

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

1. Committee Information

a. Full Name

Committee to Elect Steve Hunt

c. ID Number

PDUZR8

b. Mailing Address (include City, State and Zip Code)

3121 5th St Pl NW
Hickory, NC 28601

d. Date Filed

07/09/2012

e. Phone Number

828-324-2374

2. Report Year

2012

3. Period Start Date (mm/dd/yy)

04/22/2012

4. Period End Date
(mm/dd/yy)

06/30/2012

5. Treasurer Full Name

David Warren Streater

6. Type of Committee (Check One)

- ☒ Candidate Campaign
☐ PAC
☐ Independent
☐ Expenditure
☐ Legal Expense Fund
- ☐ Party
☐ Referendum
☐ Joint Fundraiser

7. Type of Fund (if applicable, check one)

- ☐ "Booster Fund"
☐ Building Fund

☐ Other:

8. Number of Fundraisers this Report

None

9. Type of Report (check only one type of report from one category)

- | Municipal | State/County | Referendum |
|--|--|---|
| ☐ Organizational | ☐ Organizational | ☐ Organizational |
| ☐ Thirty-five day | ☐ Quarterly | ☐ Pre-referendum |
| ☐ Pre-primary | ☐ First | ☐ Final |
| ☐ Pre-election | ☒ Second | ☐ Supplemental Final |
| ☐ Pre-runoff | ☐ Third | ☐ Annual |
| ☐ Semi-annual | ☐ Fourth | ☐ Special |
| ☐ Mid Year | ☐ Semi-annual | |
| ☐ Year End | ☐ Mid Year | |
| ☐ Final | ☐ Year End | |
| ☐ Special | ☐ Final | |
| | ☐ Special | |

10. Special Report Name

11. Account Information

a. Financial Institution Full Name

BB&T

b. Purpose

Campaign
Account

c. Account Code

SOH

d. Period Begin Balance

\$ 3,604.15

11. Account Information

a. Financial Institution Full Name

b. Purpose

c. Account Code

d. Period Begin Balance

\$

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.

David W. Streater

Printed Name of Signer

Signature of Appointed Treasurer

07/09/2012

Date

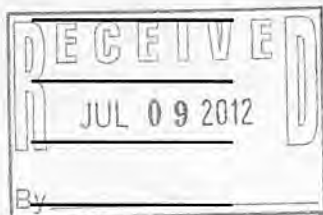
FOR OFFICE USE ONLY

Date Received:

Date Postmarked:

Date Scanned:

Date Data Entered:



Employee: _____

Employee: _____

Employee: _____

Employee: _____

Delivery Method

- ☐ Normal Mail
☐ Registered Mail
☐ Hand Delivered
☐ Electronically Filed
☐ Signer has not received mandatory training

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.

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	
Committee to Elect Steve Hunt		2012 2 nd Quarter		PDUZR8	
Start of Election Cycle: January 1, 2012		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 3,604.15		\$	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$		\$ 40.00	
6) Contributions from Individuals (CRO-1210)		\$ 2,200.42		\$ 6,467.47	
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 Organizations (CRO-1250)		\$		\$	
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)		\$ 2,200.42		\$ 6,507.47	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 4,800.53		\$ 4,925.53	
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)		\$ 175.42		\$ 386.27	
17) In-Kind Contributions (CRO-1510)		\$ 175.42		\$ 542.47	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 5,151.37		\$ 5,854.27	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 653.20		\$ 653.20	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$			
22) Debts and Obligations owed By the Committee (CRO-1610)		\$			
23) Debts and Obligations owed To the Committee (CRO-1620)		\$			
24) Account Transfers Within the Committee (CRO-1720)		\$			
25) Administrative Support (CRO-1710)		\$		\$	
26) Forgiven Loans (CRO-1440)		\$		\$	
27) 48-Hour Notice Reports Sum (CRO-2200)		\$		\$	
28) Contributions to be Refunded (CRO-1215)		\$		\$	

Contributions from Individuals

Pg 1 of 7

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 Steve Hunt					PDUZR8	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Jeffery Cline 623 4 th St NE Hickory, NC 28601			Insurance			
			c. Employer's Name/Specific Field			
			Insurance Business			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
☐	SOH	Check		04/23/2012		\$ 100.00
☐						\$
☐						\$
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Jeanette C. Killian 446 1 st Ave SE Hickory, NC 28602			Retired			
			c. Employer's Name/Specific Field			
			Educator			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
☐	SOH	Check		04/23/2012		\$ 100.00
☐						\$
☐						\$
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Charles R. Young PO Box 7 Hickory, NC 28603			Attorney			
			c. Employer's Name/Specific Field			
			Attorney			
					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
☐	SOH	Check		04/30/2012		\$ 50.00
☐						\$
☐						\$
4. Total only this Page					\$ 250.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 2,200.42	

