Specific Field SALEM GROUP 6. Election Sum to Dat \$ 75. 6. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount
FORWARD TOGETHER WINSTON-SALEM 3. Contributor Information
3. Contributor Information a. Full Name, Mailing Address & Phone (include city, state, & zip) JOHN MILLICAN 145 NORTHPOND LANE WINSTON-SALEM, NC 27106 5. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount
a. Full Name, Mailing Address & Phone (include city, state, & zip) JOHN MILLICAN 145 NORTHPOND LANE WINSTON-SALEM, NC 27106 SALEM GROUP c. Employer's Name/Specific Field SALEM GROUP e. Election Sum to Dat \$ 75.4 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount
a. Full Name, Mailing Address & Phone (include city, state, & zip) JOHN MILLICAN 145 NORTHPOND LANE WINSTON-SALEM, NC 27106 SALEM GROUP E. Election Sum to Dat \$ 75.6 C. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount
JOHN MILLICAN 145 NORTHPOND LANE WINSTON-SALEM, NC 27106 SALEM GROUP e. Election Sum to Dat \$ 75. f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount
145 NORTHPOND LANE WINSTON-SALEM, NC 27106 SALEM GROUP c. Employer's Name/Specific Field SALEM GROUP c. Election Sum to Dat \$ 75. f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount
WINSTON-SALEM, NC 27106 SALEM GROUP e. Election Sum to Dat f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount
e. Election Sum to Dat \$ 75. f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount
f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount
f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount
C-1 Credit Card
C-1 Credit Card 10/13/2014 \$ 75.
<u> </u>
□ s
3. Contributor Information ☐ Add ☐ Remove
a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments
(include city, state, & zip) RETIRED
STEPHEN STRAWSBURG 364 BUCKINGHAM RD c. Employer's Name/Specific Field
WINSTON-SALEM, NC 27104 RETIRED c. Election Sum to Date
\$ 1,000.0
f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount C-1 Check 00/20/2014
09/30/2014 \$ 1,000.0
\$
□
3. Contributor Information
a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments
(include city, state, & zip) BANDALL TRICTURE BUSINESS
RANDALL TUTTLE 1900 VIRGINIA RD c. Employer's Name/Specific Field
WINSTON-SALEM, NC 27104 TRADE STREET CAPITAL
PARTNERS e. Election Sum to Date
\$ 1,000.0
· · · · · · · · · · · · · · · · · · ·
i rime to are on it time in form in raymout it in-kind describion 11. 11976 (mm/m//vvvv) 18. Amount
C.I. Credit Card
C.I. Credit Card
□ C-1 Credit Card 09/29/2014 \$ 1,000.0
□ C-1 Credit Card 09/29/2014 \$ 1,000.0

		om Individual	-	Pg		7 CRO 10	Amenda Ves	X No
1. Com	mittee Full Name	(and Fund if applicab	ole)	ittioutions und	101 330 H 10H		203 is not us 2. ID Numb	
		ER WINSTON-SALE		<u> </u>			2. D) [\u]ijb	
3. Cont	ributor Informati	on the same of the		Add □ Ren	nove			——————————————————————————————————————
	Vame, Mailing Ad			b. Job Title/Pro			d. Comment	is -
(incl	ide city, state, & z	ip)		BUSINESS O	WNER			
	P WAUGH							
	HATTALON DR		1	c. Employer's N	ame/Specific	Field		
WINSTON-SALEM, NC 27106			SECONDHALF LLC					
		•				-	. Dection S	um to Date
			ļ				\$	75.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desci	ription	. Date (mm/d	І/уууу)	k. Amou	nt
	C-1	Credit Card			09/29/2	014	\$	75.00
							\$	
					<u>.</u> .	<u>,, , , , , , , , , , , , , , , , , , ,</u>	\$	-
4. Tot	al only this Pa	ge					<u> </u>	75.00
	al of ALL CR(line must be on line	O-1210 Pages 6 of Detailed Summary 1	Page CRO-1100)			***************************************	\$	6,905.00
CRO-12				rd of Elections		}		April 2007

NC State Board of Elections

Other Receip	pt Sources
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				Amendm	ent
Pg	1	of	2	Yes	X No

Use this form to report income not reported on another form. i.e. interest income, not for profit contributions etc.

