

Disbursements

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

1. Committee Full Name (and Fund if applicable) KELLY FOR COUNCIL	2. ID Number
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3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*
 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) CLARKE AMERICAN CHECK PRINTING 10931 LAUREATE DRIVE SAN ANTONIO, TX 78249	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Sum to Date \$ 91.43

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Draft	K	06/11/2009	\$ 91.43	PRINTED CHECKS
				\$	

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) CLASSIC EVENT RENTAL 537-A HAZEL MILL RD ASHEVILLE, NC 28806	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Sum to Date \$ 213.51

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	C	06/09/2009	\$ 33.36	DEPOSIT ON AV RENTAL
1	Check	C	06/25/2009	\$ 180.15	BALANCE ON AV RENTAL

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) FIRECRACKER JAZZ BAND C/O JON CORBIN 28 HILLDALE STREET ASHEVILLE, NC 28803	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Sum to Date \$ 600.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	C	06/25/2009	\$ 600.00	MUSIC AT CAMPAIGN KICKOFF EVENT
				\$	

5. Total only this Page \$ 904.94

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)
 \$ 10,297.59

7. Purpose Codes (List detailed expenditure code in (h.) above)

A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
I - Postage	J - Penalties	K* - Office Expenses	O* - Other

* Codes require detailed explanation in required remarks field (k)

Disbursements

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

1. Committee Full Name (and Fund if applicable)						2. ID Number
KELLY FOR COUNCIL						
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
MARKET CONNECTIONS 82 PATTON AVE SUITE 710 ASHEVILLE, NC 28801						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 3,844.24
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Check	C	06/24/2009	\$ 56.00	REIMBURSE FOR ABC PERMIT	
1	Check	I	06/24/2009	\$ 193.06		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
MARKET CONNECTIONS 82 PATTON AVE SUITE 710 ASHEVILLE, NC 28801						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 3,844.24
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Check	C	06/24/2009	\$ 252.68	REIMBURSE FOR POLICE SECURITY \$240 AND	
1	Check	C	06/24/2009	\$ 275.00	REIMB FOR SPECIAL EVENT LIABILITY	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
MARKET CONNECTIONS 82 PATTON AVE SUITE 710 ASHEVILLE, NC 28801						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 3,844.24
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Check	A	06/24/2009	\$ 1,067.50	BRAND DESIGN	
1	Check	O	06/29/2009	\$ 2,000.00	CAMPAIGN MANAGEMENT	
5. Total only this Page						\$ 3,844.24
6. Total of ALL CRO-1310 Pages						\$ 10,297.59
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>						
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>						
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses
I - Postage		J - Penalties		K* - Office Expenses		O* - Other
* Codes require detailed explanation in required remarks field (k)						

Disbursements

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

1. Committee Full Name (and Fund if applicable)						2. ID Number
KELLY FOR COUNCIL						
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
PAY PAL 2211 N. FIRST STREET SAN JOSE, CA 95131						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 30.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
PAY	Draft	K	06/09/2009	\$ 30.00	FEE TO OPEN ACCOUNT	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
WINDOWS ON THE PARK ONE NORTH PACK SQUARE ASHEVILLE, NC 28801						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 3,708.70
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Check	C	06/09/2009	\$ 1,854.35	DEPOSIT ON CAMPAIGN KICKOFF	
1	Check	C	06/25/2009	\$ 1,854.35	BALANCE DUE ON EVENT CATERING	
5. Total only this Page						\$ 3,738.70
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>						\$ 10,297.59
7. Purpose Codes (List detailed expenditure code in (h.) above)						
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses
I - Postage		J - Penalties		K* - Office Expenses		O* - Other
* Codes require detailed explanation in required remarks field (k)						

In-Kind Contributions

Pg 1 of 1

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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	
KELLY FOR COUNCIL			
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
MIKE RANGEL 77 COXE AVE ASHEVILLE, NC 28801		<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	
		c. Comments	
		d. Election Sum to Date	
		\$ 250.00	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
2 KEGS OF BEER FOR CAMPAIGN KICKOFF EVENT		07/01/2009	\$ 250.00
			\$
			\$
4. Total only this Page			\$ 250.00
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>			\$ 250.00

