

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			c. ID Number										
COMMITTEE TO ELECT DAVID WILLIAMS WARD 4													
b. Mailing Address (include City, State and Zip Code)			d. Date Filed										
308 6TH AVENUE SW HICKORY, NC 28602			10/03/2017										
			e. Phone Number										
2. Report Year													
2017													
3. Period Start Date (mm/dd/yy)													
07/21/2017													
4. Period End Date (mm/dd/yy)													
09/26/2017													
5. Treasurer Full Name													
NANCY L MILLER													
6. Type of Committee (Check One)													
☒ Candidate Campaign ☐ Party ☐ Joint Fundraiser ☐ PAC ☐ Referendum ☐ Legal Expense Fund													
7. Type of Fund (if applicable, check one)													
☐ "Booster Fund" ☐ Building Fund ☐ Presidential Election Year Candidates Fund ☐ NC Public Campaign Financing Fund ☐ Other:													
8. Number of Fundraisers this Report													
1													
9. Type of Report (check only one type of report from one category)													
<table border="0" style="width:100%;"> <tr> <td style="width:50%; vertical-align: top;"> Municipal ☐ Organizational ☒ Thirty-five day ☐ Pre-primary ☐ Pre-election ☐ Pre-runoff ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special </td> <td style="width:50%; vertical-align: top;"> State/County ☐ Organizational ☐ Quarterly ☐ First ☐ Second ☐ Third ☐ Fourth ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special </td> </tr> </table>					Municipal ☐ Organizational ☒ Thirty-five day ☐ Pre-primary ☐ Pre-election ☐ Pre-runoff ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special	State/County ☐ Organizational ☐ Quarterly ☐ First ☐ Second ☐ Third ☐ Fourth ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special							
Municipal ☐ Organizational ☒ Thirty-five day ☐ Pre-primary ☐ Pre-election ☐ Pre-runoff ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special	State/County ☐ Organizational ☐ Quarterly ☐ First ☐ Second ☐ Third ☐ Fourth ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special												
10. Special Report Name													
3. Account Information													
a. Financial Institution Full Name													
FIRST CITIZENS BANK													
b. Purpose													
CAMPAIGN ACCOUNT													
c. Account Code													
DLW													
d. Period Begin Balance													
\$ 195.00													
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													
<table border="0" style="width:100%;"> <tr> <td style="width:33%; text-align: center;"> <u>NANCY MILLER</u> Printed Name of Signer </td> <td style="width:33%; text-align: center;"> Signature of Appointed Treasurer </td> <td style="width:33%; text-align: center;"> <u>10/03/2017</u> Date </td> </tr> </table>					<u>NANCY MILLER</u> Printed Name of Signer	 Signature of Appointed Treasurer	<u>10/03/2017</u> Date						
<u>NANCY MILLER</u> Printed Name of Signer	 Signature of Appointed Treasurer	<u>10/03/2017</u> Date											
FOR OFFICE USE ONLY													
<table border="0" style="width:100%;"> <tr> <td style="width:25%;">Date Received: _____</td> <td style="width:25%;">Employee: _____</td> <td rowspan="4" style="width:50%; vertical-align: top;"> Delivery Method ☐ Normal Mail ☐ Registered Mail ☐ Hand Delivered ☐ Electronically Filed ☐ Signer has not received mandatory training </td> </tr> <tr> <td>Date Postmarked: _____</td> <td>Employee: _____</td> </tr> <tr> <td>Date Scanned: _____</td> <td>Employee: _____</td> </tr> <tr> <td>Date Data Entered: _____</td> <td>Employee: _____</td> </tr> </table>					Date Received: _____	Employee: _____	Delivery Method ☐ Normal Mail ☐ Registered Mail ☐ Hand Delivered ☐ Electronically Filed ☐ Signer has not received mandatory training	Date Postmarked: _____	Employee: _____	Date Scanned: _____	Employee: _____	Date Data Entered: _____	Employee: _____
Date Received: _____	Employee: _____	Delivery Method ☐ Normal Mail ☐ Registered Mail ☐ Hand Delivered ☐ Electronically Filed ☐ Signer has not received mandatory training											
Date Postmarked: _____	Employee: _____												
Date Scanned: _____	Employee: _____												
Date Data Entered: _____	Employee: _____												
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

