Disclosure Report Cover

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.

Amendment

Do not use this form to update information.	
1. Committee Information By	
a. Full Name	c. ID Number
Matthew for Alderman	3DUT3N
b. Mailing Address (include City, State and Zip Code)	d. Date Filed
1081 17+4 Ave NW	
11.1	e. Phone Number
Hickory, NC 28601	828-455-8203
2. Report Year 3. Period Start Date (mm/dd/yy) 4. Period End Date (mm/dd/yy) 5. Treas	urer Full Name
	iew Alan Mailding
6. Type of Committee (Check One) 9. Type of Report (check only one type of r	
Candidate Campaign Party Municipal State/County	Referendum
PAC Referendum Organizational Organizational	Organizational
☐ Independent Expenditure ☐ Joint Fundraiser ☐ Thirty-five day ☐ Quarterly	Pre-referendum
Legal Expense Fund Pre-primary First Pre-election Second	Final Supplemental Final
7. Type of Fund (if applicable, check one) Pre-runoff Third	Annual
Booster Fund Semi-annual Fourth	Special
☐ Building Fund ☐ Mid Year Semi-annual	
Year End Mid Year	10. Special Report Name
Other: Final Year End	
8. Number of Fundraisers this Report	1
Special Special	
11. Account Information 11. Account Information	7,46,57,77,97,77,77,77,77,77
a. Financial Institution Full Name  a. Financial Institution Full Name	
State Employee's Credit Union	
b. Purpose c. Account Code b. Purpose	c. Account Code
For all campaign MAM	
Expenses, Refunds, d. Period Begin Balance	d. Period Begin Balance
and income \$0.00	\$
CERTIFICATION	
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, of the NC General Statutes and that no funds are commingled with prohibited or other non-disclose report is complete, true and correct and that I have been trained by the NC State Board of Elections  Math Maulana Late Late Late Late Late Late Late Lat	d funds. I further certify that this
Printed Name of Signer Signature of Appointed Treasurer	Date
FOR OFFICE USE ONLY	
Date Received: Employee:	Delivery Method  ☐ Normal Mail
Date Postmarked: Employee:	Registered Mail Hand Delivered
Date Scanned: Employee:	☐ Electronically Filed
Date Data Entered: Employee:	Signer has not received mandatory training
Please Note: This form cannot be used to amend committee information such as the cassistant treasurer, custodian of books information, or account information you must amend the Statement of Organization (CRO-2100A-E) to make co	rmation.

## **Detailed Summary**

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

Amendment
☐ Yes ⊠ No

	2. Type of Report	造器	Charles and the Control of the Contr	. ID N	umber
Matthew for Alderman	2017 35 Day Repo	ort			
Start of Election Cycle: January 1,	2017		Total this Reporting Period		Total this Election Cycle
4) Cash on Hand at Start	PRODUCTION DEPT. 4000 DEPT. 4 DESTRUCTION	\$	0.00	\$	0.00
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$		\$	
6) Contributions from Individuals	(CRO-1210)	\$	832.00	\$	832.00
7) Contributions from Political Party Committees	(CRO-1220)	\$		\$	
8) Contributions from Other Political Committees	(CRO-1230)	\$		\$	
9) Loan Proceeds	(CRO-1410)	\$		\$	
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$		\$	
11) Other Receipt Sources	4				力學多樣的
11a) Interest on Bank Accounts	(CRO-1250)	\$		\$	
11b) Contributions from Not-for-Profit Organization	ns (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)	\$		\$	
<u>expenditures</u>			情報的进程		
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$	623.81	\$	623.81
13b) Contributions to Candidates/Political Committee	ees (CRO-1310)	\$		\$	
13c) Coordinated Party Expenditures	(CRO-1310)	\$		\$	
4) Aggregated Non-Media Expenditures	(CRO-1315)	\$		\$	
15) Loan Repayments	(CRO-1420)	\$		\$	
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	35.00	\$	35.00
(7) In-Kind Contributions	(CRO-1510)	\$	72.00	\$	72.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15,	16 and 17)	\$	730.81	\$	730.81
19) Cash on Hand at End (Add lines 4 and 12 together, then subtra		\$	101.19	\$	101.19
ADDITIONAL INFORMATION	HARDEY TRANSFE				
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$			
Outstanding Loans (incl. ones from other campaigns	(CRO-1430)	\$		ge	
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)	\$		\$	The second second second
6) Forgiven Loans	(CRO-1440)	\$		\$	
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$		\$	
(8) Contributions to be Refunded				-	
CRO-1100 NC State Board of Fleet	(CRO-1215)	\$		\$	