Outstanding Loans

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
KELLY FOR COUNCIL			
3. Lender 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
KELLY M MILLER 89 N. LIBERTY STREET ASHEVILLE, NC 28801		EXECUTIVE	
		e. Start Date (mm/dd/yyyy)	06/01/2009
		c. Employer's Name/Specific Field	ASHEVILLE CHAMBER OF COMMERCE
f. End Date (mm/dd/yyyy)			
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$ 5,000.00	\$ 5,000.00
k. Full Name of Lending Institution		l. Loan Number	
3. Lender 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
KELLY M MILLER 89 N. LIBERTY STREET ASHEVILLE, NC 28801		EXECUTIVE	
		e. Start Date (mm/dd/yyyy)	06/26/2009
		c. Employer's Name/Specific Field	ASHEVILLE CHAMBER OF COMMERCE
f. End Date (mm/dd/yyyy)			
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$ 4,000.00	\$ 4,000.00
k. Full Name of Lending Institution		l. Loan Number	
4. Total only this Page		\$ 9,000.00	
5. Total of ALL CRO-1430 Pages <i>(This line must be on line 21 of Detailed Summary Page CRO-1100)</i>		\$ 9,000.00	

Loan Proceeds Statement

The individual making a loan to the committee must provide the following information. Failure to provide all of the information requested could be a violation of campaign reporting disclosure laws.

- Name of committee to receive loan:
KELLY FOR COUNCIL
- Person lending money to committee (Lender):
KELLY MILNER
- Date of loan to committee: 6/1/09 (\$5,000) AND 6/26/09 (\$4,000)
- Name of lending institution and account number (source):
NO INSTITUTION INVOLVED - LOAN OF PERSONAL FUNDS
- Amount of loan: 6/1/09 \$5,000 's, 6/26/09 \$4,000
- Names of all parties responsible for payment of loan (guarantors):
NONE
- Period of loan: DEMAND
- Rate of interest of loan: NONE
- Security pledged for loan: UNSECURED

I, KELLY MILNER, acknowledge that all of the information
(Person lending money to committee)
provided is complete, true, and accurate. I further understand I may not forgive a loan that has an outstanding balance to any source.

Signature of Lender

David A. Wiley
Signature of Treasurer of Committee

This form must be submitted with the disclosure report for which the loan is initially disclosed.

Loan Proceeds Statement

The individual making a loan to the committee must provide the following information. Failure to provide all of the information requested could be a violation of campaign reporting disclosure laws.

- Name of committee to receive loan:

KELLY FOR COUNCIL

- Person lending money to committee (Lender):

KELLY MILLER

- Date of loan to committee: 6/1/09 (\$5,000) AND 6/26/09 (\$4,000)

- Name of lending institution and account number (source):

NO INSTITUTION INVOLVED - LOAN OF PERSONAL FUNDS

- Amount of loan: 6/1/09 \$5,000 's, 6/26/09 \$4,000

- Names of all parties responsible for payment of loan (guarantors):

NONE

- Period of loan: DEMAND

- Rate of interest of loan: NONE

- Security pledged for loan: UNSECURED

I, KELLY MILLER, acknowledge that all of the information
(Person lending money to committee)
provided is complete, true, and accurate. I further understand I may not forgive a loan that has an outstanding balance to any source.

Signature of Lender

David A. White
Signature of Treasurer of Committee

This form must be submitted with the disclosure report for which the loan is initially disclosed.

Loan Proceeds Statement

The individual making a loan to the committee must provide the following information. Failure to provide all of the information requested could be a violation of campaign reporting disclosure laws.

- Name of committee to receive loan:
KELLY FOR COUNCIL
- Person lending money to committee (Lender):
KELLY MILNER
- Date of loan to committee: 6/1/09 (\$5,000) AND 6/26/09 (\$4,000)
- Name of lending institution and account number (source):
NO INSTITUTION INVOLVED - LOAN OF PERSONAL FUNDS
- Amount of loan: 6/1/09 \$5,000 's, 6/26/09 \$4,000
- Names of all parties responsible for payment of loan (guarantors):
NONE
- Period of loan: DEMAND
- Rate of interest of loan: NONE
- Security pledged for loan: UNSECURED

I, KELLY MILNER, acknowledge that all of the information
(Person lending money to committee)
provided is complete, true, and accurate. I further understand I may not forgive a loan that has an outstanding balance to any source.

Signature of Lender

David A. White
Signature of Treasurer of Committee

This form must be submitted with the disclosure report for which the loan is initially disclosed.