BUNCOMBE COUNTY

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



BOARD OF ELECTIONS

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

RECEIPT OF CAM	PAIGN REPORT
DATE 10-31-2011 (FULL NAME OF CANDID (FULL NAME OF CANDID (OFFICE OF CAND (OFFICE OF CAND (PERSON FILING REPORT) (PHONE NUMBER) (ADDRESS OF CO	CANDIDATE OR PAC) CANDIDATE Title (CIRCLE ONE): TREASURER 19025 (Islevelle) 18 28815
2011 ORGANIZATIONAL	1 ST QUARTER
2011 MID YEAR SEMI-ANNUAL	48 HOUR
35 DAY	2 ND QUARTER
PRE-PRIMARY	2012 MID YEAR SEMI-ANNUAL
PRE-ELECTION	3 RD QUARTER
2011 YEAR END SEMI-ANNUAL	48 HOUR
2012 MID YEAR SEMI-ANNUAL	4 TH QUARTER
	2012 YEAR END SEMI-ANNUAL
AMENDMENT	FINAL
RECEIVED BY: Januar Clair	, BUNCOMBE COUNTY BOARD OF ELECTIONS

Disc	losure	Report	Cover
	aos ar c	report	COTEL

Amendme	n t		
☐ Yes	X	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
CHRIS PELLY FOR CITY					BUN-000000-C-001
b. Mailing Address (include	City, State and Zip	Code)			d. Date Filed
PO BOX 19023					10/25/2011
ASHEVILLE, NC 28815)
					e. Phone Number
2. Report Year 3. Period St	art Date (mm/dd/y	y) 4. Period	End Date (mm/dd/yy)	5. Treasur	er Full Name
2011	09/27/2011		10/24/2011	VICKIE C	GADDY
6. Type of Committee (Chec	CONTRACTOR OF STREET	9. Type of Repor		type of rep	ort from one category)
Candidate Campaign I		Municipal	State/County		Referendum
	PAC Legal Expense Fund	Organizatio		nal	Organizational
	able, check one)	☐ Thirty-five ☐ Pre-primar	140000 17000 1800		Pre-referendum
Booster Fund"	ioie, check one)	▼ Pre-electio		3	☐ Final ☐ Supplemental Final
Building Fund		Pre-runoff	_		Annual
Presidential Election Year C	andidates Fund	Semi-annua			Special
NC Public Campaign Financ	ing Fund	☐ Mid Ye	ear Semi-annua	1	—
LUE NOON	1	☐ Year E	nd	ar	10. Special Report Name
Other:		☐ Final	Year E	nd	erio-more in albania (il dissaturm estinya) dili Estenzia di Esperificiale di California di Californ
8. Number of Fundraisers tl	is Report	Special	☐ Final		
0			☐ Special		
3. Account Information	SEASON STATES	CONTRACTOR STREET	3. Account Informati	on	
a. Financial Institution Full !	Name		a. Financial Institutio		e
SUN TRUST			PAYPAL		
b. Purpose	c. Account Code		b. Purpose		c. Account Code
CAMPAIGN ACCOUNT		1	TO RECEIVE ONLI	NE	2
			CONTRIBUTIONS;		MW
	d. Period Begin	Balance	USED FOR	d. Period Begin Balance	
	S		EXPENDITURES		\$
CERTIFICATION					10000 10000
I certify that the Committee	or Fund is in com	onliance with all a	annlicable provisions (of Article 20	24 22D 8 22D 22M a.c
Chapter 163 of the NC Gen	eral Statutes and t	hat no funds are	commingled with prob	ibited or of	ther non-disclosed
funds. I further certify tha	t this report is con	nplete, true and c	orrect and that I have	been traine	d by the NC State Board
1/2 11/6	n 1 /	200	1/1-		a by the ric blace Board
Printed Name of	Signer Jones 6,	add Sim	ature of Appointed Freas		10/25/2011
FOR OFFICE USE ONLY	Signer	Sign	ature of Appointed Preas	urer	Date
	10 00 0		Inn.	D 1	
Date Received:	10-26-20	2// Emplo	yee: Aflan	100	<u>very Method</u> Normal Mail
Date Postmarked:		_ Emplo	vee:		Registered Mail
Date Fostmande.			yee	· 🔟	Hand Delivered
Date Scanned:		_ Employ	yee:	. 🗆 1	Electronically Filed
Date Data Entered:		_ Employ	vao:		Signer has not received
and Littered,		_ Employ	,		nandatory training
Please Note: This form	cannot be used to	amend committe	ee information such as		
assist	ant treasurer, cust	odian of books in	formation, or account	informatio	n.
			CRO 2100A E) to make		