MAM   Draft   08/22/2017   \$ 100   MAM   Draft   08/25/2017   \$ 660   3. Contributor Information   Add   Remove			m Individuals	over \$50	Pg or contributions und		1 1205 is	not used	es 🛛 N
Add					The series and				
B. Job Title/Profession	Matthew	for Alderman							1
B. Job Title/Profession	3. Contr	ibutor Informatio	on	<b>黎</b> 图	Add  Re	move			<b>发展的数</b>
Administrator   C. Employer's Name/Specific Field	ALEXANDERSON SERVICES SECURITY	A SURE SA SELECTION ASSESSMENT AND ASSESSMENT OF THE SECURITY.			AND DESCRIPTION OF THE PROPERTY OF	IN ACCOUNT OF STREET, SALES	d. Comm	ents	
C. Employer's Name/Specific Field   Peak Motors, INC	(include	e city, state, & zip)			Account				
Peak Motors, INC							1		
E. Election Sum to Date					The second secon		4		
S   S   S   S   S   S   S   S   S   S	Hickory	kory NC 28601			Peak Motors, INC		e Flection	n Sum to Date	Elympian stone
F. Prior   g. Account Code   h. Form of Payment   i. In-Kind Description   j. Date (mm/dd/yyyy)   k. Amount								ii Suiii to Date	
MAM	f. Prior	g. Account Code	h. Form of Payment	i. In-k	Gind Description	i. Date (mm/dd/v		k. Amour	ıt
MAM Draft   08/22/2017   \$ 100   MAM Draft   08/25/2017   \$ 660   3. Contributor Information   Add   Remove									12.00
MAM   Draft   Add   Remove			ACCOUNT AND ACCOUNTS				-		100.00
3. Contributor Information  a. Full Name, Mailing Address & Phone (include city, state, & zip)  Continue from Matthew  c. Employer's Name/Specific Field  c. Election Sum to Date  \$ f. Prior g. Account Code b. Form of Payment   i. In-Kind Description   j. Date (mm/dd/yyyy)   k. Amount    MAM In Kind   Facebook Promo   08/02/2017   \$ 35  MAM In Kind   Acct. Open Fee   08/14/2017   \$ 25  3. Contributor Information   Add   Remove    a. Full Name, Mailing Address & Phone (include city, state, & zip)  c. Employer's Name/Specific Field  c. Election Sum to Date    \$ c. Employer's Name/Specific Field  c. Election Sum to Date    \$ c. Employer's Name/Specific Field  c. Election Sum to Date    \$ 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    \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		-							660.00
A. Full Name, Mailing Address & Phone (include city, state, & zip)  Continue from Matthew  C. Employer's Name/Specific Field  c. Employer's Name/Specific Field  c. Election Sum to Date  s  C. Prior g. Account Code b. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount  MAM In Kind Facebook Promo 08/02/2017 \$ 35  MAM In Kind Acct. Open Fee 08/14/2017 \$ 25  Add Remove  a. Full Name, Mailing Address & Phone (include city, state, & zip)  C. Employer's Name/Specific Field  c. Election Sum to Date  s  c. Employer's Name/Specific Field  c. Election Sum to Date  s  c. Employer's Name/Specific Field  c. Election Sum to Date  s  s  f. Prior g. Account Code b. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount  s  s  s  s  s  s  s  s  s  s  s  s  s	3 Cont	A STATE OF THE STA	The state of the s		Add 🖂 Re				200:00
(include city, state, & zip)  Continue from Matthew  c. Employer's Name/Specific Field  c. Election Sum to Date  \$ f. Prior g. Account Code b. Form of Payment in In-Kind Description j. Date (mm/dd/yyyy) k. Amount  MAM In Kind Facebook Promo 08/02/2017 \$ 35  MAM In Kind Acct. Open Fee 08/14/2017 \$ 25  3. Contributor Information Add Remove  a. Full Name, Mailing Address & Phone (include city, state, & zip)  c. Employer's Name/Specific Field  c. Employer's Name/Specific Field  f. Prior g. Account Code b. Form of Payment in In-Kind Description j. Date (mm/dd/yyyy) k. Amount  f. Prior g. Account Code b. Form of Payment in In-Kind Description j. Date (mm/dd/yyyy) k. Amount  S  S  S  S  S	Section of the least of the lea	Company of the control of the contro			STORY OF STREET	CONTRACTOR OF STREET	d. Comm	ents	
Continue from Matthew  c. Employer's Name/Specific Field  c. Election Sum to Date  s  f. Prior g. Account Code h. Form of Payment in Kind Description j. Date (mm/dd/yyyy) k. Amount  MAM In Kind Facebook Promo 08/02/2017 \$ 35  MAM In Kind Acct. Open Fee 08/14/2017 \$ 25  3. Contributor Information  a. Full Name, Mailing Address & Phone (include city, state, & zip)  c. Employer's Name/Specific Field  c. Election Sum to Date  s  f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount  s  s  f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount  s  s  s  s									
Prior   g. Account Code   h. Form of Payment   i. In-Kind Description   j. Date (mm/dd/yyyy)   k. Amount							e. Electio	n Sum to Date	
MAM In Kind Facebook Promo 08/02/2017 \$ 35  MAM In Kind Acct. Open Fee 08/14/2017 \$ 25  Add Remove  a. Full Name, Mailing Address & Phone (include city, state, & zip)  c. Employer's Name/Specific Field  f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$							\$		
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3. Contributor Information  a. Full Name, Mailing Address & Phone (include city, state, & zip)  c. Employer's Name/Specific Field  c. Election Sum to Date  \$ f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount  \$ \$ \$ \$ \$ \$		MAM	In Kind	Face	book Promo	08/02/2	017	\$	35.00
Add Remove  a. Full Name, Mailing Address & Phone (include city, state, & zip)  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  \$ \$ \$ \$ \$ \$		MAM	In Kind	Acct	t. Open Fee 0		2017	\$	25.00
E. Full Name, Mailing Address & Phone (include city, state, & zip)								\$	
(include city, state, & zip)  c. Employer's Name/Specific Field  e. Election Sum to Date  S  f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$	Oppose and productions				The second secon	CONTRACTOR OF THE OWNER O			計畫特別
f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$			& Phone		b. Job Title/Profession		d. Comm	ents	
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□       \$         □       \$         □       \$         □       \$         \$       \$		and her consideration to the constitution	T	ora, ewe					
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	4 T-4	I a to do n		<b>美国安排</b>			\$	\$	832.00

