Disclosure Report Cover



Amendment

Yes X No

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 Ir	nformation					take villi	epillity .	
a. Full Name					-	1 1 1		c. ID Number
FORWARD TO	OGETHER W	'INSTON-SALI	EM		Ç.	1 1	1,00	
b. Mailing Addre	ess (include C	ity, State and Zi	p Code)					d. Date Filed
315 NORTH S WINSTON-SA		EET, SUITE 21 7101	5					11/14/2014
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							e. Phone Number
2. Report Year	3. Period Sta	rt Date (mm/dd/	уу)	4. Period	End Da	te (mm/dd/yy) 5. Treasu	rer Full Name
2014	1	0/21/2014			11/07/2	2014	JACK H	CAMPBELL JR
6. Type of Comm	nittee (Check	One)		e of Repor	t (c)			ort from one category)
Candidate Can		rty	Munic			State/Count		Referendum
Joint Fundrais	_			Organizatio		Organizat		☐ Organizational
X Referendum		gal Expense Fund] 🗆	Thirty-five	day	Quarterly		Pre-referendum
7. Type of Fund	the same of the water of the state of the same	ole, check one)	□	Pre-primar	у	First		X Final
Booster Fund	ļr:			Pre-election	n ,	☐ Secor	ıd	Supplemental Final
Building Fund			i 🗆	Pre-runoff		☐ Thire	i	Annual
_	lection Year Cai			Semi-annua	d	☐ Fourt	h	☐ Special
☐ NC Public Can	npaign Financin	g Fund		Mid Ye	ar	Semi-anni		
				Year E	nd	☐ Mid Y		10. Special Report Name
Other:				Final		☐ Year	End	
8. Number of Fu	ndraisers thi	s Report	□	Special		Final		
	0					☐ Special		
3. Account Infor	mation				3. Acc	ount Informa	tion	
a. Financial Insti		me				ncial Institut		1 e
NEWBRIDGE I	BANK							
b. Purpose		c. Account Cod	e		b. Purp	ose		c. Account Code
DEPOSITING			 C-1					
DONATIONS A	AND	`	J-1					·
PAYING EXPE	ENSES	d. Period Begin	Balanc	:e				d. Period Begin Balance
		\$						\$
CERTIFICATIO	N	<u> </u>						
I certify that th Chapter 163 of	ne Committee of Tthe NC Gener	ral Statutes and	that no	funds are	commin	gled with pr	ohibited or o	2A, 22B & 22D-22M of other non-disclosed and by the NC State Board
JACK	H. CAMPB inted Name of S	ELL JR.	-	Sign	ayure of	Appointed Tre	asurer	11/14/2014 Date
FOR OFFICE US	SEONLY							
Date Receive	d:		_	Employ	/ee:	·	— □	<u>ivery Method</u> Normal Mail
Date Postmar	ked:		_	Employ	/ee: _			Registered Mail Hand Delivered
Date Scanned	d:		_	Employ	/ee: _		_	Electronically Filed
Date Data En	tered:		· —	Employ	/ee: _			Signer has not received mandatory training
	assistar	nt treasurer, cus	todian o	of books in	formati	on, or accou	nt informatio	
V	nu must amena	d the Statement	of Orga	nization (($RO_{-}21$	IDA "E) to ma	ke committee	e changes