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

Amendment		
☐	Yes	☒ No

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number	
Committee to Elect David Williams Ward 4	2017 35 Day Report	QDU190	
Start of Election Cycle: January 1, 2017		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 195.00	\$ 0.00
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 833.00	\$ 928.00	
6) Contributions from Individuals (CRO-1210)	\$ 780.00	\$ 941.80	
7) Contributions from Political Party Committees (CRO-1220)	\$ 300.00	\$ 300.00	
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)	\$ 1913.00	\$ 2169.80	
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)	\$ 1051.89	\$ 1051.89	
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$	\$	
13c) Coordinated Party Expenditures (CRO-1310)	\$	\$	
14) Aggregated Non-Media Expenditures (CRO-1315)	\$ 109.85	\$ 109.85	
15) Loan Repayments (CRO-1420)	\$	\$	
16) Refunds/Reimbursements From the Committee (CRO-1320)	\$	\$	
17) In-Kind Contributions (CRO-1510)	\$ 100.00	\$ 161.80	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 1261.74	\$ 1323.54	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 846.26	\$ 846.26	
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-2220)	\$	\$	
28) Contributions to be Refunded (CRO-1215)	\$	\$	

Aggregated Contributions from Individuals

Page 1 of 3

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 DAVID WILLIAMS WARD 4						
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
☐ Add ☐ Remove	DLW	Cash		08/07/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Cash		09/06/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Cash		09/06/2017	\$ 30.00	
☐ Add ☐ Remove	DLW	Cash		08/07/2017	\$ 10.00	
☐ Add ☐ Remove	DLW	Cash		08/07/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Cash		09/06/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Cash		09/06/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Check		08/07/2017	\$ 20.00	
☐ Add ☐ Remove	DLW	Cash		08/07/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Cash		08/07/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Cash		08/07/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Cash		08/07/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Cash		09/06/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Cash		08/07/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Cash		08/07/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Cash		09/06/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Cash		08/07/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Cash		09/06/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Cash		09/06/2017	\$ 30.00	
☐ Add ☐ Remove	DLW	Cash		08/07/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Cash		08/07/2017	\$ 1.00	
☐ Add ☐ Remove	DLW	Cash		08/07/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Cash		08/07/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Cash		09/06/2017	\$ 15.00	
4. Total only this Page					\$ 361.00	
5. Total of ALL CRO-1205 Pages (This line must be on line 5 of Detailed Summary Page CRO-1100)					\$ 833.00	

Aggregated Contributions from Individuals

Page 2 of 3

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 DAVID WILLIAMS WARD 4						
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
☐ Add ☐ Remove	DLW	Cash		08/07/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Cash		08/07/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Cash		08/07/2017	\$ 5.00	
☐ Add ☐ Remove	DLW	Cash		08/07/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Cash		08/07/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Check		08/07/2017	\$ 50.00	
☐ Add ☐ Remove	DLW	Cash		09/06/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Cash		09/06/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Cash		09/06/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Check		08/07/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Cash		08/07/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Check		08/07/2017	\$ 30.00	
☐ Add ☐ Remove	DLW	Cash		09/06/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Cash		09/06/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Check		08/07/2017	\$ 20.00	
☐ Add ☐ Remove	DLW	Cash		08/07/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Cash		08/07/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Cash		08/07/2017	\$ 20.00	
☐ Add ☐ Remove	DLW	Cash		09/06/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Cash		08/07/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Cash		08/07/2017	\$ 15.00	
☐ Add ☐ Remove	DLW	Cash		08/07/2017	\$ 30.00	
☐ Add ☐ Remove	DLW	Cash		09/06/2017	\$ 15.00	
4. Total only this Page					\$ 410.00	
5. Total of ALL CRO-1205 Pages (This line must be on line 5 of Detailed Summary Page CRO-1100)					\$ 833.00	

