

Contributions from Other Political Committees Pg 1 of 1

Amendment
 Yes No

Use this form to report contributions from other candidate, referendum or PAC committees

1. Committee Full Name (and full legal name)			2. ID Number	
CITIZENS FOR RON MARGIOTTA				
3. Contributor Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee		d. Comments
COBLE FOR COMMISSIONER 3900 MERTON DR STE 120 RALEIGH, NC 27609		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum		
		c. Level Registered (Specify)		
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
		Wake		e. Election Sum to Date \$ 500.00
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
1	Check		09/22/2011	\$ 500.00
				\$
				\$
3. Contributor Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee		d. Comments
WAKE COMMUNITY PAC 2522 BLACKWOLF RUN LANE RALEIGH, NC 27604		<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum		
		c. Level Registered (Specify)		
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
				e. Election Sum to Date \$ 43.60
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
1	Check		09/17/2011	\$ 43.60
				\$
				\$
4. Total only this Page				\$ 543.60
5. Total of ALL CRO-1230 Pages (This line must be on line 8 of Detailed Summary Page CRO-1100)				\$ 543.60

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
CITIZENS FOR RON MARGIOTTA						
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)						
<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 checked="" type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
ALL ABOARD PIZZA & ICE CREAM 204 VILLAGE WALK DR HOLLY SPRINGS, NC 27540 (919) 552-8800						
				c. Level Registered (Specify)		
				<input checked="" type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 337.50
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Check	O	09/18/2011	\$ 337.50	FOOD& DRINK	
				\$		
4. Payee Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
CLUBFLYERS.COM 2300 NW 7TH AVENUE MIAMI, FL 33127 (800) 433-9298						
				c. Level Registered (Specify)		
				<input checked="" type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 1,258.51
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Debit Card	A	09/06/2011	\$ 348.91	DOOR HANGERS	
1	Debit Card	A	09/19/2011	\$ 348.91	DOOR HANGERS	
4. Payee Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
J.N. DOLLAR AND ASSOCIATES P.O. BOX 1352 CARY, NC 27512 (919) 233-8399						
				c. Level Registered (Specify)		
				<input checked="" type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 11,700.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Check	O	09/23/2011	\$ 5,700.00	RESEARCH & POLLING	
1	Check	A	09/25/2011	\$ 6,000.00	CARD MAILING	
5. Total only this Page						\$ 12,735.32
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)						\$ 14,150.45
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		Q* - Donation to Legal Expense Fund
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	
CITIZENS FOR RON MARGIOTTA							
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	
LABELS & LISTS 2500 116TH AVE NE BELLEVUE, WA 98004 (425) 822-1984							
				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	
						\$ 356.93	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Check	O	09/26/2011	\$ 356.93	VOTER FILE DATA		
				\$			
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	
MYCAMPAIGNSTORE.COM P.O. BOX 596 JEFFERSONVILLE, IN 47131 (800) 928-9480							
				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	
						\$ 899.63	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Debit Card	O	09/20/2011	\$ 735.00	YARD SIGNS		
				\$			
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	
STAM AND DANCHI 510 W. WILLIAMS ST APEX, NC 27502 (919) 362-8873							
				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	
						\$ 200.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Check	O	09/11/2011	\$ 200.00	OFFICE SPACE RENTAL		
				\$			
5. Total only this Page						\$ 1,291.93	
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>						\$ 14,150.45	
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		Q* - Donation to Legal Expense Fund	
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	
CITIZENS FOR RON MARGIOTTA							
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)							
<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	
USPS 501 W. WILLIAMS STREET APEX, NC 27502							
				c. Level Registered (Specify)			
				<input checked="" type="checkbox"/> Federal <input type="checkbox"/> County:			
				<input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date	
						\$ 202.40	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Debit Card	I	09/05/2011	\$ 7.92			
1	Debit Card	I	09/06/2011	\$ 39.60			
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	
USPS 501 W. WILLIAMS STREET APEX, NC 27502							
				c. Level Registered (Specify)			
				<input checked="" type="checkbox"/> Federal <input type="checkbox"/> County:			
				<input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date	
						\$ 202.40	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Debit Card	I	09/09/2011	\$ 44.00			
1	Debit Card	I	09/12/2011	\$ 31.68			
5. Total only this Page						\$ 123.20	
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)						\$ 14,150.45	
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		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							

Aggregated Non-Media Expenditures

Optional form used to report NC Non-Media Expenditures of \$50 or less.

