

**BUNCOMBE COUNTY****BOARD OF ELECTIONS**

Jones P. Byrd, Chairman  
Lucy Smith, Secretary  
Bob Van Wagner, Member  
Trena Parker, Director

P.O. Box 7468  
Asheville, NC 28802  
Telephone 828-250-4200  
Fax 828-250-6262

**RECEIPT OF CAMPAIGN REPORT**DATE 10-26-2011

Committee to elect Marc Hunt  
(FULL NAME OF CANDIDATE OR COMMITTEE)

(OFFICE OF CANDIDATE OR PAC)

Arthur K. Barker

(PERSON FILING REPORT)

Title (CIRCLE ONE): CANDIDATE  
TREASURER828-279-6089  
(PHONE NUMBER)P.O. Box 18061 Asheville, NC 28819  
(ADDRESS OF COMMITTEE)**REPORT**☐ 2011 ORGANIZATIONAL☐ 1<sup>ST</sup> QUARTER☐ 2011 MID YEAR SEMI-ANNUAL☐ 48 HOUR☐ 35 DAY☐ 2<sup>ND</sup> QUARTER☐ PRE-PRIMARY☐ 2012 MID YEAR SEMI-ANNUAL☒ PRE-ELECTION☐ 3<sup>RD</sup> QUARTER☐ 2011 YEAR END SEMI-ANNUAL☐ 48 HOUR☐ 2012 MID YEAR SEMI-ANNUAL☐ 4<sup>TH</sup> QUARTER☐ 2012 YEAR END SEMI-ANNUAL☐ AMENDMENT☐ FINALRECEIVED BY: Lorey Davis, BUNCOMBE COUNTY BOARD OF ELECTIONS

# 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>			
<b>a. Full Name</b> COMMITTEE TO ELECT MARC HUNT			<b>c. ID Number</b>
<b>b. Mailing Address (include City, State and Zip Code)</b> PO BOX 18061 ASHEVILLE, NC 28814			<b>d. Date Filed</b> 10/26/2011
			<b>e. Phone Number</b> (828) 273-2172
<b>2. Report Year</b> 2011	<b>3. Period Start Date (mm/dd/yy)</b> 09/27/2011	<b>4. Period End Date (mm/dd/yy)</b> 10/24/2011	<b>5. Treasurer Full Name</b> ARTHUR K PARKER
<b>6. Type of Committee (Check One)</b>		<b>9. Type of Report (check only one type of report from one category)</b>	
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund		<b>Municipal</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input checked="" 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	
<b>7. Type of Fund (if applicable, check one)</b>		<b>State/County</b>	
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:		<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	
<b>8. Number of Fundraisers this Report</b> 2		<b>10. Special Report Name</b>	
<b>3. Account Information</b>		<b>3. Account Information</b>	
<b>a. Financial Institution Full Name</b> WACHOVIA		<b>a. Financial Institution Full Name</b>	
<b>b. Purpose</b> CAMPAIGN ACCOUNT	<b>c. Account Code</b> 1	<b>b. Purpose</b>	<b>c. Account Code</b>
	<b>d. Period Begin Balance</b> \$		<b>d. Period Begin Balance</b> \$
<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			
<u>Arthur K. Parker</u> Printed Name of Signer		<u>Arthur K. Parker</u> Signature of Appointed Treasurer	
		10/26/2011 Date	
<b>FOR OFFICE USE ONLY</b>			
Date Received: <u>10-27-2011</u>	Employee <u>[Signature]</u>	<b>Delivery Method</b>	
Date Postmarked: _____	Employee _____	<input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed	
Date Scanned: _____	Employee _____		
Date Data Entered: _____	Employee _____	<input type="checkbox"/> Signer has not received mandatory training	
<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

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. Type of Report</b>		<b>3. ID Number</b>	
COMMITTEE TO ELECT MARC HUNT		2011 Pre-Election			
Start of Election Cycle: January 1, <u>2011</u>		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 6,932.29		\$ 0.00	
<b>RECEIPTS</b>					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 125.00		\$ 3,675.00	
6) Contributions from Individuals (CRO-1210)		\$ 600.00		\$ 18,496.00	
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00		\$ 0.00	
8) Contributions from Other Political Committees (CRO-1230)		\$ 0.00		\$ 0.00	
9) Loan Proceeds (CRO-1410)		\$ 0.00		\$ 1,500.00	
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$ 0.00		\$ 0.00	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$ 0.00		\$ 0.00	
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$ 0.00		\$ 0.00	
11c) Outside Sources of Income (CRO-1250)		\$ 0.00		\$ 0.00	
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$ 0.00		\$ 0.00	
11e) Exempt Purchase Price Sales (CRO-1265)		\$ 0.00		\$ 0.00	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 725.00		\$ 23,671.00	
<b>EXPENDITURES</b>					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 3,020.41		\$ 17,123.15	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$ 0.00		\$ 0.00	
13c) Coordinated Party Expenditures (CRO-1310)		\$ 0.00		\$ 0.00	
14) Aggregated Non-Media Expenditures (CRO-1315)		\$ 10.93		\$ 682.55	
15) Loan Repayments (CRO-1420)		\$ 0.00		\$ 0.00	
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$ 171.99		\$ 1,130.34	
17) In-Kind Contributions (CRO-1510)		\$ 0.00		\$ 281.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 3,203.33		\$ 19,217.04	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 4,453.96		\$ 4,453.96	
<b>ADDITIONAL INFORMATION</b>					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0.00			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 1,500.00			
22) Debts and Obligations owed by the Committee (CRO-1610)		\$ 0.00			
23) Debts and Obligations owed to the Committee (CRO-1620)		\$ 0.00			
24) Account Transfers Within the Committee (CRO-1720)		\$ 0.00			
25) Administrative Support (CRO-1710)		\$ 0.00		\$ 0.00	
26) Forgiven Loans (CRO-1440)		\$ 0.00		\$ 0.00	
27) 48-Hour Notice Reports Sum (CRO-2220)		\$ 0.00		\$ 0.00	
28) Contributions to be Refunded (CRO-1215)		\$ 171.99		\$ 1,130.34	

