

Disclosure Report Cover

Amendment

Yes 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.

I. Committee Information				
a. Full Name			c. ID Number	
Committee to Elect CHARLES EVANS			Q2Y26Y	
b. Mailing Address (include City, State and Zip Code)			d. Date Filed	
1707 Eldridge St Fayetteville, N.C.				
			e. Phone Number	
			910 488-0945	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name	
2010	10.17.10	12.31.10	Helen FARRIOR	
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> Legal Expense Fund		Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special		
		State/County <input type="checkbox"/> Organizational Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input checked="" type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special		
7. Type of Fund (if applicable, check one)		10. Special Report Name		
<input type="checkbox"/> Booster Fund <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:				
8. Number of Fundraisers this Report				
11. Account Information		11. Account Information		
a. Financial Institution Full Name		a. Financial Institution Full Name		
BB&T Bank		BB&T Bank		
b. Purpose	c. Account Code	b. Purpose	c. Account Code	
Campaign receipts -				
	d. Period Begin Balance		d. Period Begin Balance	
	\$ 471.57		\$	
CERTIFICATION				
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.				
Helen FARRIOR		Helen H. FARRIOR		1-25-13
Printed Name of Signer		Signature of Appointed Treasurer		Date
FOR OFFICE USE ONLY				
Date Received:	JAN 28 2013	Employee:	Delivery Method	
Date Postmarked:		Employee:	<input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed	
Date Scanned:		Employee:	<input type="checkbox"/> Signer has not received mandatory training	
Date Data Entered:		Employee:		
<p>Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information. You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.</p>				

Detailed Summary

Amendment
 Yes No

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	3. ID Number	
<i>Committee to Elect Charles Elbers</i>		<i>Q24264</i>	
Start of Election Cycle: January 1, <u>2010</u>	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start	\$ <i>995.42</i>	\$ <i>0</i>	
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)	\$ <i>1,075.00</i>	\$ <i>3,445.60</i>	
6) Contributions from Individuals (CRO-1210)	\$ <i>575.00</i>	\$ <i>9,000.00</i>	
7) Contributions from Political Party Committees (CRO-1220)	\$ <i>100.00</i>	\$ <i>2,337.06</i>	
8) Contributions from Other Political Committees (CRO-1230)	\$ <i>500.00</i>	\$ <i>2,737.06</i>	
9) Loan Proceeds (CRO-1410)	\$	\$ <i>4,440.00</i>	
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 Organizations (CRO-1250)	\$	\$	
11c) Outside Sources of Income (CRO-1250)	\$	\$	
11d) Legal Expense Fund - Other Sources (CRO-1270)	\$	\$	
11e) Exempt Purchase Price Sales (CRO-1265)	\$	\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$ <i>2,250.</i>	\$ <i>19,422.06.</i>	
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)	\$ <i>1,788.70</i>	\$ <i>17,965.34</i>	
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$	\$	
13c) Coordinated Party Expenditures (CRO-1310)	\$	\$	
14) Aggregated Non-Media Expenditures (CRO-1315)	\$	\$	
15) Loan Repayments (CRO-1420)	\$	\$	
16) Refunds/Reimbursements from the Committee (CRO-1320)	\$	\$	
17) In-Kind Contributions (CRO-1510)	\$	\$	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ <i>1,788.70</i>	\$ <i>17,965.34</i>	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ <i>1,456.72</i>	\$ <i>1,456.72</i>	
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$		
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$ <i>4,140.00</i>		
22) Debts and Obligations owed by the Committee (CRO-1610)	\$ <i>1,039.58</i>		
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-2220)	\$ <i>1,000.00</i>	\$	
28) Contributions to be Refunded (CRO-1215)	\$	\$	