Amendment X No ☐ Yes

Detailed Summary

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

1. Committee Full Name (and Fund if applicable)

| 2. Type of Report |

1. Committee Full Name (and Fund if applicable)	2. Type of Ro	eport	3.	3. ID Number		
FORWARD TOGETHER WINSTON-SALEM	2014 Final					
Start of Election Cycle: January 1,		Total Reportin]	Total this Election Cycle	
4) Cash on Hand at Start			20,407.16	\$	0.00	
RECEIPTS			·			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	0.00	\$	151.97	
6) Contributions from Individuals	(CRO-1210)	\$	6,100.00	\$	13,005.00	
7) Contributions from Political Party Committees	(CRO-1220)	\$	0.00	\$	0.00	
8) Contributions from Other Political Committees	(CRO-1230)	\$	1,000.00	\$	1,000.00	
9) Loan Proceeds	(CRO-1410)	\$	0.00	\$	0.00	
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	0.00	\$	0.00	
11) Other Receipt Sources						
11a) Interest on Bank Accounts	(CRO-1250)	\$	0.00	\$	0.00	
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$ 1	3,000.00	\$	13,000.00	
11c) Outside Sources of Income	(CRO-1250)	\$ 1	0,250.00	\$	23,750.00	
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	0.00	\$	0.00	
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	0.00	\$	0.00	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c	,11d and 11e)	\$ 3	0,350.00	\$	50,906.97	
EXPENDITURES	to start that take at the town towns and					
13) Disbursements						
13a) Operating Expenditures	(CRO-1310)	\$ 30	0,707.17	\$	30,810.16	
13b) Contributions to Candidates/Political Committees	(CRO-131θ)	\$	0.00	\$	0.00	
13c) Coordinated Party Expenditures	(CRO-1310)	\$	0.00	\$	0.00	
4) Aggregated Non-Media Expenditures	(CRO-1315)	\$	0.00	\$	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)	\$	0.00	\$	26.97	
8) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15	,	\$ 3(,707.17	\$	30,856.98	
9) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18)	\$ 20	,049.99	\$	20,049.99	
ADDITIONAL INFORMATION				200		
0) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	0.00			
1) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	0.00			
2) Debts and Obligations owed by the Committee	(CRO-1610)	\$ 14	,924.16	1		
3) Debts and Obligations owed to the Committee	(CRO-1620)	\$	0.00		Company of the	
4) Account Transfers Within the Committee	(CRO-1720)	\$	0.00			
5) Administrative Support	(CRO-1710)	\$	0.00	\$	0.00	
6) Forgiven Loans	(CRO-1440)	\$	0.00	\$	0.00	
7) 48-Hour Notice Reports Sum	(CRO-2220)	\$	0.00	\$	0.00	
8) Contributions to be Refunded	(CRO-1215)	\$	0.00	\$	0.00	
RO-1100 NC State Board	of Elections				August 2008	

Use this form to report individual contributions over \$50 or contributions under \$50 if for a committee Full Name (and Fund if applicable) FORWARD TOGETHER WINSTON-SALEM			No No
		05 is not us . ID Numb	
 	<u>. 1 </u>	. ID Numo	er .
3. Contributor Information	Fac 711 1 2 2 2		sti e na l
a. Full Name, Mailing Address & Phone b. Job Title/Profession	d.	. Commen	ts
(include city, state, & zip) HOUSEWIFE			•••
ANNE ARMFIELD			
1916 GREENBRIER RD c. Employer's Name/Specif	fic Field		
WINSTON-SALEM, NC 27104 N/A		Ti -tion S	- to Note
	-	·	Sum to Date
·	\$	\$	100.00
f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm	ı/dd/yyyy)	k. Amou	ınt
□ C-1 Credit Card 10/22	2/2014	\$	100.00
		\$	
		\$	
3. Contributor Information ☐ Add ☐ Remove			a dažviciji ji jeja i
a. Full Name, Mailing Address & Phone b. Job Title/Profession	d.	Comment	is the second of
(include city, state, & zip) CHAIRMAN/CEO	~		
DONALD E FLOW	·-· • •		
224 ROSLYN ROAD c. Emptoyer's Name/Specif			
WINSTON-SALEM, NC 27104 FLOW AUTOMOTIVE		Maction S	um to Date
INC.		,	
	\$		5,000.00
f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm	/dd/yyyy)	k. Amou	nt .
C-1 Check 10/30)/2014	\$	5,000.00
		\$	
		\$	
3. Contributor Information			
a. Full Name, Mailing Address & Phone b. Job Title/Profession	d. 0	Comments	s
(include city, state, & zip) EVP	_	_	
ANDREW GILCHRIST 125 WINDHAM FARM LANE c. Employer's Name/Specifi	- Elald		
125 WINDHAM FARM LANE LEWISVILLE, NC 27023 C. Employer's Name/Specifi REYNOLDS AMERICAN			
LEWISVIELE, NC 2/023	N, 119C.	Election Su	um to Date
	\$		500.00
		k. Amour	
f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/	uu/jjjj/		
f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/		\$	500.00
Charle		\$	300.00
□ C-1 Check 11/04.			300.00
□ C-1 Check 11/04.		\$	5,600.00