# Aggregated Contributions from Individuals

Page 1 of 1

Amendment

☐ Yes ☒ No

Optional form used to report NC Contributions From Individuals of \$50 or less

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
COMMITTEE TO ELECT MARC HUNT						
<b>3. Contributor Information</b>						
<b>a. Amend</b>	<b>b. Account Code</b>	<b>c. Form of Payment</b>	<b>d. In-Kind Description</b>	<b>e. Date (mm/dd/yyyy)</b>	<b>f. Amount</b>	
<input type="checkbox"/> Add	1	Electric Funds Tran		10/24/2011	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Electric Funds Tran		10/13/2011	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Electric Funds Tran		10/23/2011	\$ 25.00	
<input type="checkbox"/> Remove						
<b>4. Total only this Page</b>					\$ \$125.00	
<b>5. Total of ALL CRO-1205 Pages</b>					\$ \$125.00	
<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 2

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 MARC HUNT						
<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>	
DOUG BARLOW 3 MANILA ST ASHEVILLE, NC 28806			POLLINATOR			
			<b>c. Employer's Name/Specific Field</b> SELF-EMPLOYED			
					<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"/>	1	Electric Funds Tran		10/13/2011	\$ 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>	
CHRISTOPHER ELLIMAN 555 PARK AVE NEW YORK, NY 28804			CEO			
			<b>c. Employer's Name/Specific Field</b> OPEN SPACE INSTITUTE			
					<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"/>	1	Check		09/27/2011	\$ 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>	
CHARISE GANTT 28 TROY HILL DR FLETCHER, NC 28732			PHARMACIST			
			<b>c. Employer's Name/Specific Field</b> BLUE RIDGE COMMUNITY HEALTH SERVICE			
					<b>e. Election Sum to Date</b> \$ 150.00	
<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"/>	1	Check		10/12/2011	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 350.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 600.00	



# Contributions from Individuals

Pg 2 of 2

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 MARC HUNT						
<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>	
JILL HEATH 223 E CHESTNUT ST STE 4 ASHEVILLE, NC 28804			MD			
			<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
			SELF-EMPLOYED		\$ 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"/>	1	Electric Funds Tran		10/21/2011	\$ 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>	
J. HARDY LEGWIN 308 SONDEY DR ASHEVILLE, NC 28805			CHAIRMAN			
			<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
			FLS ENERGY, INC.		\$ 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"/>	1	Check		10/17/2011	\$ 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>	
SUSAN RODERICK 265 PEARSON DR ASHEVILLE, NC 28801			EXECUTIVE DIRECTOR			
			<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
			ASHEVILLE GREENWORKS		\$ 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 checked="" type="checkbox"/>	1	Check		07/02/2011	\$ 50.00	
<input type="checkbox"/>	1	Check		10/16/2011	\$ 50.00	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 250.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 600.00	

# Disbursements

Pg 1 of 2

Amendment

☐ Yes ☒ No

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

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT MARC HUNT						<b>2. ID Number</b>	
<b>3. Type of Disbursement</b> <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							
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) INFOCUS CAMPAIGNS, LLC PO BOX 10726 FORT WORTH, TX 76114				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
				<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b> \$ 500.00	
<b>f. Account Code</b> 1	<b>g. Form of Payment</b> Check	<b>h. Purpose Code</b> O	<b>i. Date (mm/dd/yyyy)</b> 10/17/2011	<b>j. Amount</b> \$ 500.00	<b>k. Required Remarks</b> DATABASE AND TELEPHONING SERVICES		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) INGLES 915 MERRIMON AVE ASHEVILLE, NC 28804				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
				<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b> \$ 63.19	
<b>f. Account Code</b> 1	<b>g. Form of Payment</b> Debit Card	<b>h. Purpose Code</b> O	<b>i. Date (mm/dd/yyyy)</b> 10/09/2011	<b>j. Amount</b> \$ 51.91	<b>k. Required Remarks</b> FOOD, POLL WORKERS		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) MMS PO BOX 7557 ASHEVILLE, NC 28802				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
				<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b> \$ 6,871.83	
<b>f. Account Code</b> 1	<b>g. Form of Payment</b> Check	<b>h. Purpose Code</b> B	<b>i. Date (mm/dd/yyyy)</b> 09/30/2011	<b>j. Amount</b> \$ 2,100.00	<b>k. Required Remarks</b> DEPOSIT, PRINTING, MAILING		
<b>5. Total only this Page</b>						\$ 2,651.91	
<b>6. Total of ALL CRO-1310 Pages</b> <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>						\$ 3,020.41	
<b>7. Purpose Codes</b> (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)							

