

# Contributions from Individuals

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>	
FRIENDS OF MICHELLE MUIR							
<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>	
CHARLES R SMITH JR 119 BARCLIFF TERR CARY, NC 27518				ARCHITECT			
				<b>c. Employer's Name/Specific Field</b> WITHERS & RAVENEL			
						<b>e. Election Sum to Date</b>	
						\$ 300.00	
<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"/>	M	Check		07/02/2011		\$ 300.00	
<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>	
PAUL STAM 714 HUNTER ST APEX, NC 27502				ATTORNEY			
				<b>c. Employer's Name/Specific Field</b> STAM & DANCHI, PLLC			
						<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"/>	M	Check		08/25/2011		\$ 150.00	
<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>	
A CRAIG STEPHENSON 111 PRESTON GRANDE WAY MORRISVILLE, NC 27560				BUSINESS PERSON			
				<b>c. Employer's Name/Specific Field</b> CARY OIL, INC.			
						<b>e. Election Sum to Date</b>	
						\$ 600.00	
<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"/>	M	Check		07/21/2011		\$ 600.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>4. Total only this Page</b>						\$ 1,050.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 6,166.15	

# Contributions from Individuals

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>	
FRIENDS OF MICHELLE MUIR							
<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>	
DENISE STETTER 114 NORMANDALE CIRCLE CARY, NC 27513				ENTREPRENEUR			
				<b>c. Employer's Name/Specific Field</b>			
				SELF			
						<b>e. Election Sum to Date</b>	
						\$ 75.00	
<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"/>	M	Credit Card		08/09/2011		\$ 75.00	
<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>	
DEBBIE TOMASKO 102 WOODARBOR CT CARY, NC 27513				HOUSEWIFE			
				<b>c. Employer's Name/Specific Field</b>			
				SELF			
						<b>e. Election Sum to Date</b>	
						\$ 321.51	
<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"/>	M	Check		04/13/2011		\$ 10.00	
<input type="checkbox"/>	M	In-Kind	PICNIC SUPPLIES, OFFICE SUPPLIES,	08/30/2011		\$ 311.51	
<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>	
LIZA WEIDLE 106 MARQUETE DR CARY, NC 27513				WRITER			
				<b>c. Employer's Name/Specific Field</b>			
				SELF-EMPLOYED			
						<b>e. Election Sum to Date</b>	
						\$ 75.00	
<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"/>	M	Credit Card		08/11/2011		\$ 75.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>4. Total only this Page</b>						\$ 461.51	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 6,166.15	

# Contributions from Individuals

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>	
FRIENDS OF MICHELLE MUIR						
<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>	
CATHY WRIGHT 51315 EASTCHURCH CHAPEL HILL, NC 27517			RETIRED			
			<b>c. Employer's Name/Specific Field</b>			
			EDUCATION		<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 checked="" type="checkbox"/>	M	Check		04/07/2011	\$ 50.00	
<input type="checkbox"/>	M	Check		08/07/2011	\$ 50.00	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 50.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 6,166.15	

**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

<b>1. Committee Full Name (and Fund if applicable)</b>			<b>2. ID Number</b>	
FRIENDS OF MICHELLE MUIR				
<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. Type of Committee</b>		<b>d. Comments</b>
CITIZENS FOR RICHARD STEVENS PO BOX 1311 CARY, NC 27512		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		
		<input type="checkbox"/> Referendum		
		<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
				\$ 250.00
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. In-Kind Description</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>
M	Check		08/26/2011	\$ 250.00
				\$
				\$
<b>4. Total only this Page</b>				\$ 250.00
<b>5. Total of ALL CRO-1230 Pages</b> (This line must be on line 8 of Detailed Summary Page CRO-1100)				\$ 250.00