Amendment

\$

832.00

5. Total of ALL CRO-1210 Pages

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

				Amendment		
Disbursements	Pg	1	of 1	Yes	$\boxtimes$	N
I las this forms to remark assemble distance from the control it.	C			1 . 7 1		

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

committees and coordinated party expenditures.

Matthew for Al	derman	d if applicable)			2. ID Number 3DUT3N
3. Type of Disb	TATLES OF THE PERSON NAMED IN THE PERSON NAMED IN THE PERSON NAMED IN	se use separate C	CRO-1310 forms for each t	type of Disbursen	
Operating E		Contributions to Ca	ndidates/Political Committees		ordinated Party Expenditures
4. Payee Inform	nation	<b>医型型性</b>	Add	Remove	
	ing Address & Phone		b. Coordinated Committee N	ame	d. Comments
(include city, state,					
Copymasters Pr PO BOX 3738	inting		c. Level Registered (Specify)		-
Hickory NC 28	603		Federal	County:	+
111011017 110 20	000		State	Municipality:	e. Election Sum to Date
				•	\$ 623.81
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
MAM	Cash	В	08/25/2017	\$500.00	Cards/Signs
MAM	Cash	В	08/29/2017	\$123.81	Cards/Signs
4. Payee Inform			Add	-	
	ing Address & Phone	<b>※根据監督の対象は、2015年</b>	b. Coordinated Committee N	Remove	d. Comments
(include city, state,			bi Coordinated Committee 14	and converse of a ve	u. comments
(merade erg, state,	www.p				1
			c. Level Registered (Specify)	美国的第三人称	
			Federal	County:	
			State	Municipality:	e. Election Sum to Date
ANGLES (20 Sammer)   10 A C   11 A C					\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				\$	
4. Payee Inform		<b>为一个工作</b>	Add	Remove	
	ing Address & Phone		b. Coordinated Committee N	ame	d. Comments
(include city, state,	& zip)	<b>宣宗至于郑启宗及以</b> 为2	-		
			c. Level Registered (Specify)		+
			Federal	County:	1
			State	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
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				\$	
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The state of the s	and the second control of the second control	and the second s	0 if Contrib to Candidates/Politic	The same of the sa	025.01
And the second s	NAME AND ADDRESS OF THE OWNER, WHEN PARTY AND AD		0 if Coordinated Party Expendite	ures)	
7. Purpose Cod A* - Media	es (List detailed ex B* - Printing	penditure code in C* - Fun	A COLUMN TO THE PROPERTY OF TH	D - To Anoth	er Candidate
E - Salaries	F* - Equipment	G - Politic			g Public Office Expenses
I - Postage	J - Penalties		ce Expenses		n to Legal Expense Fund
O* - Other	e detailed explanati	on in required r	amarks field (la)		
Coucs requir	c detaned explanati	on in required t	emains field (k)	STREET,	<b>在中国的企业中的企业的企业的企业的企业的企业</b>