Contributions from Individuals

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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 Steve Hunt					PDUZR8	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Robert K. Johnson 715 21 st Ave Dr NW Hickory, NC 28601			Furniture Executive			
			c. Employer's Name/Specific Field			
			Executive Position			
					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
☐	SOH	Check		04/30/2012		\$ 50.00
☐						\$
☐						\$
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Thomas C. Goebelbecker 1055 14 th Ave Dr NW Hickory, NC 28601			Salesperson			
			c. Employer's Name/Specific Field			
			General Dynamics			
					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
☐	SOH	Check		05/15/2012		\$ 50.00
☐						\$
☐						\$
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
John G. Ross 2252 5 th St NE Hickory, NC 28601 828-322-8609			Music Conductor			
			c. Employer's Name/Specific Field			
			Musician			
					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
☐	SOH	Check		06/05/2012		\$ 50.00
☐						\$
☐						\$
4. Total only this Page					\$ 150.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 2,200.42	

Contributions from Individuals

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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 Steve Hunt					PDUZR8	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Patricia T. Amoako 844 46 th Ave Dr NE Hickory, NC 28601			Physician			
			c. Employer's Name/Specific Field			
			Hospital/Physician			
					e. Election Sum to Date	
					\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SOH	Check		06/05/2012	\$ 500.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Beth G. Isenhour PO Box 506 Newton, NC 28658			Associate Superintendent			
			c. Employer's Name/Specific Field			
			County Schools			
					e. Election Sum to Date	
					\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SOH	Check		06/05/2012	\$ 150.00	
☐	SOH	Check		06/05/2012	\$ 100.00	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Dr W.J. Ric Vandett 65 40 th Ave Dr NE Hickory, NC 28601			School Superintendent			
			c. Employer's Name/Specific Field			
			School System			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SOH	Check		06/18/2012	\$ 100.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 850.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 2,200.42	

Contributions from Individuals

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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 Steve Hunt					PDUZR8	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
L. Oliver Noble, Jr. 141 36 th Ave NW Hickory, NC 28601			Attorney			
			c. Employer's Name/Specific Field			
			Attorney		e. Election Sum to Date	
				\$ 100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SOH	Check		06/18/2012	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Jenny Noguera 1029 16 th St NE Hickory, NC 28601			Travel Agent			
			c. Employer's Name/Specific Field			
			Travel Agent		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	
☐	SOH	Cash		06/18/2012	\$ 50.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Priscila Noguera 1029 16 th St NE Hickory, NC 28601			Travel Agent			
			c. Employer's Name/Specific Field			
			Travel Agent		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	
☐	SOH	Cash		06/18/2012	\$ 50.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 200.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 2,200.42	

Contributions from Individuals

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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 Steve Hunt					PDUZR8	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Charles D. Dixon 855 20 th Ave Dr NW Hickory, NC 28601			Attorney			
			c. Employer's Name/Specific Field			
			Attorney		e. Election Sum to Date	
				\$ 100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SOH	Check		06/21/2012	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Paul V. Caporossi, MD 2140 9 th St NW Hickory, NC 28601 828-324-9030			Physician			
			c. Employer's Name/Specific Field			
			Physician		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	
☐	SOH	Check		06/26/2012	\$ 50.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Steve M Mull 4258 6 th St Dr NW Hickory, NC 28601 828-324-4509			Business Owner			
			c. Employer's Name/Specific Field			
			Business Owner		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	
☐	SOH	Check		06/26/2012	\$ 50.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 200.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 2,200.42	

Contributions from Individuals

Pg 6 of 7

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 Steve Hunt					PDUZR8	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
John (CJ) Watts, III 448 19 th Ave Cir NW Hickory, NC 28601			Financial Advisor			
			c. Employer's Name/Specific Field			
			Financial Advisor		e. Election Sum to Date	
				\$ 25.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SOH	Check		06/26/2012	\$ 25.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Wilbert Seabock 487-C 26 th Ave NE Hickory, NC 28601			Banker			
			c. Employer's Name/Specific Field			
			Banker		e. Election Sum to Date	
				\$ 25.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SOH	Check		06/26/2012	\$ 25.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Mildred C. Shuford 2425 N. Center St #322 Hickory, NC 28601			Retired			
			c. Employer's Name/Specific Field			
			Manuf. Owner		e. Election Sum to Date	
				\$ 100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SOH	Check		06/26/2012	\$ 100.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 150.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 2,200.42	

Contributions from Individuals

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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 Steve Hunt					PDUZR8	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Robert Conrad 1362 10 th St Pl NW Hickory, NC 28601-2311 828-328-3490			Salesperson			
			c. Employer's Name/Specific Field			
			Chemical Salesperson		e. Election Sum to Date	
				\$ 25.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SOH	Check		06/26/2012	\$ 25.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Richard J. Tucker 1336 6 th St NW Hickory, NC 28601 828-324-2624			Business Owner			
			c. Employer's Name/Specific Field			
			Steel Fab Business Owner		e. Election Sum to Date	
				\$ 200.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SOH	Check		06/28/2012	\$ 200.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Steve O. Hunt 3121 5 th St Pl NW Hickory, NC 28601			Executive Director			
			c. Employer's Name/Specific Field			
			Catawba Valley Community College		e. Election Sum to Date	
				\$ 265.42		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐		Debit Crd	Printer Cart.	06/27/2012	\$ 175.42	
☐					\$	
☐					\$	
4. Total only this Page					\$ 400.42	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 2,200.42	