Aggregated Contributions from IndividualsPage 3 of 3

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 DAVID WILLIAMS WARD 4					
3. Contributor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add	DLW	Cash		08/07/2017	\$ 15.00
☐ Remove					
☐ Add	DLW	Cash		08/07/2017	\$ 2.00
☐ Remove					
☐ Add	DLW	Cash		08/07/2017	\$ 15.00
☐ Remove					
☐ Add	DLW	Cash		09/06/2017	\$ 15.00
☐ Remove					
☐ Add	DLW	Cash		08/07/2017	\$ 15.00
☐ Remove					
4. Total only this Page					\$ \$62.00
5. Total of ALL CRO-1205 Pages					\$ \$833.00
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					

CRO-1205

NC State Board of Elections

April 2007

Contributions from Individuals

Pg 1 of 3

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 DAVID WILLIAMS WARD 4						
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
DOUGLAS AUER 1036 15th Ave NW HICKORY, NC 28601			PARTNER			
			c. Employer's Name/Specific Field			
			CDG BRANDS INC			
					e. Election Sum to Date	
					\$ 215.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	DLW	Check		07/25/2017	\$ 200.00	
☐	DLW	Cash		08/07/2017	\$ 15.00	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
JEFFREY BRONNENBURG PO BOX 1103 HICKORY, NC 28603			ACCOUNTANT			
			c. Employer's Name/Specific Field			
			SELF			
					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	
☐	DLW	Check		09/26/2017	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
CARRIE CRAYMER 5964 FLINTLOCK COURT HICKORY, NC 28601						
			c. Employer's Name/Specific Field			
					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	
☐	DLW	Electric Funds Tran		08/25/2017	\$ 100.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 415.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 780.00	

Contributions from Individuals

Pg 2 of 3

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 DAVID WILLIAMS WARD 4						
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
ED FULLER 2433 11TH AVENUE SW HICKORY, NC 28602				EDUCATOR		
				c. Employer's Name/Specific Field		
				RETIRED		
				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	
☐	DLW	Check		08/17/2017	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
JOHNNY IKARD 1734 3rd Ave NW Apt F HICKORY, NC 28601				OWNER		
				c. Employer's Name/Specific Field		
				JOHN BOYZ CAFE		
				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	
☐	DLW	In-Kind	FOOD DONATION FOR EVENT	08/05/2017	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
THEODORE POWELL PO BOX 9064 HICKORY, NC 28603-9064				MINISTER		
				c. Employer's Name/Specific Field		
				RETIRED		
				e. Election Sum to Date		
				\$ 65.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	DLW	Cash		08/07/2017	\$ 15.00	
☐	DLW	Check		08/07/2017	\$ 50.00	
☐					\$	
4. Total only this Page					\$ 265.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 780.00	

Contributions from Individuals

Pg 3 of 3

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 DAVID WILLIAMS WARD 4					
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments
DONNA ROULIC 2029 16TH AVENUE PL SW HICKORY, NC 28602			NURSE		
			c. Employer's Name/Specific Field		
			RETIRED		
			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
☐	DLW	Check		08/14/2017	\$ 100.00
☐					\$
☐					\$
4. Total only this Page					\$ 100.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 780.00

CRO-1210

NC State Board of Elections

April 2007

Contributions from Political Party Committees Pg 1 of 1

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 DAVID WILLIAMS WARD 4					
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
DEMOCRATIC WOMEN OF CATAWBA COUNTY PO BOX 1201 CONOVER, NC 28613					
				c. Election Sum to Date	
				\$ 300.00	
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount	
DLW	Check		09/05/2017	\$ 300.00	
				\$	
				\$	
4. Total only this Page				\$ 300.00	
5. Total of ALL CRO-1220 Pages (This line must be on line 7 of Detailed Summary Page CRO-1100)				\$ 300.00	