CITIZENS FOR RON MARGIOTTA						
3. Payee Information						
<input type="checkbox"/> Add <input type="checkbox"/> Remove	Account Code	Form of Payment	Purpose Code	Date (mm/dd/yyyy)	Amount	Required Remarks
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check	O	09/11/2011	\$ 17.21	INK CARTRIDGE&ENVEL
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Debit Card	O	09/05/2011	\$ 35.32	ENVELOPES&LABEL S
4. Total only this Page					\$	52.53
5. Total of ALL CRO-1315 Pages <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>					\$	52.53
B* - Printing		G - Political Party		D - To Another Candidate		
E - Salaries		J - Penalties		Q* - Donations to Legal Expense Fund		
O* - Other						
* Codes require detailed explanation in required remarks field (g)						

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.

1. Committee Full Name (and fund if applicable)		2. ID Number	
CITIZENS FOR RON MARGIOTTA			
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	c. Comments	
Aggregated Individual Contribution	<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		
		d. Election Sum to Date	
		\$ 45.00	
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount	
FOOD&DRINK	08/31/2011	\$ 25.00	
		\$	
		\$	
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	c. Comments	
Aggregated Individual Contribution	<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		
		d. Election Sum to Date	
		\$ 9.53	
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount	
ENVELOPES	09/11/2011	\$ 5.53	
		\$	
		\$	
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	c. Comments	
MARTHA FAY 962 TENDER DRIVE APEX, NC 27502 (919) 524-5454	<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		
		d. Election Sum to Date	
		\$ 145.67	
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount	
FOOD&DRINK	08/31/2011	\$ 45.67	
		\$	
		\$	
4. Total only this Page		\$ 76.20	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 373.68	

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.

1. Committee Full Name (and Full Name of Candidate)		2. ID Number
CITIZENS FOR RON MARGIOTTA		
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	c. Comments
STACY HEINEN 103 WENDHURST COURT APEX, NC 27502 (919) 303-0780	<input checked="" type="checkbox"/> Individual	
	<input type="checkbox"/> Candidate	
	<input type="checkbox"/> Party	
	<input type="checkbox"/> PAC	
	<input type="checkbox"/> Referendum	d. Election Sum to Date
	<input type="checkbox"/> Other Receipt Source	\$ 133.00
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
FOOD&DRINK	08/31/2011	\$ 25.00
		\$
		\$
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	c. Comments
BETH MCANDREW 520 KELLYRIDGE DR APEX, NC 27502 (919) 363-3752	<input checked="" type="checkbox"/> Individual	
	<input type="checkbox"/> Candidate	
	<input type="checkbox"/> Party	
	<input type="checkbox"/> PAC	
	<input type="checkbox"/> Referendum	d. Election Sum to Date
	<input type="checkbox"/> Other Receipt Source	\$ 55.00
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
FOOD&DRINK	08/31/2011	\$ 30.00
		\$
		\$
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	c. Comments
VICTORIA MOSLEY 522 KELLYRIDGE DR APEX, NC 27502 (919) 363-9574	<input checked="" type="checkbox"/> Individual	
	<input type="checkbox"/> Candidate	
	<input type="checkbox"/> Party	
	<input type="checkbox"/> PAC	
	<input type="checkbox"/> Referendum	d. Election Sum to Date
	<input type="checkbox"/> Other Receipt Source	\$ 130.00
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
FOOD&DRINK	08/31/2011	\$ 30.00
		\$
		\$
4. Total only this Page		\$ 85.00
5. Total of ALL CRO-1510 Pages <i>(This line must be on the 17 of Detailed Summary Page CRO-1100)</i>		\$ 373.68

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.

1. Committee Full Name (and Fund if applicable)		2. ID Number
CITIZENS FOR RON MARGIOTTA		
3. Contributor Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
SHEILA RISK 219 WENDHURST COURT APEX, NC 27502	<input checked="" type="checkbox"/> Individual	
	<input type="checkbox"/> Candidate	
	<input type="checkbox"/> Party	
	<input type="checkbox"/> PAC	
	<input type="checkbox"/> Referendum	d. Election Sum to Date
	<input type="checkbox"/> Other Receipt Source	\$ 138.00
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
FOOD&DRINK	08/31/2011	\$ 120.00
NOTE CARDS	09/18/2011	\$ 18.00
		\$
3. Contributor Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
ANN ROULEAU 209 PARKGATE DR CARY, NC 27519 (919) 367-0033	<input checked="" type="checkbox"/> Individual	
	<input type="checkbox"/> Candidate	
	<input type="checkbox"/> Party	
	<input type="checkbox"/> PAC	
	<input type="checkbox"/> Referendum	d. Election Sum to Date
	<input type="checkbox"/> Other Receipt Source	\$ 74.48
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
COFFEE&DONUTS FOR VOLUNTEERS	09/03/2011	\$ 62.43
ENVELOPES AND LABELS	09/13/2011	\$ 12.05
		\$
4. Total only this Page		\$ 212.48
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		\$ 373.68