Amendment

					Amenun	16411	
Contributions from Individuals	Pg	2	of	2	☐ Yes	X	ì
		1 000	100	OD 0 1005			

No Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Com	mittee Full Name	(and Fund if applicab	le)		e dedicipation	2. ID Nu	mber		
FORW	ARD TOGETHE	ER WINSTON-SALE	M						
3. Cont	ributor Informati	ion		Add 🔲 1	Remove	<u> </u>			
a. Full Name, Mailing Address & Phone b. Job Title/Profession c						d. Comm	d. Comments		
(inclu	ide city, state, & z	ip)		CEO	•				
WILLI	AM E HOLLAN	JR	*,						
420 W FOURTH ST, SUITE 202B c. Employer's Name/Specific Field						_			
WINSTON-SALEM, NC 27101 TURNPIKE PROPERTIES,									
	INC.				e. Election Sum to Date				
						\$	500.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)	k. Ar	nount		
	C-1	Check			11/04/2014	\$	500.00		
						\$			
						\$			
	al only this Pa	 				\$	500.00		
	al of ALL CRO	O-1210 Pages 6 of Detailed Summary F	Page CRO-1100)			\$	6,100.00		

CRO-1210

NC State Board of Elections

April 2007

Contributi	ions from Othe	er Political C	Committees	Pg <u>l</u> of	1	Amendment Yes No
Use this form to	report contributions	from other candida	te, referendum or l	PAC committees		
1. Committee F	ull Name (and Fund if	applicable)			2. I	D Number
FORWARD TO	OGETHER WINSTO	N-SALEM	,			
3. Contributor		ja val et 📮	Add 🔲 🕾 🚽	Remove	<u> </u>	
a. Full Name, Mailing Address & Phone b. Type of Committee						omments
(include city,	state, & zip)		☐ Candidate	X PAC		
PIEDMONT S	TONE CENTER PAC	2	Referendum]	
3825 FORRES	TGATE DR		c. Level Register	ed (Specify)]	
WINSTON-SA	LEM, NC 27103		☐ Federal	County:		
	•		∑ State	☐ Municipality:	e. E	lection Sum to Date
					\$	1,000.00
f. Account Code	g. Form of Payment	h. In-Kind Descri	ption	i. Date (mm/dd/yy	yyy)	j. Amount
C-1	Check			10/24/2014		\$ 1,000.00
						\$
						\$
4. Total only this	s Page				\$	\$1,000.00
	CRO-1230 Pages be on line 8 of Detailed S	ummary Page CRO-1	100)		\$	\$1,000.00
CRO-1230		NC State	Board of Elections	•		April 2007

April 2007

				ZV DI	chament	
Other Receipt Sources	Pg	<u>l</u>	of _	<u>1</u> 🗆	Yes 💆	No
Use this form to report income not reported on another form. i.e	. interest	income,	not for	profit co	ntribution	s etc.