CRO-1220

NC State Board of Elections

April 2007

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 DAVID WILLIAMS WARD 4							
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	
CUSTOM DESIGN GROUP LLC 391 10TH AVE DR NE HICKORY, NC 28601							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 491.13	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
DLW	Check	O	09/22/2017	\$ 491.13	CUSTOM T-SHIRTS		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
JOHNNY IKARD 1734 3rd Ave NW Apt F HICKORY, NC 28601							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 100.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
DLW	Check	C	08/10/2017	\$ 100.00	FOOD FOR EVENT		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
SIGNS ON THE CHEAP TX							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 460.76	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
DLW	Debit Card	B	08/01/2017	\$ 203.22	YARD SIGNS		
DLW	Debit Card	B	09/26/2017	\$ 257.54	YARD SIGNS		
5. Total only this Page						\$ 1,051.89	
6. Total of ALL CRO-1310 Pages							
(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)						\$ 1,051.89	
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)							

Aggregated Non-Media Expenditures

Page 1 of 1

Amendment	
☐ Yes	☒ No

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

COMMITTEE TO ELECT DAVID WILLIAMS WARD 4																							
3. Payee Information																							
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks																	
☐ Add ☐ Remove	DLW	Debit Card	O	08/01/2017	\$ 42.44	STEEL FRAMES FOR YARD SIGNS																	
☐ Add ☐ Remove	DLW	Electric Funds Tran	C	07/24/2017	\$ 1.32	TRANSACTION FEE																	
☐ Add ☐ Remove	DLW	Electric Funds Tran	C	07/24/2017	\$ 3.20	TRANSACTION FEE																	
☐ Add ☐ Remove	DLW	Electric Funds Tran	C	08/20/2017	\$ 3.20	TRANSACTION FEE																	
☐ Add ☐ Remove	DLW	Check	B	07/27/2017	\$ 26.68	BUSINESS CARDS																	
☐ Add ☐ Remove	DLW	Debit Card	B	09/05/2017	\$ 6.33	POSTER																	
☐ Add ☐ Remove	DLW	Check	B	09/12/2017	\$ 26.68	BUSINESS CARDS																	
4. Total only this Page					\$ 109.85																		
5. Total of ALL CRO-1315 Pages <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>					\$ 109.85																		
<table border="0"> <tr> <td></td> <td>B* - Printing</td> <td></td> <td>D - To Another Candidate</td> </tr> <tr> <td>E - Salaries</td> <td></td> <td>G - Political Party</td> <td></td> </tr> <tr> <td></td> <td>J - Penalties</td> <td colspan="2">Q* - Donations to Legal Expense Fund</td> </tr> <tr> <td>O* - Other</td> <td></td> <td colspan="2"></td> </tr> </table>									B* - Printing		D - To Another Candidate	E - Salaries		G - Political Party			J - Penalties	Q* - Donations to Legal Expense Fund		O* - Other			
	B* - Printing		D - To Another Candidate																				
E - Salaries		G - Political Party																					
	J - Penalties	Q* - Donations to Legal Expense Fund																					
O* - Other																							
* Codes require detailed explanation in required remarks field (g)																							

CRO-1315

NC State Board of Elections

December 2009

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 DAVID WILLIAMS WARD 4			
3. Contributor Information ☐ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
JOHNNY IKARD 1734 3rd Ave NW Apt F HICKORY, NC 28601		☒ Individual	
		☐ Candidate	
		☐ Party	
		☐ PAC	
		☐ Referendum	
		☐ Other Receipt Source	
		d. Election Sum to Date	
		\$ 100.00	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
FOOD DONATION FOR EVENT		08/05/2017	\$ 100.00
			\$
			\$
4. Total only this Page		\$ 100.00	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 100.00	

CRO-1510

NC State Board of Elections

December 2007