Data Had Commons				Amendm	ent [X] No
Detailed Summary Jse this form to summarize all disclosure reporting forms and	l to total mon	etary info	rmation	☐ Yes	LAI No
1. Committee Full Name (and Fund if applicable) 2	. Type of Rep	ort	3.	ID Numbe	
CHRIS PELLY FOR CITY COUNCIL	2011 Pre-Elec	ction	1	3UN-000	000-C-001
Start of Election Cycle: January 1,2011			al this ing Period		tal this ion Cycle
4) Cash on Hand at Start		\$	3,634.11	\$	0.0
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	425.00	\$	2,657.4
6) Contributions from Individuals	(CRO-1210)	\$	3,149.00	\$	11,970.8
7) Contributions from Political Party Committees	(CRO-1220)	\$	0.00	\$	0.0
8) Contributions from Other Political Committees	(CRO-1230)	\$	0.00	\$	0.0
9) Loan Proceeds	(CRO-1410)	\$	0.00	\$	0.0
0) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	30.00	\$	30.0
1) Other Receipt Sources					
11a) Interest on Bank Accounts	(CRO-1250)	\$	0.00	\$	0.0
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$	0.00	\$	0.0
11c) Outside Sources of Income	(CRO-1250)	\$	0.00	\$	0.0
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	0.00	\$	0.0
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	0.00	s	0.0
2) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,	11d and 11e)	\$	3,604.00	s	14,658.2
EXPENDITURES			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
(3) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$	3,786.72	\$	10,543.3
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	0.00	\$	0.0
13c) Coordinated Party Expenditures	(CRO-1310)	\$	0.00	\$	0.0
(4) Aggregated Non-Media Expenditures	(CRO-1315)	\$	0.00	\$	153.5
15) Loan Repayments	(CRO-1420)	\$	0.00	\$	0.0
(6) Refunds/Reimbursements from the Committee	(CRO-1320)	\$	0.00	\$	0.0
17) In-Kind Contributions	(CRO-1510)	\$	0.00	\$	510.0
(a) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15.	. 16 and 17)	\$	3,786.72	\$	11,206.8
(9) Cash on Hand at End (Add lines 4 and 12 together, then sub		\$	3,451.39	S	3,451.3
ADDITIONAL INFORMATION		y See	i posper la		
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	0.00		
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	0.00		
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	\$	0.0
26) Forgiven Loans	(CRO-1440)	\$	0.00	\$	0.0
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$	0.00	\$	0.0
28) Contributions to be Refunded	(CRO-1215)	\$	0.00	\$	0.0

		outions from I	ndividuals Page From Individuals of \$		1	Amendme Yes	nt X No
1. Committe	ee Full Name (and	Fund if applicable)			2. ID I	Number	W - 1 - 1 - 1 - 1 - 1 - 1
CHRIS PEI	LLY FOR CITY C	COUNCIL			В	UN-000000	-C-001
3. Contribut	tor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/de	l/yyyy)	f. Amount	
☐ Add ☐ Remove	1	Check		10/04/20	11	\$	50.00
Add Remove	1	Check		10/04/20	11	\$	30.00

Remove	1	Спеск	10/04/2011	\$	50.00
☐ Add ☐ Remove	1	Check	10/04/2011	\$	30.00
Add Remove	1	Check	10/04/2011	\$	25.00
Add Remove	2	Credit Card	10/17/2011	\$	50.00
Add Remove	2	Credit Card	09/27/2011		50.00
Add Remove	1	Check	10/04/2011 \$		50.00
☐ Add ☐ Remove	1	Check	10/05/2011		50.00
Add Remove	2	Credit Card	10/13/2011 \$		50.00
Add Remove	1	Cash	10/03/2011 \$		50.00
Add Remove	1	Check	10/04/2011 \$		20.00
4. Total only	this Page	\$		\$425.00	
5. Total of Al (This line must l		s		\$425.00	