1 Committee F	ull Name (and Fund if	amplicable)	The State of		160	m ar	
	OGETHER WINSTO				12:	ID Nu	mber
				•	<u>.</u>		
3. Type of Rece				r each type of Rec			
☐ Interest	X Contr	butions from Not-for	-Profit Organiz	ations 🔲 Outside Sc	urce	s of Inc	ome
4. Contributor	Information	ene de la composición de la 🗖	Add 🔲 F	lemove	Nati		tiga tiganing kanal
a. Full Name, M:	ailing Address & Phon	e	b. Not-for-Pi	rofit Federal ID#	d. (Comm	ents
(include city,	state, & zip)		20	-8548088			
DATAMAX FO	OUNDATION						
PO BOX 3136			c. Outside S	ource Explanation	1		
WINSTON-SA	LEM, NC 27102				L.		
					e. i	dectio	n Sum to Date
					\$		10,000.00
f. Account Code	g. Form of Payment	h. In-Kind Descri	ption	i. Date (mm/dd/yy	ууу)	j. Am	ount
C-1	Check			11/05/2014		\$	10,000.00
						\$	
4. Contributor I	nformation		Add ∏ R	emove		. gr ⁱⁿ ga	
a. Full Name, Ma	iling Address & Phone		b. Not-for-Pr	ofit Federal ID#	d. C	omme	nts
(include city, s	tate, & zip)		30-	-0148699			
THE MILLENI	UM FUND]		
C/O WINSTON	I-SALEM FOUNDAT	ION	c. Outside So	ource Explanation			
	JRTH ST, SUITE 200)]				
WINSTON-SA	LEM, NC 27101				e. E	lection	Sum to Date
					\$		3,000.00
f. Account Code	g. Form of Payment	h. In-Kind Descrip	otion	i. Date (mm/dd/yy	yy)	j. Am c	unt
C-1	Check			10/24/2014		\$	3,000.00
						\$	
5. Total only	this Page				\$		13,000.00
(This line goes in (This line goes in (This line goes in	L CRO-1250 Pag line 11a of Detailed Sun line 11b of Detailed Sun line 11c of Detailed Sun	nmary Page CRO-110 nmary Page CRO-110 nmary Page CRO-110	0 if Not-for-Pro 0 if Outside Soi	irces of Income)	\$		13,000.00
CDO 1250		NIC Chata Da	rd of Flootions				D 1 0000

Other Receipt Sources

					Amenum	eni
Other Receipt Sources	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	t contribu	tions etc.

1 Committee Er	ull Name (and Fund if a	applicable)			12	ID Number
	OGETHER WINSTON	<u> </u>	<u>iki ji saka taji ki ti sa</u>	entropies objekt och	14.	ID I unite
3 Type of Recei	ipt Source (Please us	se senarate CRO-1	250 forms for	each type of Rec	int.	Source.)
Interest		butions from Not-for-				
4. Contributor I	Information	Jeung ban ban ba <mark>⊞</mark>	Add 🔲 Re	move		uskej Istodie garantuski til Set
	ailing Address & Phone			fit Federal ID#		Comments
(include city, s	state, & zip)			-		
DUKE ENERG	γ̈́Υ	-			_[ı
	RYON STREET		c. Outside Sor	urce Explanation]	
CHARLOTTE,	NC 28285					C' 4 0 40 Data
					e. r	Election Sum to Date
			DONATIO	N	\$	3,000.00
f. Account Code	g. Form of Payment	h. In-Kind Descrip		i. Date (mm/dd/yy	L vyy)	j. Amount
C-1	Check	5		10/24/2014	***	\$ 3,000.00
	i					\$
4. Contributor Ir	nformation		Add □ Rei	move	Feet :	
	ailing Address & Phone			fit Federal ID#	d. (Comments
(include city, s	U		M. 1102 202		-	, O 11, 11, O 11, O 11
1001 WEST FO	TOWNSEND & STOC DURTH STREET LEM, NC 27101		c. Outside Sou	irce Explanation		Dection Sum to Date
f Account Code	g. Form of Payment	h. In-Kind Descrip	DONATION	,	\$	3,000.00
C-1	Check	H. III-MIRU DESCRIP	11011	i. Date (mm/dd/yy 11/05/2014	yy)	
U-1	CIRCIA			11/03/2014	_	\$ 3,000.00
						\$
4. Contributor In				nove	<u> </u>	
	iling Address & Phone		b. Not-for-Profi	it Federal ID#	d. C	Comments
(include city, st			I		Ì	
	ALTY GROUP, INC. 'ST, SUITE 200	•	c. Outside Sou	rce Explanation		
	LEM, NC 27101	<u> </u>			ļ	
W11101011 54	/DN1, 140 27101	1		<u> </u>	e. El	lection Sum to Date
			DONATION	,	\$	250.00
. Account Code	g. Form of Payment	h. In-Kind Descript		i. Date (mm/dd/yy)	ועע	i Amount
C-1	Check	1111-15116 2000-1-		11/04/2014	137	
	Check			11/04/2014	\dashv	\$ 250.00
		1				\$
. Total only t	his Page				\$	6,250.00
(This line goes in (This line goes in	L CRO-1250 Page line 11a of Detailed Sums line 11b of Detailed Sums line 11c of Detailed Sums	mary Page CRO-1100 mary Page CRO-1100	0 if Not-for-Profi	it Contribution)	\$	10,250.00