# Disbursements

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>
FRIENDS OF MICHELLE MUIR						
<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> <i>(include city, state, &amp; zip)</i>				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
ALPHAGRAPHERICS 301 ASHVILLE AVE STE 121 CARY, NC 27518						
				<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>
						\$ 303.64
<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>	
M	Check	B	07/18/2011	\$ 152.51	REMITTANCE	
M	Debit Card	AB	08/30/2011	\$ 151.13	ENVELOPES REMITTANCE ENVLOPES	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i>				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
CARY CHAMBER OF COMMERCE 307 NORTH ACADEMY ST CARY, NC 27513						
				<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>
						\$ 300.00
<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>	
M	Debit Card	O	07/13/2011	\$ 300.00	STATE CONFERENCE	
				\$	FEES	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i>				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
CHATHAM STREET CAFE 140 E CHATHAM ST CARY, NC 27511						
				<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>
						\$ 326.25
<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>	
M	Debit Card	CO	08/16/2011	\$ 326.25	FOOD FOR DOWNTOWN MEET AND GREET	
<b>5. Total only this Page</b>						\$ 929.89
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 4,480.79
<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>						
<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

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>
FRIENDS OF MICHELLE MUIR						
<b>3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)</b>						
<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> <span style="float: right;"><input type="checkbox"/> Add <input type="checkbox"/> Remove</span>						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
DANNY'S BBQ 311 ASHVILLE #G CARY, NC 27518						
				<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>
						\$ 735.00
<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>	
M	Debit Card	C	08/19/2011	\$ 735.00	FOOD FOR FUNDRAISING	
				\$	DINNER	
<b>4. Payee Information</b> <span style="float: right;"><input type="checkbox"/> Add <input type="checkbox"/> Remove</span>						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
GRAND RENTAL STATION 115 WOODWINDS INDUSTRIAL CT CARY, NC 27511						
				<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>
						\$ 81.13
<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>	
M	Debit Card	CO	08/19/2011	\$ 81.13	TABLE AND CHAIR	
				\$	RENTAL - FUNDRAISING	
<b>4. Payee Information</b> <span style="float: right;"><input type="checkbox"/> Add <input type="checkbox"/> Remove</span>						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
HIBERNIAN 1144 KILDAIRE FARM ROAD CARY, NC 27511						
				<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>
						\$ 57.02
<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>	
M	Debit Card	O	08/18/2011	\$ 57.02	CAMPIAGN DINNER	
				\$		
<b>5. Total only this Page</b>						\$ 873.15
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 4,480.79
<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>						
<b>7. Purpose Codes (List detailed expenditure code in (h.) above)</b>						
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 4 of 5  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> FRIENDS OF MICHELLE MUIR	<b>2. ID Number</b>
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<b>3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)</b>		
<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 (include city, state, &amp; zip)</b> MID PINES INN 1010 MIDLAND ROAD SOUTHERN PINES, NC 28387	<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> \$ 135.24

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
M	Debit Card	O	07/21/2011	\$ 135.24	HOTEL FOR STATE
				\$	CHAMBER OF

<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove		
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b> MY CAMPAIGN STORE PO BOX 596 JEFFERSONVILLE, IN 47131-0596	<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> \$ 1,668.18

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
M	Debit Card	BO	07/26/2011	\$ 1,277.00	YARD SIGNS AND
M	Debit Card	BO	08/01/2011	\$ 391.18	FRAMES CAMPAIGN FANS

<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove		
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b> NORTHERN WAKE REPUBLICAN CLUB PO BOX 80423 RALEIGH, NC 27623	<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 checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:	<b>e. Election Sum to Date</b> \$ 125.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
M	Debit Card	O	08/18/2011	\$ 125.00	TABLE SPONSORSHIP
				\$	

<b>5. Total only this Page</b>	\$ 1,928.42
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<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>	\$ 4,480.79
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<b>7. Purpose Codes (List detailed expenditure code in (h.) above)</b>			
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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
FRIENDS OF MICHELLE MUIR						
<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>
PRESTON FLOWERS 1848 BOULDERSTONE WAY CARY, NC 27519						
				<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>
						\$ 90.90
<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>	
M	Debit Card	CO	08/18/2011	\$ 90.90	FLORAL DECORATION	
				\$	FOR FUNDRAISING	
<b>5. Total only this Page</b>					\$ 90.90	
<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>					\$ 4,480.79	
<b>7. Purpose Codes</b> (List detailed expenditure code in (h.) above)						
<b>A* - Media</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>H* - Holding Public Office Expenses</b>			
<b>I - Postage</b>	<b>J - Penalties</b>	<b>K* - Office Expenses</b>	<b>Q* - Donation to Legal Expense Fund</b>			
<b>O* Other</b>						
<b>* Codes require detailed explanation in required remarks field (k)</b>						