Disbursements

Pg 1 of 1

Amendment

☐ Yes ☒ No

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 Steve Hunt					PDUZR8	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures						
4. Payee Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Premier Screen Printing 826 2 nd Ave SW Hickory, NC 28602 828-322-2262						
			c. Level Registered (Specify)			
			☐ Federal ☐ County: ☐ State ☐ Municipality:			
					e. Election Sum to Date	
					\$ 3,414.23	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
SOH	Check	B	04/27/2012	\$2,251.35	Signs, T-Shirts & Stickers, etc	
SOH	Check	B	05/22/2012	\$1,162.88	Signs, T-Shirts & Stickers, etc	
4. Payee Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Subway Store #16776 2535 Hwy 70 SE Suite 20 Hickory Promenade Hickory, NC 28602						
			c. Level Registered (Specify)			
			☐ Federal ☐ County: ☐ State ☐ Municipality:			
					e. Election Sum to Date	
					\$ 96.30	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
SOH	Check	O	05/10/2012	\$96.30	Lunch for Workers	
				\$		
4. Payee Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Assurance Sign & Display PO Box 826 Granite Falls, NC 28630						
			c. Level Registered (Specify)			
			☐ Federal ☐ County: ☐ State ☐ Municipality:			
					e. Election Sum to Date	
					\$ 1,290.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
SOH	Check	B	06/04/2012	\$715.00	Yard Signs & Stakes	
SOH	Check	B	06/29/2012	\$575.00	Yard Signs & Stakes	
5. Total only this Page					\$ 4,800.53	
6. Total of ALL CRO-1310 Pages						
<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>					\$ 4,800.53	
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)						

Refunds/Reimbursements From the Committee

Pg 1 of 1

Amendment

☐ Yes ☒ No

Use this form to report refunds/reimbursements, including contributions returned to the contributor.

1. Committee Full Name (and Fund if applicable)			2. ID Number	
Committee to Elect Steve Hunt			PDUZR8	
3. Payee Information ☐ Add ☐ Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date
Steve O. Hunt 3121 5 th St Pl NW Hickory, NC 28601		☒ Candidate ☐ PAC ☐ Referendum ☐ Party		06/27/2012
		e. Level Registered (Specify)		i. Original Receipt Amount
		☐ Federal ☒ County: ☐ State ☐ Municipality:		\$ 175.42
		f. Purpose Code		j. Election Sum to Date
P				\$ 265.42
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code
Executive Director	Catawba Valley Community College			SOH
l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount	
Check	Printer Cartridges	06/27/2012	\$ 175.42	
3. Payee Information ☐ Add ☐ Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date
		☐ Candidate ☐ PAC ☐ Referendum ☐ Party		
		e. Level Registered (Specify)		i. Original Receipt Amount
		☐ Federal ☐ County: ☐ State ☐ Municipality:		\$
		f. Purpose Code		j. Election Sum to Date
				\$
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code
		1 FORMTEXT		
l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount	
			\$	
3. Payee Information ☐ Add ☐ Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date
		☐ Candidate ☐ PAC ☐ Referendum ☐ Party		
		e. Level Registered (Specify)		i. Original Receipt Amount
		☐ Federal ☐ County: ☐ State ☐ Municipality:		\$
		f. Purpose Code		j. Election Sum to Date
				\$
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code
l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount	
			\$	
4. Total only this Page				\$ 175.42
5. Total of ALL CRO-1320 Pages (This line must be on line 16 of Detailed Summary Page CRO-1100)				\$ 175.42
L - Returned to Contributor M - Overpayment for Service N - Exceeded Contribution Limit P* - Reimbursement of In-Kind O* Other				
* Codes require detailed explanation in required remarks field (m)				

In-Kind Contributions

Pg 1 of 1 Amendment ☐ Yes ☒ No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.
Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Committee to Elect Steve Hunt		PDUZR8	
3. Contributor Information ☐ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
Steve O. Hunt 3121 5 th St Pl NW Hickory, NC 28601		☐ Individual	
		☒ Candidate	
		☐ Party	
		☐ PAC	
		☐ Referendum	d. Election Sum to Date
		☐ Other Receipt Source	\$ 265.42
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Printer Cartridges		06/27/2012	\$ 175.42
			\$
			\$
3. Contributor Information ☐ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
		☐ Individual	
		☐ Candidate	
		☐ Party	
		☐ PAC	
		☐ Referendum	d. Election Sum to Date
		☐ Other Receipt Source	\$
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
			\$
			\$
			\$
3. Contributor Information ☐ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
		☐ Individual	
		☐ Candidate	
		☐ Party	
		☐ PAC	
		☐ Referendum	d. Election Sum to Date
		☐ Other Receipt Source	\$
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
			\$
			\$
			\$
4. Total only this Page		\$ 175.42	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 175.42	