			Amenam	ent
Pg	 of	2	☐ Yes	No No

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

1. Committee F	ull Name (and Fund if	applicable)	i verile di e	frankle moli i	2.	ID Number	
FORWARD TO	OGETHER WINSTON	I-SALEM					
3. Type of Recei				each type of Rec			
☐ Interest		outions from Not-for	-Profit Organizat	tions 🗶 Outside So	urce	s of Income	
4. Contributor I				emove			
1	illing Address & Phone		b. Not-for-Pro	ofit Federal ID#	d. e	Comments	
(include city,	state, & zip)						
THE BUDD GROUP, INC. PO BOX 25128 c. Outside Source Explai							
PO BOX 25128			c. Outside So	urce Explanation	-		
WINSTON-SA	LEM, NC 27114				e. I	Jection Sum to Date	
	,	·					
			DONATION	3	\$	1,000.00	
f. Account Code	g. Form of Payment	h. In-Kind Descri	ption	i. Date (mm/dd/yy	ууу)	j. Amount	
C-1	Check	[11/04/2014		\$ 1,000.00	
				·		\$	
4. Contributor I	nformation	fille (17 li 🖂 🖟 🗖	Add 🔲 Re	move			
	iling Address & Phone		b. Not-for-Pro	fit Federal ID#	d. C	Comments	
(include city, s	tate, & zip)						
	RLYLE SANDRIDGE	& RICE, LLP					
	OURTH STREET		c. Outside Sou	urce Explanation			
WINSTON-SAI	LEM, NC 27101				e. Election Sum to Date		
			DONATIO	N	\$	3,000.00	
f. Account Code	g. Form of Payment	h. In-Kind Descri	ption	i. Date (mm/dd/yy	уу)	j. Amount	
C-1	Check			10/30/2014		\$ 3,000.00	
						\$	
5. Total only					\$	4,000.00	
(This line goes in (This line goes in	L CRO-1250 Pag line 11a of Detailed Sum line 11b of Detailed Sum line 11c of Detailed Sum	mary Page CRO-11 mary Page CRO-11	00 if Not-for-Proj		\$	10,250.00	
CRO-1250		December 2007					