1. Committee Fu	ll Name (and Fund if a	ipplicable)	4.5		2.]	D Number	
FORWARD TO	GETHER WINSTON	l-SALEM			-		
3. Type of Recei	ot Source (Please us	e separate CRO-1	250 forms fo	r each type of Rec	oint	Source)	
☐ Interest	Contrib	utions from Not-for-	Profit Organiz	ations X Outside So	urces	of Income	
4. Contributor In				Remove		·	
a. Full Name, Ma	iling Address & Phone			rofit Federal ID#	d. (Comments	
(include city, s	tate, & zip)				ļ		
635 TRADE ST	REET PARTNERS L	LC					
635 TRADE ST	•		c. Outside S	ource Explanation	1		
WINSTON-SAI	LEM, NC 27101						
					e. E	dection Sur	n to Date
					\$		1,500.00
f. Account Code	g. Form of Payment	h. In-Kind Descrip	tion	i. Date (mm/dd/yy	ууу)	j. Amount	<u>.</u>
C-1	Check			10/16/2014		\$	1,500.00
						\$	
4. Contributor Ir	.formation	- <u>1</u> 18 2	Add 🔲 R	lemove		·	
a. Full Name, Ma	iling Address & Phone		b. Not-for-Pr	ofit Federal ID#	d. C	omments	
(include city, s	tate, & zip)						
FRANK L BLUM CONSTRUCTION CO 830 E 25TH ST			c. Outside Source Explanation				
WINSTON-SAI	LEM, NC 27115			-	_	14	
•					e. E	lection Sur	n to Date
					\$		1,000.00
f. Account Code	g. Form of Payment	h. In-Kind Descrip	tion	i. Date (m m/dd/yy	/VV)	j. Amount	
C-1	Check			09/30/2014	-	\$	1,000.00
						\$	
4. Contributor In	formation		Add R	emove			
a. Full Name, Mai	iling Address & Phone		b. Not-for-Pr	ofit Federal ID#	d. C	Comments	
(include city, s	tate, & zip)						
I L LONG CON	STRUCTION CO IN	C					
PO BOX 4186			c. Outside S	ource Explanation			
WINSTON-SAL	LEM, NC 27115						
					e. E	lection Sur	n to Date
			,	·	\$		2,000.00
f. Account Code	g. Form of Payment	h. In-Kind Descrip	tion	i. Date (mm/dd/yy	/γγ)	i. Amount	
C-1	Check			09/29/2014	337		
	J., 24.0			07/27/2014		\$	2,000.00
				·		\$	
5. Total only i	this Page				\$		4,500.00
`	L CRO-1250 Pag	es.			+		
(This line goes in	line 11a of Detailed Sun line 11b of Detailed Sun	ımary Page CRO-110	21 T + 1 T + 1	ofit Contribution)	\$		13,500.00
(This line goes in	line 11c of Detailed Sun	mary Page CRO-110	0 if Outside So	urces of Income)			

Albam Danains Carr		Amendment
Other Receipt Sources	Pg = 2 of 2	_
	——————————————————————————————————————	_

Use this form to	report income not rep	orted on another fo	orm. i.e. intere	st income, not for	 orof	t contr	ibutions etc.
1. Committee Fu	ıll Name (and Fund if	applicable)				ID Nur	
FORWARD TO	OGETHER WINSTON	N-SALEM		ndere emperature de desirable deployer (response emperature de la constante de la constante de la constante de		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
3. Type of Recei	pt Source <u>(<i>Please u</i>s</u>	se separate CRO-1	250 forms for	r each type of Rec	eipt	Source	ę.)
Interest	Contril	outions from Not-for-	Profit Organiza	tions 🛛 Outside Sc	urce	s of Inc	ome
4. Contributor I			Add R	emove			
	iling Address & Phone		b. Not-for-Pr	ofit Federal ID#	d. 6	Comme	ents
(include city, s							
	ENZ OF WINSTON-	SALEM]		•
691 JONESTO			c. Outside Sc	ource Explanation			
WINSTON-SA	LEM, NC 27103						
					e. I	dection	Sum to Date
		<u> </u>			\$		1,500.00
f. Account Code	g. Form of Payment	h. ln-Kind Descri	ption	i. Date (mm/dd/y	ууу)	j. Amo	ount
C-1	Check			10/14/2014		\$	1,500.00
						\$	
4. Contributor I			Add 🔲 R	eniove			
ì	iling Address & Phone		b. Not-for-Pro	ofit Federal ID#	đ. (Com m e	nts
(include city, s	tate, & zip)						
RAI SERVICES	S COMPANY						
PO BOX 464		•	c. Outside So	urce Explanation			
WINSTON-SAI	LEM, NC 27102					3 4 *	0 / 0
					е. г	1e ction	Sum to Date
					\$		7,500.00
f. Account Code	g. Form of Payment	h. In-Kind Descrip	otion	i. Date (m m/dd/y)	/yy)	j. Am o	unt
C-1	Check			10/09/2014		\$	7,500.00
			<u>. </u>			\$	
5. Total only	this Page				\$		9,000.00
6. Total of AI	L CRO-1250 Pag	es					
(This line goes in (This line goes in	t line 11a of Detailed Sun line 11b of Detailed Sun line 11c of Detailed Sun	umary Page CRO-110 umary Page CRO-110	00 if Not-for-Pro		\$		13,500.00
CRO-1250	tale Tre of Delanea Ban		ard of Elections				December 2007