CRO-1205

NC State Board of Elections

April 2007

Cont	ributions fr	om Individuals	S	1	Pg <u>1</u> of 4	_	Amendmen Ves	nt No
TOTAL PROPERTY.				ontributions	under \$50 if form CRO	1205	is not used	ē,
		(and Fund if applicab	le)			2.	ID Number	
CHRIS	S PELLY FOR CI	TY COUNCIL				I	BUN-00000	0-C-001
The second second	ributor Informati			AND THE PARTY OF T	Remove	gill)		
	Name, Mailing Add			b. Job Title/	Profession	d. C	Comments	
	ide city, state, & z	ip)			ER SOFTWARE			
	IE ARGHIERE	V DD		DEVELOP c. Employer	ER 's Name/Specific Field			
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							\$	
3. Cont	ributor Informati	on		Add 🔲 F	Remove			
,	Name, Mailing Ado			b. Job Title/	Profession	d. C	Comments	1
	ide city, state, & z	ip)		COUNCIL				
	BOTHWELL			a Employar	's Name/Specific Field	-		
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ASHE	VILLE, NC 2000) I		CITY OF A	ASHEVILLE	e. I	Dection Sum	to Date
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						\$		100.00
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	l	Check			10/03/2011		S	100.00
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							\$	
3. Cont	ributor Informati	on		Add 🔲 F	Remove			
25 (45)	Name, Mailing Ado			b. Job Title/		d. C	Comments	
(inclu	ide city, state, & z	ip)		RETIRED				
MACK						4		
	X 5596				's Name/Specific Field			
ASHE	VILLE, NC 2881	3		RETIRED		0 1	dection Sum	to Date
1						5400	acction Sum	
						\$		100.00
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				-			\$	

4. Total only this Page

5. Total of ALL CRO-1210 Pages

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

300.00

\$

\$

Amendment Contributions from Individuals ☐ Yes X 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 CHRIS PELLY FOR CITY COUNCIL BUN-000000-C-001 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) RETIRED MARY FISHMAN c. Employer's Name/Specific Field 117 NORWOOD AVE ASHEVILLE, NC 28804 RETIRED e. Election Sum to Date 300.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Check 1 10/05/2011 100.00 \$ \$ ☐ Add ☐ Remove 3. Contributor Information a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) RETIRED MARY FISHMAN c. Employer's Name/Specific Field 117 NORWOOD AVE ASHEVILLE, NC 28804 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 Check 1 10/21/2011 \$ 100.00 \$ \$ 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) PHARMACIST CHARISE GANTT c. Employer's Name/Specific Field 28 TROY HILL DR. FLETCHER, NC 28732 BLUE RIDGE COMMUNITY e. Election Sum to Date **HEALTH** 150.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount

10/14/2011

\$

\$

150.00

Check

1

Contributions from Individuals

				Amendm	ent
Pg _	3_	of	4	☐ Yes	No No

this form to report individual contributions ov	er \$50 or contributions under	\$50 if form CRO 1205 is not a	used
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107.270.00000.0000	tornico report in			COMMENSATION STREET		2 1	D Number	
1. Committee Full Name (and Fund if applicable) CHRIS PELLY FOR CITY COUNCIL								0.001
CHRIS	PELLY FOR CI	TY COUNCIL					3UN-00000	U-C-001
3 Contr	ibutor Information	on		Add \square R	Remove			
	ame, Mailing Add		_	b. Job Title/I	White the state of the Control of th	d. C	Comments	
	de city, state, & zi			ARTIST				
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	IS LUCCHESE			c. Employer'	s Name/Specific Field	1		
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ASHE	VILLE, NC 2880	13		SELI		e. F	Dection Sum	to Date
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a. Full N	lame, Mailing Ado	iress & Phone		b. Job Title/	Profession	d. C	Comments	
(inclu	de city, state, & z	ip)		REALTOR		1		
SUZAN	NNE MOLLOY							
Annual Control	ARK SPRING LN	N.		c. Employer'	's Name/Specific Field	1		
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ASHE	VILLE, NC 2880	13		KELLEK	KELLER WILLIAMS			to Date
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				1		\$		99.00
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beginner against and	ributor Informati	and the control of th		STANDARD BUILDING CONTRACTOR	Remove			
a. Full N	lame, Mailing Ado	dress & Phone		b. Job Title/	Profession	d. C	Comments	
(inclu	de city, state, & z	ip)		CARPENT	ER	1		
GREGO	ORY PELLY					1		
	IDDLE LAKE R	D		c. Employer's Name/Specific Field				
	PSON, PA 1846			DBA COM	IPLETE HOME	1		
THOM	1301,171 1040	,,,		DB/(COI)	II EETE HOME	e. I	Dection Sun	to Date
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5. Tota	al of ALL CR	O-1210 Pages				6		2.140.00
		6 of Detailed Summary	Page CRO-1100)			\$		3,149.00