	•					Amendmer
Disbursements		Pg	1	of	2_	☐ Yes

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

	'ull Name (and Fund OGETHER WINST							2. ID Nu	mber	
3. Type of Disb	preamant (Please	use separate CR	2-1316	forms for ear	h t	one of Dishu	reom	ont l		
Operating Ex		ributions to Candida							xpenditures	
4. Payee Inforn				Add 🔲		emove	0.01114	iod i di c, E	Apontaieta es	
	ailing Address & Ph			b. Coordinate			ame	d. Comm	ents	
(include city, sta	_	one			-					
UNION BAPT				-						
1200 N TRAD				c. Level Regi	ster	ed (Specify)		1		
	LEM, NC 27101			☐ Federal		County	:			
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2011, 1,0 2,101			☐ State		☐ Municip	ality:	e. Electio	n Sum to Date	
								\$	25.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j.	Amount	k. Re	quired Re	marks	
C-1	Check	0	1	1/04/2014	\$	25.00	FOC	D & REF	RESHMENTS	
					\$		ı	MEETING		
	<u> </u>		<u> </u>	· · · · · · · · · · · · · · · · · · ·			<u> </u>		·-· -	
4. Payee Inform				Add	24.4	move		Sal gymese:		
	ailing Address & Pho	one		b. Coordinate	d C	ommittee Na	am e	d. Comm	ents	
(include city, sta	te, & zip)			1				ĺ		
VELA	DIIOD OD OVIVOYD			c. Level Regis	tare	d (Specify)				
	PRUCE ST, SUITE T	215		Federal	ici	County:				
WINSTON-SA.	LEM, NC 27101			State				e. Election	Sum to Date	
					— <u></u>					
]			i	\$	30,677.68	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. /	Amount	k. Re	quired Re	marks	
C-1	Check	AO	1	1/02/2014	\$	6,605.28	ADS	& MARI	KETING	
			_		\$		SER	VICES	-	
4. Payee Inform	ation		П	Add 🔲	Ře	move		ar Narawa		
	iling Address & Pho		·	b. Coordinate			me	d. Comme	nts	
(include city, sta	_			——————————————————————————————————————		•				
VELA										
	RUCE ST, SUITE 2	215		c. Level Regis	tere	d (Specify)				
WINSTON-SAI	LEM, NC 27101			☐ Federal		County:]			
				☐ State		☐ Municip	ality:	e. Election	Sum to Date	
,								\$	30,677.68	
. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. A	mount	k. Red	quired Rer	narks	
C-1	Check	ABI	10	/27/2014	\$	19,164.27	WEB	SITE, SIG	GNS, ADS,	
C-1	Check	AO	10	/28/2014	\$	4,908.13	DIKE BILL	CT MAII BOARDS	& T-SHIRTS	
5. Total only this	Page							\$	30,702.68	
. Total of ALL C	CRO-1310 Pages			a, i sa salifar di		J.Surred N.S			<u>.</u> .	
	line 13a of Detailed Si	ummarv Page CRO-	1100 if	Operating Expe	1505)					
	line 13b of Detailed Si						mm)	\$	30,707.17	
	line 13c of Detailed St									
. Purpose Co	des (List detailed o	expenditure code i	n (h.) a	bove)	g EZ			fra Silvino		
* - Media	B* - Printing			indraising		D - To 4	Anoth	er Candid	ate	
C - Salaries	F* - Equipme	•		itical Party					fice Expenses	
- Postage	J - Penalties			ffice Expenses					Expense Fund	
)* Other				•				-		
Codes require	detailed explanation	in required rema	irks fi	eld (k)	ΑĮ,			Maria Pi	Alberta V	

~~								Amen	ı dm e n t
Disbursen	nents				$\mathbf{P}\mathbf{g}$	of		2_ U Y	es 🛛 No
	o report expenditures I coordinated party e		ee for c	perating expe	nses,	contributi	ons to	candidat	e/political
1. Committee F	ull Name (and Fund	if applicable)						2. ID Nur	nber
FORWARD T	OGETHER WINSTO	ON-SALEM	٠						
3. Type of Disb	ursement (Please	use separate CR(<i>)-1310</i>	forms for eac	h typ	e of Disbu	rseme	nt.)	
X Operating Ex	penses	ributions to Candida	tes/Polit	ical Committees	3	Cod	ordinat	ed Party Ex	penditures
4. Payee Inform	nation			Add 🔲	Ren	ove		alder S	The second of th
a. Full Name, M	ailing Address & Ph	one		b. Coordinate	d Co	nmittee Na	ame	d. Comme	ents
(include city, sta	ate, & zip)				,				
WEPAY INC									
380 PORTAGE	EAVE			c. Level Registered (Specify)					
PALO ALTO,	CA 94306			☐ Federal		County:			
				☐ State		∐ Municip	ality:	e. Election	Sum to Date
								\$	107.48
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. An	nount	k. Re	quired Rei	narks
C-1	Electric Funds Tran	K	10	0/23/2014	\$	4.49	ONL	INE DON	IATION FEE
					\$				٠
5. Total only thi	s Page							\$	4.49
(This line goes i (This line goes i	CRO-1310 Pages in line 13a of Detailed S in line 13b of Detailed S in line 13c of Detailed S	ummary Page CRO	-1100 if	Contrib to Cana	idates		omm)	\$	30,707.17
7. Purpose Co	odes (List detailed	expenditure code	in (h.)	above)	Territory			i de Tabi	