( YZ 1 C					Ame	ndment
n-Kind Contributions	Pg	1	of	1		Yes

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)	的数据的			2. ID	) Number	
Matthew for Alderman					3DUT3N	
	Remove	為學	金融的 计图像分析		The second second was a first	
a. Full Name, Mailing Address & Phone	b. Type		ontributor	c. Cor	mments	
(include city, state, & zip)			idual			
Matthew Maulding		Cand	10004000000000			
1081 17th AVE NW		Party				
Hickory NC 28601		PAC				
		Refer	rendum	d. Ele	ection Sum to Date	
		Other	r Receipt Source	\$	72.00	
e. Description			f. Date (mm/dd/yyy	yy)	g. Fair Market Amount	
Filing Fee			07/14/2017		\$ 12.00	
Facebook Promo			08/02/2017	7	\$ 35.00	
Acct Open Fee			08/14/2017	7	\$ 25.00	
3. Contributor Information Add	Remove			HANDER OF		
a. Full Name, Mailing Address & Phone		-	ontributor	c. Cor	mments	
(include city, state, & zip)		Indiv				
	1 🗇	Cand	idate			
		Party	J. S. Walker	=1		
		PAC				
			rendum	d. Election Sum to Date		
	lΠ		r Receipt Source			
				\$		
e. Description	344197	£E.	f. Date (mm/dd/yyy	y)	g. Fair Market Amount	
					\$	
					\$	
					\$	
3. Contributor Information Add R	Remove	(2) (S)	的 BAR 11 在 平发	N. SE	Galt Galactic Control	
a. Full Name, Mailing Address & Phone	Total Contract of Contract of	The state of the state of	ontributor	c. Con	mments	
(include city, state, & zip)		Indiv	idual			
		Cand	idate			
		Party				
		PAC				
		Refer	rendum	d. Ele	ction Sum to Date	
		Other	r Receipt Source	\$		
e. Description			f. Date (mm/dd/yyy	/y)	g. Fair Market Amount	
				2000	\$	
					\$	
					\$	
4. Total only this Page	4 - 100	<b>阿巴里斯</b>	NEW YORK STATES	\$	72.00	
5. Total of ALL CRO-1510 Pages	do to the	STANKE C	College College	Ψ	25 25 m2	
(This line must be on line 17 of Detailed Summary Page CRO-1100)				\$	72.00	

No

Use this form to report refunds/reimbursements, including co  1. Committee Full Name (and Fund if applicable)				D Number	
Matthew for Alderman		BERTHAN CONTRACTOR CON	-	DUTZN	
3. Payee Information	Add Re	move			
a. Full Name, Mailing Address & Phone	d. Type of Commi		h. C	Priginal Receipt Date	
(include city, state, & zip)	☑ Candidate	☐ PAC		<u> </u>	
Matthe Man Mandaga	Referendum	Party	08	210212017	
1019Titles Han Madiana	e. Level Registere			riginal Receipt Amount	
Matthew Alan Maulding 1081 17th Ave NW	Federal State	☐ County: ☐ Municipality:	\$	35.00	
Hickory, NC 28601	f. Purpose Code		j. El	lection Sum to Date	
1710 For y, 100 28001	L		\$	35.00	
b. Job Title/Profession c. Employer's Name/Specific Field	g. Comments			ccount Code	
Account Administrator Peak Motors, Inc.	Facebook	Promotion		MAM	
. Form of Payment m. Required Remarks		n. Date (mm/dd/yy	(yy)	o. Amount	
Bank Transfer		08/33/30	710	\$ 35.00	
3. Payee Information	Add 🔲 Rer	move		建建设的设置。	
a. Full Name, Mailing Address & Phone	d. Type of Commi	ittee	h. O	riginal Receipt Date	
(include city, state, & zip)	Candidate	PAC			
	Referendum	Party			
	e. Level Registere		i. Or	riginal Receipt Amount	
	Federal State	County:  Municipality:	\$		
	f. Purpose Code	Withhelpanty.	j. El	ection Sum to Date	
			\$		
c. Employer's Name/Specific Field	g. Comments			ccount Code	
Form of Payment m. Required Remarks		n. Date (mm/dd/yy	(VV)	o. Amount	
•			337	\$	
3. Payee Information	Add  Ren	nove		White the street of the street	
a. Full Name, Mailing Address & Phone	d. Type of Commi		Ih. O	riginal Receipt Date	
(include city, state, & zip)	Candidate	PAC		ilgiliai receipi Date	
	Referendum	Party		N-2	
	e. Level Registered		i. Original Receipt Amount		
	Federal	County:	\$		
	f. Purpose Code	Municipality:			
	I. rurpose Coue		j. E.ic	ection Sum to Date	
. Job Title/Profession c. Employer's Name/Specific Field	g, Comments	A STATE OF THE STA		ccount Code	
C. Lampayer's radicespectate Fred	g, Comments		K. At	xoum Code	
Form of Payment m. Required Remarks		n. Date (mm/dd/yy	yy)	o. Amount	
				\$	
			\$		
. Total only this Page					
Total only this Page  Total of ALL CRO-1320 Pages  (This line must be on line 16 of Detailed Summary Page CRO-1100)		ensulation of	\$		