# Disbursements

Amendment  
Pg 2 of 2 ☐ Yes ☒ No

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
COMMITTEE TO ELECT MARC HUNT							
<b>3. Type of Disbursement</b> <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							
<b>4. Payee 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. Coordinated Committee Name</b>		<b>d. Comments</b>	
ON A ROLL, INC 100 N LEXINGTON AVE ASHEVILLE, NC 28801							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 4,011.41	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
1	Debit Card	O	09/27/2011	\$ 305.68	T-SHIRT DEPOSIT		
				\$			
<b>4. Payee 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. Coordinated Committee Name</b>		<b>d. Comments</b>	
STAPLES 65 MERRIMON AVE ASHEVILLE, NC 28801							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 562.09	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
1	Debit Card	K	10/09/2011	\$ 56.77	OFFICE SUPPLIES		
				\$			
<b>4. Payee 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. Coordinated Committee Name</b>		<b>d. Comments</b>	
USPS ASHEVILLE DOWNTOWN STATION ASHEVILLE, NC 28801							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 710.05	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
1	Check	I	10/17/2011	\$ 6.05			
				\$			
<b>5. Total only this Page</b>						\$ 368.50	
<b>6. Total of ALL CRO-1310 Pages</b>							
(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)						\$ 3,020.41	
<b>7. Purpose Codes</b> (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.

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
COMMITTEE TO ELECT MARC HUNT						
<b>3. Payee Information</b>						
<b>a. Amend</b>	<b>b. Account Code</b>	<b>c. Form of Payment</b>	<b>d. Purpose Code</b>	<b>e. Date (mm/dd/yyyy)</b>	<b>f. Amount</b>	<b>g. Required Remarks</b>
<input type="checkbox"/> Add	1	Electric Funds Tran	O	10/13/2011	\$ 4.95	PAYPAL FEE
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Electric Funds Tran	O	10/24/2011	\$ 1.75	PAYPAL FEE
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Electric Funds Tran	O	10/24/2011	\$ 4.23	PAYPAL FEE
<input type="checkbox"/> Remove						
<b>4. Total only this Page</b>					\$	10.93
<b>5. Total of ALL CRO-1315 Pages</b>					\$	10.93
<i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>						
<b>6. Purpose Codes (List detailed expenditure code in (d) above)</b>						
<b>B* - Printing</b>		<b>C* - Fundraising</b>		<b>D - To Another Candidate</b>		
<b>E - Salaries</b>		<b>F* - Equipment</b>		<b>G - Political Party</b>		
<b>I - Postage</b>		<b>J - Penalties</b>		<b>H* - Holding Public Office Expenses</b>		
<b>O* - Other</b>				<b>K* - Office Expenses</b>		
				<b>Q* - Donations to Legal Expense Fund</b>		
<b>* Codes require detailed explanation in required remarks field (g)</b>						

CRO-1315

NC State Board of Elections

December 2009

# 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

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
COMMITTEE TO ELECT MARC HUNT					
<b>3. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>d. Type of Committee</b>		<b>g. Comments</b>
MARC HUNT 55 CAMBRIDGE RD ASHEVILLE, NC 28804			<input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party		
			<b>e. Level Registered (Specify)</b>		<b>h. Original Receipt Date</b>
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		10/06/2011
					<b>i. Original Receipt Amount</b>
					\$ 171.99
<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>		<b>f. Purpose Code</b>	
PROGRAM OFFICER		OPEN SPACE INSTITUTE		P	
				<b>j. Election Sum to Date</b>	
				\$ 25.00	
<b>k. Account Code</b>	<b>l. Form of Payment</b>	<b>m. Required Remarks</b>		<b>n. Date (mm/dd/yyyy)</b>	<b>o. Amount</b>
1	Check	REIMBURSE PHONE, MAILING		10/08/2011	\$ 171.99
<b>4. Total only this Page</b>					\$ 171.99
<b>5. Total of ALL CRO-1320 Pages</b> (This line must be on line 15 of Detailed Summary Page CRO-1100)					\$ 171.99
<b>6. Purpose Codes (List detailed disbursement code in (f) above)</b>					
L - Returned to Contributor      M - Overpayment for Service      N - Exceeded Contribution Limit P* - Reimbursement of In-Kin      O* Other					
* Codes require detailed explanation in required remarks field (m)					

CRO-1320

NC State Board of Elections

July 2007