C* - Fundraising

G - Political Party

NC State Board of Elections

K* - Office Expenses

D - To Another Candidate

H* - Holding Public Office Expenses

Q* - Donation to Legal Expense Fund

December 2009

B* - Printing

J - Penalties

F* - Equipment

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

A* - Media

E - Salaries

I - Postage

O* Other

CRO-1310

Debts and Obligati				to in all	_ of	Ye	S No
1. Committee Full Name (and FORWARD TOGETHER WIN	Fund if applicable)	die er de	by die conninces,		cel :	2. ID Num	
3. Creditor Information	en little til ett kan state i s	isin di Fi l	Add □ Re	move	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		
a. Full Name, Mailing Address	& Phone		Note: All payme	nts m:	ide towa	rd debts sho	uld be listed on
(include city, state, & zip) VELA			form CRO-13 b. Description of C			ee listed as	this creditor.
315 NORTH SPRUCE ST, SUITE 215 WINSTON-SALEM, NC 27101		_	MARKETING SERVIC	****************	r		
c. Beginning Balance	d. Total Amount Paid		e. Total Amount In	curred	 [f. Remaini	ng Balance
\$ 19,164.27	S	9,164.27	S	14,924	.16		
g. Incurred Debts (what the co			J				
gl. Purchase Place Full Name,	Mailing Address & Pho	Dé	g2. Date (mm/dd/y)	173)	g3. Am	ount	
(include city, state, & zip)					S		
			g4. Purpose Code	g5	Require	ed Remarks	
					·····		
gl. Purchase Place Full Name,	Mailing Address & Phot	7÷	g2. Date (mm/dd/yy	<u>)</u> (33)	g3. Amı	ouat	
(include city, state, & zip) VELA			11/02/2014		S		1,090.0
315 NORTH SPRUCE ST, SUITE 215	•		g4. Purpose Code		g5. Required Rea		
27101			A		S - JOURN		
gl. Purchase Place Full Name,	Mailing Address & Phon		g2. Date (mm/dd/yy		g3. Amo	4	
(include city, state, & zip)	and the state of t			¥¥,		······································	
VELA 315 NORTH SPRUCE ST, SÚÍTE 215			11/02/2014		3		8,320.6
27101		ľ	g4. Purpose Code g5. Requir HANDOUTS &				***************************************
(1. Purchase Place Full Name, 1	Vailing Address & Phon		g2. Date (mm/dd/yy)	mel	g3. Amo		
(include city, state, & zip)			11/03/2014	132	<u>ده س</u>	WILL	2 257 57
/ELA 15 NORTH SPRUCE ST, SUITE 215		<u> </u>	4. Purpose Code			I Paranda	2,257.50
7101		[")	Required Remarks KETING SERVICES			
1 Burshas District 1 N 3	f 22						
l. Purchase Place Full Name, M (include city, state, & zip)	asming Address & Phon		2. Date (mm/dd/yyy	3)	g3. Amor	unt	
ELA 15 NORTH SPRUCE ST, SUITE 215			11/04/2014		<u> </u>		3,256.05
7101	•	,	4. Purpose Code		Required WORKER	Remarks S	
		(
Total only this Page				18 12 1 1 2 2 2 1 1 2 2 2 1	\$	14,924.16	
this should be the sum of all n . Total of ALL CRO-16						14,724.10	
his line must be on line 22 of		CRO-110	0)		\$	14,924.16	
. Pupose Codes (List de	ailed expenditure	code in	(24 .)	Turin.	35 沙夏		
* - Media B* - J	Printing	C* - Fun	draising			her Candida	
		G - Politic				Public Off	ice Expenses
- Postage J - P Codes require detailed explan	enalties	K* - Offi - 6-14/ -	ce Expenses	O* -	Other		
R <i>O-1610</i>			of Elections		·		

Amendment