

# 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

<b>1. Committee Information</b>			
a. Full Name Committee to Elect Pam DeMaria for Town Council		c. ID Number 3JM559	
b. Mailing Address (include City, State and Zip Code) 3905 Waters Reach Ln Indian Trail, NC 28079		d. Date Filed 09/29/2015	
		e. Phone Number 704 821 6577	
2. Report Year 2015		3. Period Start Date (mm/dd/yy) 01/01/2015	4. Period End Date (mm/dd/yy) 09/22/2015
5. Treasurer Full Name Nancy Lynn Jacobsen			
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"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser		<b>Municipal</b> <input type="checkbox"/> Organizational <input checked="" 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	
7. Type of Fund (if applicable, check one)		<b>State/County</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input 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	
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:		<b>Referendum</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special	
8. Number of Fundraisers this Report 1		10. Special Report Name	
11. Account Information		11. Account Information	
a. Financial Institution Full Name BB+T		a. Financial Institution Full Name PayPal	
b. Purpose Checking	c. Account Code 01	b. Purpose Online payment and receipt	c. Account Code 02
d. Period Begin Balance \$ 00.00		d. Period Begin Balance \$ 0.00	
<b>CERTIFICATION</b>			
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.			
Nancy Jacobsen Printed Name of Signer		Nancy Jacobsen Signature of Appointed Treasurer	09/22/2015 Date
<b>FOR OFFICE USE ONLY</b>			
Date Received:	9/30/15	Employee:	Delivery Method <input checked="" type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training
Date Postmarked:	9/29/15	Employee:	
Date Scanned:	10/1/15	Employee:	
Date Data Entered:		Employee:	
<b>Please Note:</b> 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 Pam DeMaria for Town Council		Thirty-Five Day		3JM229	
Start of Election Cycle: <b>January 1, 2015</b>		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 0.00		\$	
<b>RECEIPTS</b>					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 760.00		\$ 760.00	
6) Contributions from Individuals (CRO-1210)		\$ 4,812.59		\$ 4,812.59	
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)		\$ 5,572.59		\$ 5,572.59	
<b>EXPENDITURES</b>					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 4,752.53		\$ 4,752.53	
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)		\$		\$	
17) In-Kind Contributions (CRO-1510)		\$ 62.59		\$ 62.59	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 4,815.12		\$ 4,815.12	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 757.47		\$ 757.47	
<b>ADDITIONAL INFORMATION</b>					
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)		\$ 1,627.74			
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)		\$		\$	

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 SEP 30 2015  
 Union Co. Board of Etc.

# Aggregated Contributions from Individuals

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 Pam DeMaria for Town Council		3JM229				
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	01	Cash		07/28/2015	\$ 10.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	01	Check		07/25/2015	\$ 30.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	01	Check		07/29/2015	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	01	Check		07/29/2015	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	01	Check		07/29/2015	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	01	Cash		07/29/2015	\$ 25.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	01	Check		07/29/2015	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	01	Check		07/29/2015	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	01	Check		07/29/2015	\$ 30.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	01	Check		08/01/2015	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	01	Cash		08/15/15	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	01	Cash		08/15/15	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	01	Cash		08/28/2015	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	01	Check		08/28/2015	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	01	Check		08/28/2015	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	01	Check		09/03/2015	\$ 25.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	01	Cash		09/10/2015	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	01	Cash		09/10/2015	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	01	Check		09/14/2015	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add			<b>RECEIVED</b> <b>SEP 30 2015</b> Union Co. Board of Elections		\$	
<input type="checkbox"/> Remove					\$	
<input type="checkbox"/> Add					\$	
<input type="checkbox"/> Remove					\$	
<input type="checkbox"/> Add					\$	
<input type="checkbox"/> Remove					\$	
<b>4. Total only this Page</b>					\$ 760.00	
<b>5. Total of ALL CRO-1205 Pages</b> <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$ 760.00	

# Contributions from Individuals

Pg 1 of 5

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 Pam DeMaria for Town Council					3JM559	
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 Lynn Jacobsen 3905 Waters Reach Ln Indian Trail, NC 28079 704 821 6577			Homemaker			
			c. Employer's Name/Specific Field			
			N/A		e. Election Sum to Date	
					\$ 695.42	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	01	Check		07/14/2015	\$ 250.00	
<input type="checkbox"/>	01	Check		08/13/2015	\$ 400.00	
<input type="checkbox"/>		Credit Car	Fruit Juice	08/24/2015	\$ 6.84	
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	
Nila Modesta Salazar Fish 11001 Magna Ln Indian Trail, NC 28079 704 698 2990			Homemaker			
			c. Employer's Name/Specific Field			
			N/A		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	
<input type="checkbox"/>	01	Check		07/21/2015	\$ 250.00	
<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	
Gail Marie Furr 1002 Horton Ridge Ct Indian Trail, NC 28079 704 684 1331			President/Marketing			
			c. Employer's Name/Specific Field			
			M&W Marketing/ Medical Instruments		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	
<input type="checkbox"/>	01	Check		07/29/2015	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 1,156.84	
5. Total of ALL CRO-1210 Pages					\$ 4,812.59	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