Contributions	from	Individuals
Contributions	HOIII	Illulviuuais

Pg 4 of 4 Amendment No

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

			THE RESERVE THE PERSON NAMED IN COLUMN 2 IS NOT THE OWNER.	minoutions t	illuci \$50 il lottili ello i	2 1	D Numbe	Control Metals	
1. Committee Full Name (and Fund if applicable)								ooo-C-001	
CHRIS	PELLY FOR CIT	TY COUNCIL				$\lceil \rceil_{\mathrm{B}}$	-UN-000	000-0-001	
3. Contr	ributor Informatio	n		A TOTAL OF STREET STREET AND ADDRESS.	Remove	Ville.			
	ame, Mailing Add			b. Job Title/F	Profession	d. C	omment	S	
(include city, state, & zip) TIM RHODES 7 RHODODENDRON PL ASHEVILLE, NC 28805				ADMINIST	RATOR				
			e. Employer's	's Name/Specific Field	1				
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				BONCOM	DD D00	e. Election Sum to Date			
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4. Tot	al only this Pa	ge				\$		2,100.00	
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(This	Charles and the state of the st	6 of Detailed Summary	THE RESERVE OF THE PERSON NAMED IN	oard of Electio	ons	10		April 2007	
CAU-1	210								

			To the Committee or		g 1 of _	l nendi	☐ Yes	X No
1. Committee Ful CHRIS PELLY	l Name	(and Fund if a	pplicable)	Telinoursements	Tor a previous ex	2. ID	Number	0000-C-001
3. Contributor In	value and v		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Add □ Re	emove		BUN-00	0000-C-001
a. Full Name, Mai (include city, st	ling Add ate, & zi	ress & Phone		d. Type of Comm Candidate Referendum		g. Co	mments	
BLUE RIDGE PRIDE information@blueridgepride.com ASHEVILLE, NC 28801				e. Level Register Federal State			penditure Date 9/2011	
						i. Ori \$	ginal Exp	oenditure Amt
b. Job Title/Profes	sion	c. Employer's	Name/Specific Field	f. Purpose REFUND ON BO	ООТН	j. Ele	ction Sun	30.00
k. Account Code	l. Form	of Payment Check	m. In-Kind Descrip	tion	n. Date (mm/dd/ 10/05/2011	10000000	o. Amou \$	30.00
4. Total only t	his Pag	ge				\$		30.00
5. Total of AL (This line must be			es ummary Page CRO-110	0)		\$		30.00

Amendment

CRO-1240 NC State Board of Elections December 2007

					Amendm	ent
Disbursements	Pg	1	of	2_	☐ Yes	X No
Use this form to report expenditures from the committee for operating						
committees and coordinated party expenditures						

	Full Name (and Fund Y FOR CITY COUN						2. ID Number BUN-000	er 0000-C-001
3. Type of Disbu		use separate CRC		arright (OV) 198-4000 ONTO A MINISTER OF THE ARREST				(S)
Operating Exp		tributions to Candidat				ordinat	ted Party Expe	nditures
4. Payee Inform		Suite Hill 19 Strain		are or regal or (PCS-20)	Remove			
	failing Address & Ph	one	b). Coordinate	d Committee N	ame	d. Comment	S
(include city, sta	500 13.Ti. 000							
MEDA CORP			F				4	
65 TOWN MT					tered (Specify)			
ASHEVILLE, 1	NC 28804		12	Federal	County			
k			ا	State	iviunicip	anty:	e. Election S	um to Date
							\$	2,274.97
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Re	quired Rema	rks
1	Check	О	09/	/30/2011	\$ 2,274.97	MA	IL OUT POS	T CARDS
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	lailing Address & Pho	one	RECORD FORMAL SERVICE AND ADDRESS.	COLUMN TO STREET, THE STREET,	d Committee Na	am e	d. Comments	0
(include city, sta		Sile		. Cooldina.c.	a Committee	Ame	d. Comment.	32
MOUNTAIN E								
2 WALL ST	M RESS		c	. Level Regist	tered (Specify)	1 ,5	1	
ASHEVILLE, 1	NC 28801			Federal	County:	1		
			[State	Municip	ality:	e. Election S	um to Date
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	ailing Address & Pho	one	D.	. Coordinated	d Committee Na	ıme	d. Comments	
(include city, sta			11 4 = 1			!	1	
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24 CURVE ST.			Γ.	Level Regist Federal	County:			
ASHEVILLE, N	NC 28801		۱	State	19. 19. 19. 19. 19. 19. 19. 19. 19. 19. 19. 19. 19. 19.	Control of	e. Election St	to Date
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	August of the August and the August						\$	3,164.97
	CRO-1310 Pages							
	in line 13a of Detailed S						\$	3,786.72
	in line 13b of Detailed S in line 13c of Detailed Si					omm)		-8
	odes (List detailed				The same same	1000000		
A* - Media	B* - Printing		Access to the second se	ndraising	D - To	Anotl	her Candidate	
E - Salaries	F* - Equipme	•		ical Party			Public Offic	
I - Postage	J - Penalties			ice Expenses		-	on to Legal Ex	10 10 10 10 10 10 10 10 10 10 10 10 10 1
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	e detailed explanation	n in required rem	arks fiel	ld(k)				AREA ON FREE