Aggregated Contributions from Individuals

Page ____ of ____

Amendment
 Yes No

Optional form used to report NC Contributions From Individuals of \$50 or less

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Committee to Elect Charles Evans				Q246Y	
3. Contributor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/> Add		CC		11/01/10	\$ 50.
<input type="checkbox"/> Remove		CC		11/01/10	\$ 50.
<input type="checkbox"/> Add		CC		11/02/10	\$ 50.
<input type="checkbox"/> Remove		CC		11/02/10	\$ 50.
<input type="checkbox"/> Add		CC		11/03/10	\$ 25
<input type="checkbox"/> Remove		CC		11/03/10	\$ 25
<input type="checkbox"/> Add		CC		11/04/10	\$ 25
<input type="checkbox"/> Remove		CC		11/04/10	\$ 25
<input type="checkbox"/> Add		CC		10.20.10	\$ 50.
<input type="checkbox"/> Remove		CC		10.20.10	\$ 50.
<input type="checkbox"/> Add		CC		10.20.10	\$ 50.
<input type="checkbox"/> Remove		CC		10.21.10	\$ 25.
<input type="checkbox"/> Add		CC		10.21.10	\$ 50.
<input type="checkbox"/> Remove		CC		10.24.10	\$ 50.
<input type="checkbox"/> Add		CC		10.25.10	\$ 50.
<input type="checkbox"/> Remove		CC		10.26.10	\$ 50.
<input type="checkbox"/> Add		CC		10.27.10	\$ 50.
<input type="checkbox"/> Remove		CC		10.27.10	\$ 50.
<input type="checkbox"/> Add		CC		10.28.10	\$ 50.
<input type="checkbox"/> Remove		CC		10.29.10	\$ 50.
<input type="checkbox"/> Add		CC		10.31.10	\$ 50.
<input type="checkbox"/> Remove		CC		10.31.10	\$ 50.
<input type="checkbox"/> Add		CC		10.31.10	\$ 50.
<input type="checkbox"/> Remove		CC		10.31.10	\$ 50.
4. Total only this Page					\$ 4,025.00
5. Total of ALL CRO-1205 Pages					\$ 4,075.00
<small>(This line must be on line 5 of Detailed Summary Page CRO-1100)</small>					

Contributions from Individuals

Pg ____ of ____ Amendment Yes No

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	
Committee to Elect CHARLES EVANS						92Y26Y	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Catherine Robinson 3745 Myron Rd. Fayetteville, N.C.				Retired			
				c. Employer's Name/Specific Field			
						e. Election Sum to Date	
						\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		CR		10.29.10	\$ 50.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Nancy Shakir 1105 Martindale Dr. Fayetteville, N.C. 28304				Retired			
				c. Employer's Name/Specific Field			
						e. Election Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		CR		10.29.10	\$ 25.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Bobby Hill 5311 Brookfield Rd. Fayetteville, N.C. 28303				Retired			
				c. Employer's Name/Specific Field			
						e. Election Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		CR		10.27.10	\$ 50.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 125.00	
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>						\$ 575.00	

Contributions from Individuals

Pg ____ of ____ Amendment Yes No

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	
Committee to Elect Charles Evers						Q2Y26Y	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Lila B. Harrison 1724 Eldridge St. Fayetteville, NC 28301				retired			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		ck		10.28.10	\$50.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
D. Keith Allison 401 Harlow Dr. Fayetteville, NC				owner			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				System Computers		\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		ck		12.22.10	\$100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Thomas Spencer 102 Open Hearth Ct. Knightdale, NC 27545				Retired			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		ck		12.20.10	\$300.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 450.00	
5. Total of ALL CRO-1210 Pages						\$ 575.00	
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>							

Contributions from Political Party Committees

Pg ____ of ____

Amendment
 Yes No

Use this form to report contributions from a political party

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Committee to Elect CHARLES EVANS				92464	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
Cumberland County Democratic Mens Club 727 Duck Court Fayetteville, NC 28314					
				c. Election Sum to Date	
				\$	
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount	
	CR		10/28/10	\$ 100.00	
				\$	
				\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
				c. Election Sum to Date	
				\$	
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount	
				\$	
				\$	
				\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
				c. Election Sum to Date	
				\$	
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount	
				\$	
				\$	
				\$	
4. Total only this Page				\$ 100.00	
5. Total of ALL CRO-1220 Pages <small>(This line must be on line 7 of Detailed Summary Page CRO-1100)</small>				\$ 100.00	

Contributions from Other Political Committees Pg ____ of ____

Amendment
 Yes No

Use this form to report contributions from other candidate, referendum or PAC committees

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Committee to Elect CHARLES EVANS				92164	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Type of Committee		d. Comments
CCHA Political Action Committee P.O. Box 35312 Fayetteville, NC 28303			<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum		
			c. Level Registered (Specify)		e. Election Sum to Date
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
	CR		12.22.10	\$ 500.00	
				\$	
				\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Type of Committee		d. Comments
			<input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum		
			c. Level Registered (Specify)		e. Election Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
				\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Type of Committee		d. Comments
			<input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum		
			c. Level Registered (Specify)		e. Election Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
				\$	
4. Total only this Page				\$ 500.00	
5. Total of ALL CRO-1230 Pages (This line must be on line 8 of Detailed Summary Page CRO-1100)				\$ 500.00	