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Union Co. Board of Elections

# Contributions from Individuals

Amendment  
 Yes  No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
Committee to Elect Pam DeMaria for Town Council					3JM559	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Jeff D.Sherman 2017 Hartwicke Pl Charlotte, NC 28270-9776			Retired			
			<b>c. Employer's Name/Specific Field</b> Digital Journalism and Advertising, Newspapers, Commercial Printing			
					<b>e. Election Sum to Date</b>	
					\$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>
<input type="checkbox"/>	01	Check		07/29/2015		\$ 200.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Debra M. Kinsey 15374 Catawba Circle S. Matthews, NC 28104 704-917-1941			Store Owner			
			<b>c. Employer's Name/Specific Field</b> Miscellaneous Store Retailer			
					<b>e. Election Sum to Date</b>	
					\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>
<input type="checkbox"/>	01	Check		07/31/2015		\$ 100.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Michael Urquhart 2808 Chip Shot Dr. Matthews, NC 28104			VP/Operations			
			<b>c. Employer's Name/Specific Field</b> Telecommunications			
					<b>e. Election Sum to Date</b>	
					\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>
<input type="checkbox"/>	01	Check		07/30/2015		\$ 100.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
<b>4. Total only this Page</b>					Union Co. Board of Elections	
					\$ 400.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 4,812.59	

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# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
Committee to Elect Pam DeMaria for Town Council					3JM559	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Larry Helms 3216 McLendon Rd Matthews, NC 28104			Owner/Insurance Agent			
			<b>c. Employer's Name/Specific Field</b> Insurance Carrier			
					<b>e. Election Sum to Date</b>	
					\$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>
<input type="checkbox"/>	01	Check		08/11/2015		\$ 100.00
<input type="checkbox"/>	01	Check		08/13/2015		\$ 100.00
<input type="checkbox"/>						\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Mark Tantillo 6306 Archerfield Court Waxhaw, NC 28173 704 243 6504			Business Owner			
			<b>c. Employer's Name/Specific Field</b> Auto Body Repair			
					<b>e. Election Sum to Date</b>	
					\$ 500.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>
<input type="checkbox"/>	01	Check		08/27/2015		\$ 500.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Christine Marie White 2523 E Providence Dr. Charlotte, NC 28270			Owner			
			<b>c. Employer's Name/Specific Field</b> Miscellaneous Store Retailer			
					<b>e. Election Sum to Date</b>	
					\$ 500.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>
<input type="checkbox"/>	01	Check		08/31/2015		\$ 500.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
<b>4. Total only this Page</b>					Union Co. Board of Elections	
					\$ 1,200.00	
<b>5. Total of ALL CRO-1210 Pages</b>						
					\$ 4,812.59	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

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# Contributions from Individuals

Amendment  
 Yes  No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
Committee to Elect Pam DeMaria for Town Council					3JM559	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
R Dean Harrell 2400 Beulah Church Rd. Matthews, NC 28104 704 821 6358			Owner			
			<b>c. Employer's Name/Specific Field</b> Construction/Land Development			
					<b>e. Election Sum to Date</b>	
					\$ 2,000.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>
<input type="checkbox"/>	01	Check		08/28/2015		\$ 2,000.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Nancy Lynn Jacobsen 3905 Waters Reach Ln Indian Trail, NC 28079 704 821 6577			Homemaker			
			<b>c. Employer's Name/Specific Field</b> N/A			
					<b>e. Election Sum to Date</b>	
					\$ 695.42	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>
<input type="checkbox"/>		Credit Car	Fruit	08/27/2015		\$ 1.58
<input type="checkbox"/>		Cash	Door Prize	08/27/2015		\$ 10.00
<input type="checkbox"/>		Credit Car	Postage	09/08/2015		\$ 2.54
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Tiffany McGee 5013 Singletree Lane Indian Trail, NC 28079			Director			
			<b>c. Employer's Name/Specific Field</b> Power Supply Company			
					<b>e. Election Sum to Date</b>	
					\$ 9.96	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>
<input type="checkbox"/>		Credit Car	Coffee	08/29/2015		\$ 9.96
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
<b>4. Total only this Page</b>					\$ 2,024.08	
<b>5. Total of ALL CRO-1210 Pages</b>					\$ 4,812.59	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

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SEP 30 2015













# In-Kind Contributions

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.