Disbursen	ients				Pg	1 of	,	Amend		
Use this form to	report expenditures	from the committee	ee for or	neratina evna				<u>I</u> ∟ Yes	s XI No	
committees and	coordinated party e	penditures	oc ioi of	ociating exper	12.02	, commoun	ons R	o candidate/	political	
	ull Name (and Fund		e jedin a ka	Tallor Balling			-	2. ID Num	hau	
	OGETHER WINSTO			ومستنا والماسات والماسات		· · · · · · · · · · · · · · · · · · ·		2. 10 [10][]	ver	
		or or delication								
3. Type of Disbu	irsement <u>(Please</u>	use separate CRC)-1310 j	forms for eac	li tvi	e of Disbu	rseme	ent.)		
Operating Exp		ibutions to Candidat						ed Party Exp	enditures	
4. Payee Inform	the state of the s			Add 🔲	Rei	nove				
a. Full Name, M	ailing Address & Pho	one		b. Coordinate	d Co	mmittee N	am e	d. Commen	ıts	
(include city, sta	te, & zip)									
WEPAY INC					_					
380 PORTAGE].	c. Level Regis	tere					
PALO ALTO, (CA 94306			Federal		County:				
·			_	State		Municip	ality:	e. Dection	Sum to Date	
								\$	102.99	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	i. A	mount	k. Re	quired Rem	arks	
C-1		K	- 444 51111 213:2::2::2:	/20/2014	\$	102.99	 -	INE DONA		
- -		· · ·			<u> </u>		l	S 9/20-10/2	·	
					\$			- 7,20 10,2		
5. Total only thi	s Page				:			\$	102.99	
6. Total of ALL	CRO-1310 Pages									
(This line goes i	n line 13a of Detailed S	ummary Page CRO-	1100 if C	Operating Expe	nses)			•	100.00	
	n line 13b of Detailed S						omm)	\$	102.99	
(This line goes i	n line 13c of Detailed S	ummary Page CRO-	1100 if C	Coordinated Pa	rty E	xpenditures)	_			
7. Purpose Co	odes (List detailed	expenditure code	in (h.) a	bove)						
A* - Media	B* - Printin	g	C* - Fu	indraising		D - To	Anotl	her Candida	te	
E - Salaries	F* - Equipme	ent		tical Party		H* - H	olding	Public Offi	ice Expenses	
I - Postage				ffice Expenses	S	Q* - Donation to Legal Expense Fund				
O* Other								-	-	
	e detailed explanatio									
CRO-1310		NC St	ate Boar	d of Elections					December 2009	

December 2009

Aggregated	Non-Media	Expenditures
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	Amendm	ent			
Page1_ of1_	Yes	X	No		

Optional form used to report NC Non-Media Expenditures of \$50 or less

o peronar re	mit asoa to rope	of NC Non-Inlegia	Daponakaros o	i φ50 Or 1033.			
1. Committe	ee Full Name (and	I Fund if applicable)	or Brain Area (I. A.T.)	wiki a a da inga	2. ID	Number	
FORWARI	D TOGETHER W	VINSTON-SALEM	CONTROL OF THE SECTION OF THE CONTROL OF THE SECTION OF THE SECTIO	A STANDARD OF THE PARTY OF THE			
					<u> </u>		
3. Payee Int						atti i	
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	c. Date (mm/dd/yyyy)	f. Am	ount	g. Required Remarks
☐ Add	C-1	Electric Funds Tran	K	10/01/2014	•	19.85	CHECK ORDER
Remove	J		<u> </u>	10/01/2014	1 J	17.03	
4. Total o	nly this Page				\$		19.85
	f ALL CRO-1	315 Pages f Detailed Summary Pa	90 CRO-1100\		\$		19.85
		detailed expenditu		bove).			
	B*	- Printing	C* - Fundr	aising D -	Γο An	other Car	ndidate
E - Salaı	ries 🛂 🗗	- Equipment	G - Political	Party H*	Holo	ling Publ	lic Office Expenses
I - Posta	ge J-	Penalties	K* - Office	Expenses Q*-	Don:	ations to	Legal Expense Fund
O* - Ot	her	ren english ong er eng					
* Codes	s require detai	led explanation i	n required ren	narks field (g)			