				Amendm	ent
Pg	2	of	2_	☐ Yes	X No
	Pg	Pg <u>2</u>	Pg <u>2</u> of	Pg <u>2</u> of <u>2</u>	Pg 2 of 2 Ves

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

1. Committee Fi	all Name (and Fund	if applicable)					2. ID Num	
CHRIS PELLY	FOR CITY COUN	CIL					BUN-0	00000-C-001
3. Type of Disbu	rsement (Please	use separate CRO	0-1310 for	rms for each	type of Disbu	rseme	nt.)	
Operating Exp	oenses 🔲 Cont	ributions to Candida	tes/Political	Committees	☐ Coo	ordinat	ed Party Exp	enditures
4. Payee Inform	ation		□ A	dd 🔲	Remove			THE STATE OF
a. Full Name, Ma	ailing Address & Ph	one	b.	Coordinated	d Committee N	ame	d. Commer	ts
(include city, sta	te, & zip)							
RUBY'S BARE	QUE		_					
BEVERLY RD ASHEVILLE, NC 28805					tered (Specify)			
				Federal State	☐ County: ☐ Municip		. Flantina	Sum to Date
			-	State	Municip	rainty.	c. Mection	Sum to Date
			- 1				\$	120.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (n	m/dd/yyyy)	j. Amount	k. Re	quired Rem	arks
1	Check	0	10/1	1/2011	\$ 120.00	PRIN	MARY GA	THERING
					\$	PIZZ		
						estation lines	Automorphism and the second	
4. Payee Inform			A	removal and	Remove			
(8)	ailing Address & Ph	one	b.	Coordinate	d Committee Na	ıme	d. Commen	ts
(include city, sta								
SIR SPEEDY P				Level Regist	tered (Specify)			
231 BILTMOR				Federal	County:			
ASHEVILLE, Y	NC 28801		l=		Municip		e. Election	Sum to Date
			100		_		7554K	
	V	W			W		\$	358.75
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (m	m/dd/yyyy)	j. Amount	k. Re	quired Rem	arks
Ï	Check	В	10/0	6/2011	\$ 358.75	PRIN	NT FLYER	S
					\$			
4. Payee Inform	ation			dd \square	Remove			
	niling Address & Ph	one		Carlotte Transfer	Committee Na	me	d. Commen	ts
(include city, sta								
URBAN NEWS	3							
P.O. BOX 55			c.		ered (Specify)			
ASHEVILLE, N	NC 28801		<u> </u>	Federal	County:	4550mm in		
			_	State	☐ Municip	ality:	e. Election	Sum to Date
							\$	286.00
f. Account Code	g. Form of Payment	h. Purpose Code	i Date (m	m/dd/yyyy)	i Amount	k Re	quired Rem	F 200 KEN AND AND AND AND AND AND AND AND AND AN
1	Check	A	1	entropy and the second	4000		ERTISEM	
	Check	A	10/0.	3/2011		ADV	EKTISEM	ENI
					\$			
5. Total only thi	s Page						\$	621.75
6. Total of ALL	CRO-1310 Pages				100			
(This line goes i	n line 13a of Detailed S	Summary Page CRO	-1100 if Op	erating Expen	ises)	119100000	6	2 706 72
	n line 13b of Detailed S					omm)	\$	3,786.72
(This line goes is	n line 13c of Detailed S	Summary Page CRO	-1100 if Cod	ordinated Par	ty Expenditures)			
7. Purpose Co	des (List detailed	expenditure code	in (h.) abo	ove)				
A* - Media	B* - Printin		C* - Fun		D - To	Anoth	ner Candida	te
E - Salaries	F* - Equipm		G - Politic			olding	Public Off	ice Expenses
I - Postage	J - Penaltie	S	K* - Offi	ce Expenses	Q* - D	onatio	n to Legal 1	Expense Fund
O* Other		e a sulta de la la camacade me						00420000000000000000000000000000000000
Codes require	e detailed explanatio	n in required ren	narks field	1 (K)		and H		