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
Committee to Elect Pam DeMaria for Town Council		3JM559	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Type of Contributor</b>	<b>c. Comments</b>
Nancy Lynn Jacobsen 3905 Waters Reach Ln Indian Trail, NC 28079 704 821 6577		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			<b>d. Election Sum to Date</b>
			\$ 670.96
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	<b>g. Fair Market Amount</b>
Postage		09/08/2015	\$ 2.54
			\$
			\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Type of Contributor</b>	<b>c. Comments</b>
		<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			<b>d. Election Sum to Date</b>
			\$
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	<b>g. Fair Market Amount</b>
			\$
			\$
			\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Type of Contributor</b>	<b>c. Comments</b>
		<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			<b>d. Election Sum to Date</b>
			\$
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	<b>g. Fair Market Amount</b>
			\$
			\$
			\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Type of Contributor</b>	<b>c. Comments</b>
		<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			<b>d. Election Sum to Date</b>
			\$
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	<b>g. Fair Market Amount</b>
			\$
			\$
			\$
<p><b>RECEIVED</b></p> <p>SEP 30 2015</p> <p>Union Co. Board of Elections</p>			\$
			\$
			\$
<b>4. Total only this Page</b>			\$ 2.54
<b>5. Total of ALL CRO-1510 Pages</b> (This line must be on line 17 of Detailed Summary Page CRO-1100)			\$ 62.59

# Debts and Obligations Owed By the Committee

Pg 2 of 2

Amendment  
 Yes  No

Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card purchases.

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
Committee to Elect Pam DeMaria for Town Council		3JM559	
<b>3. Creditor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>Note:</b> All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor.	
Pam DeMaria 1108 Hunters Trail Dr. Indian Trail, NC 28079 (704) 621-7336		<b>b. Description of Creditor</b>  Candidate	
<b>c. Beginning Balance</b>	<b>d. Total Amount Paid</b>	<b>e. Total Amount Incurred</b>	<b>f. Remaining Balance</b>
\$ 0	\$ 600.71	\$ 600.71	\$ 600.71
<b>g. Incurred Debts (what the committee received this period)</b>			
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
John's Place  3016 Weddington Road Matthews, NC 28105 (704) 847-1560		07/29/2015	\$ 526.00
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
		C	Food and Beverage
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
Mario's Pizza  2945 Weddington Matthews Road Matthews, NC 28105		08/28/2015	\$ 74.71
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
		O	Meet and Greet
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
			\$
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
			\$
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
			\$
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>4. Total only this Page</b> (This should be the sum of all items 'g3.' from this page)		\$ 600.71	
<b>5. Total of ALL CRO-1610 Pages</b> (This line must be on line 22 of Detailed Summary Page CRO-1100)		\$ 1,627.74	
<b>6. Purpose Codes (List detailed expenditure code in (g4.))</b>			
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.)			

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SEP 30 2015

# Debts and Obligations Owed By the Committee

Pg 1 of 2

Amendment  
 Yes  No

Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card purchases.

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
Committee to Elect Pam DeMaria for Town Council		3JM559	
<b>3. Creditor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>Note:</b> All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor.	
Pam DeMaria 1108 Hunters Trail Dr Indian Trail, NC 28079 (704) 621-7336		<b>b. Description of Creditor</b>  Candidate	
<b>c. Beginning Balance</b>	<b>d. Total Amount Paid</b>	<b>e. Total Amount Incurred</b>	<b>f. Remaining Balance</b>
\$ 0	\$ 1,027.03	\$ 1,027.03	\$ 1,027.03
<b>g. Incurred Debts (what the committee received this period)</b>			
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
Innovate Graphics  648 Matthews-Mint Hill Rd. Matthews, NC 28105 (704) 849-0597		08/19/2015	\$ 1,027.03
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
		B	Yard Signs
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
			\$
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
			\$
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
			\$
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
			\$
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>4. Total only this Page</b> (This should be the sum of all items 'g3.' from this page)		\$ 1,027.03	
<b>5. Total of ALL CRO-1610 Pages</b> (This line must be on line 22 of Detailed Summary Page CRO-1100)		\$ 1,627.74	
<b>6. Purpose Codes (List detailed expenditure code in (g4.))</b>			
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.)			

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