CRO-1315

NC State Board of Elections

December 2009

In-Kind Contributions		ъ	1	1	a	1	Amendm		
		Pg		<u> </u>		1	☐ Yes	X	No
Use this form to report non-monetary contributions, donation	ns,	goods or serv	/ices	prov	vided to	the cor	nmittee or	fund.	
Use CRO-1215 if In-Kind Contributions were or will be	etu	nded within	1 7 d	ays.					
1. Committee Full Name (and Fund if applicable)			· ·		<u> </u>	2. ID	Number		
FORWARD TOGETHER WINSTON-SALEM									
3. Contributor Information	Ac	ld 🔲 Rei	nove					-	
a. Full Name, Mailing Address & Phone	b. ʻ	Type of Con	tribu	tor		c. Con	ments		
(include city, state, & zip)	X	Individual							• • • • • • • • • • • • • • • • • • • •
Aggregated Individual Contribution		Candidate				İ			
		Party							
		PAC							
		Referendum				d. Elec	tion Sum	to Date	
· ·		Other Recei	pt So	urce	:				
			•			\$			26.97
e. Description			f. Da	ate (mm/dd	/уууу)	g. Fair M	arket.	Amount
FACEBOOK PROMO FEES				10/	/03/20	14	\$	··	26.97
							\$		
	· <u>-</u> -						\$		
4. Total only this Page						\$	<u>.</u>		26.97
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO)-11	00)		(† . 12.		\$		•	26.97
CRO-1510 NC State Bo	ard	of Elections			-			Decen	ıber 2007

Amendment Debts and Obligations Owed By the Committee Pg 1 of 1 Yes No. Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card purchases. 1. Committee Full Name (and Fund if applicable) 2. ID Number FORWARD TOGETHER WINSTON-SALEM 3. Creditor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone Note: All payments made toward debts should be listed on (include city, state, & zip) form CRO-1310 with the payee listed as this creditor. b. Description of Creditor 315 NORTH SPRUCE ST, SUITE 215 MARKETING SERVIC ES WINSTON-SALEM, NC 27101 c. Beginning Balance d. Total Amount Paid e. Total Amount Incurred f. Remaining Balance 0.00 0.00 19,164.27 19,164.27 g. Incurred Debts (what the committee received this period) g1. Purchase Place Full Name, Mailing Address & Phone g2. Date (mm/dd/yyyy) g3. Amount (include city, state, & zip) 10/19/2014 13.17 **VELA** 315 NORTH SPRUCE ST, SUITE 215 g4. Purpose Code g5. Required Remarks WINSTON-SALEM, NC 27101 WEBSITE FEES g1. Purchase Place Full Name, Mailing Address & Phone g2. Date (mm/dd/yyyy) g3. Amount (include city, state, & zip) 10/19/2014 682.77 **VELA** 315 NORTH SPRUCE ST, SUITE 215 g4. Purpose Code g5. Required Remarks 27101 CARDS & WINDOW SIGNS В g1. Purchase Place Full Name, Mailing Address & Phone g2. Date (mm/dd/yyyy) g3. Amount (include city, state, & zip) 10/19/2014 2,431.77 VELA. 315 NORTH SPRUCE ST, SUITE 215 g4. Purpose Code g5. Required Remarks 27101 YARD SIGNS g1. Purchase Place Full Name, Mailing Address & Phone g2. Date (mm/dd/yyyy) g3. Amount (include city, state, & zip) 10/19/2014 5,036.56 VELA 315 NORTH SPRUCE ST, SUITE 215 g4. Purpose Code g5. Required Remarks 27101 ADS - JOURNAL, CHRONICLE & PHOENIX A gl. Purchase Place Full Name, Mailing Address & Phone g2. Date (mm/dd/yyyy) g3. Amount (include city, state, & zip) 10/19/2014 11,000.00 315 NORTH SPRUCE ST, SUITE 215 g4. Purpose Code g5. Required Remarks 27101 DIRECT MAIL BI 4. Total only this Page \$ 19,164.27 (This should be the sum of all items 'g3.' from this page) 5. Total of ALL CRO-1610 Pages 19,164.27 (This line must be on line 22 of Detailed Summary Page CRO-1100) 6. Pupose Codes (List detailed expenditure code in (g4.) A* - Media B* - Printing C* - Fundraising D - To Another Candidate

E - Salaries

I - Postage

F* - Equipment

J - Penalties

* Codes require detailed explanation in required remarks field (g5.)

G - Political Party

K* - Office Expenses

H* - Holding Public Office Expenses

O* - Other