

Disbursements

RECEIVED Pg 1 of 1
 AUG 22 2011
WAKE CO. BOARD OF ELECTIONS

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 |
| The Keep Apex Beautiful Committee | | | | | |
| 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 <small>(include city, state, & zip)</small> | | | b. Coordinated Committee Name | | d. Comments |
| HPM Mail PO Box 97744 Raleigh, NC 27624 | | | | | |
| c. Level Registered (Specify) | | | e. Election Sum to Date | | |
| <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | | | | \$ 105.60 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| A | Check | O | 5/5/11 | \$105.60 | Palmcards |
| | | | | \$ | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone <small>(include city, state, & zip)</small> | | | b. Coordinated Committee Name | | d. Comments |
| Kingfish Consulting 5120 Sunsail Dr. Antioch, TN 37013 | | | | | |
| c. Level Registered (Specify) | | | e. Election Sum to Date | | |
| <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | | | | \$ 121.50 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| A | Check | O | 5/5/11 | \$121.50 | Handfans |
| | | | | \$ | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone <small>(include city, state, & zip)</small> | | | b. Coordinated Committee Name | | d. Comments |
| Capitol Promotions PO Box 231 Glenside, PA 19038 | | | | | |
| c. Level Registered (Specify) | | | e. Election Sum to Date | | |
| <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | | | | \$ 171.00 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| A | Check | O | 5/5/11 | \$171.00 | Stickers |
| | | | | \$ | |
| 5. Total only this Page | | | | | \$ 398.10 |
| 6. Total of ALL CRO-1310 Pages | | | | | \$ 398.10 |
| <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> | | | | | |