Disbursements

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Committee to Elect Charles Evans						92Y26Y	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Debs Digital Designs 429 N. King St Fayetteville, NC 28301							
c. Level Registered (Specify)				<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County:		e. Election Sum to Date	
				<input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	CR		10.22.10	\$ 375.00	Organizing Files		
	CR		11.14.10	\$ 225.00	Printing		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Debs Digital Designs 429 N. King St Fayetteville, NC 28301							
c. Level Registered (Specify)				<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County:		e. Election Sum to Date	
				<input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	CR	12.15.10		\$ 150.00	Invitations, Print		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Speediprint 201 Franklin St. Fayetteville, NC 28301							
c. Level Registered (Specify)				<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County:		e. Election Sum to Date	
				<input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	CR		12.27.10	\$ 1,000.00	Printing		
5. Total only this Page						\$1,750.00	
6. Total of ALL CRO-1310 Pages						\$2,000.00	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)							
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)							
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)							
7. Purpose Codes (List detailed expenditure code in (h.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							

Disbursements

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

1. Committee Full Name (and Fund if applicable) <i>Committee to Elect Charles Evans</i>	2. ID Number
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3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)		
<input type="checkbox"/> Operating Expenses	<input type="checkbox"/> Contributions to Candidates/Political Committees	<input type="checkbox"/> Coordinated Party Expenditures

4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove	
---	--

a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Biscuit Kitchen Grove St Fay. NC 28301</i>	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify)	
	<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> 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
	<i>Cash</i>		<i>10-20-2010</i>	<i>\$ 10.57</i>	
				\$	

4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove	
---	--

a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Bordeaux Cafe Village Drive Fay. NC 28304</i>	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify)	
	<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> 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
			<i>10-22-2010</i>	<i>\$ 28.13</i>	<i>Meals</i>
				\$	

4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove	
---	--

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify)	
	<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> 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
				\$	
				\$	

5. Total only this Page	c. Level Registered (Specify)	\$ <i>38.70</i>
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6. Total of ALL CRO-1310 Pages	<input type="checkbox"/> State <input type="checkbox"/> Municipality	\$
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>		
<i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>		
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>		

7. Purpose Codes: (List detailed expenditure code in (h.) above)			
A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
I - Postage	J - Penalties	K* - Office Expenses	O* - Other
* Codes require detailed explanation in required remarks field (k)			

Debts and Obligations Owed By the Committee

Pg ____ of ____

Amendment

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	
<i>Committee to Elect CHARLES EVANS</i>		<i>92Y26Y</i>	
3. Creditor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor.	
<i>The Fayetteville Press News. P.O. Box 9166 Fayetteville, NC 28311</i>		b. Description of Creditor	
c. Beginning Balance		d. Total Amount Paid	
\$ <i>750.00</i>		\$ <i>500.00</i>	
e. Total Amount Incurred		f. Remaining Balance	
\$		\$ <i>250.00</i>	
g. Incurred Debts (what the committee received this period)			
g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)		g2. Date (mm/dd/yyyy)	g3. Amount
			\$
		g4. Purpose Code	g5. Required Remarks
g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)		g2. Date (mm/dd/yyyy)	g3. Amount
			\$
		g4. Purpose Code	g5. Required Remarks
g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)		g2. Date (mm/dd/yyyy)	g3. Amount
			\$
		g4. Purpose Code	g5. Required Remarks
g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)		g2. Date (mm/dd/yyyy)	g3. Amount
			\$
		g4. Purpose Code	g5. Required Remarks
g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)		g2. Date (mm/dd/yyyy)	g3. Amount
			\$
		g4. Purpose Code	g5. Required Remarks
4. Total only this Page			\$ <i>250.00</i>
(This should be the sum of all items 'g3.' from this page)			
5. Total of ALL CRO-1610 Pages			\$ <i>2,000.00</i>
(This line must be on line 22 of Detailed Summary Page CRO-1100)			
6. Purpose Codes (List detailed expenditure code in (g4.))			
A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
I - Postage	J - Penalties	K* - Office Expenses	O* - Other
* Codes require detailed explanation in required remarks field (g5.)			