# Aggregated Non-Media Expenditures

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

FRIENDS OF MICHELLE MUIR						
<b>3. Payee Information</b>						
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	07/18/2011	\$ 35.00	EMAIL MANAGEMENT
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Debit Card	O	08/19/2011	\$ 35.00	EMAIL MANAGEMENT
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Debit Card	O	08/25/2011	\$ 21.35	CANIDATE NAMETAGS
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Debit Card	O	08/10/2011	\$ 47.86	LUNCH FOR CAMPAIGN INTERNS
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	07/13/2011	\$ 4.50	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	07/14/2011	\$ 2.25	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	07/15/2011	\$ 0.54	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	07/23/2011	\$ 1.13	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/03/2011	\$ 0.54	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/06/2011	\$ 1.13	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/06/2011	\$ 2.25	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/07/2011	\$ 2.25	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/07/2011	\$ 3.38	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/08/2011	\$ 2.25	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/08/2011	\$ 3.38	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/09/2011	\$ 1.13	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/09/2011	\$ 1.13	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/09/2011	\$ 2.25	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/09/2011	\$ 3.38	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/09/2011	\$ 5.63	ONLINE CREDIT CARD PROCESSING
<b>4. Total only this Page</b>					\$	176.33
<b>5. Total of ALL CRO-1315 Pages</b>					\$	397.23
<i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>						
<b>B* - Printing</b>		<b>D - To Another Candidate</b>				
<b>E - Salaries</b>		<b>G - Political Party</b>				
<b>J - Penalties</b>		<b>Q* - Donations to Legal Expense Fund</b>				
<b>O* - Other</b>						
<b>* Codes require detailed explanation in required remarks field (g)</b>						

# Aggregated Non-Media Expenditures

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

FRIENDS OF MICHELLE MUIR

### 3. Payee Information

a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/11/2011	\$ 3.38	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/11/2011	\$ 4.50	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/12/2011	\$ 1.13	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/12/2011	\$ 1.13	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/15/2011	\$ 2.25	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/16/2011	\$ 1.13	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/16/2011	\$ 2.25	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/16/2011	\$ 2.25	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/16/2011	\$ 3.60	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/16/2011	\$ 5.63	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/17/2011	\$ 2.25	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/17/2011	\$ 4.50	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/17/2011	\$ 5.63	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/17/2011	\$ 5.63	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/17/2011	\$ 11.25	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/18/2011	\$ 2.25	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/18/2011	\$ 2.25	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/18/2011	\$ 2.25	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/18/2011	\$ 5.63	ONLINE CREDIT CARD PROCESSING

**4. Total only this Page** \$ 71.14

**5. Total of ALL CRO-1315 Pages** \$ 397.23  
*(This line must be on line 14 of Detailed Summary Page CRO-1100)*

<b>B* - Printing</b>	<b>D - To Another Candidate</b>
<b>E - Salaries</b>	<b>G - Political Party</b>
<b>J - Penalties</b>	<b>Q* - Donations to Legal Expense Fund</b>
<b>O* - Other</b>	

\* Codes require detailed explanation in required remarks field (g)

# Aggregated Non-Media Expenditures

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

FRIENDS OF MICHELLE MUIR

### 3. Payee Information

a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/19/2011	\$ 1.13	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/19/2011	\$ 1.13	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/19/2011	\$ 1.13	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/23/2011	\$ 4.50	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/28/2011	\$ 2.25	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Electric Funds Tran	O	08/29/2011	\$ 1.13	ONLINE CREDIT CARD PROCESSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Debit Card	O	08/07/2011	\$ 37.60	CAMPAIGN DINNER
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Debit Card	O	07/28/2011	\$ 12.00	EMBROIDRY FOR SHIRTS
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Debit Card	O	07/29/2011	\$ 40.00	LUNCH AND LEARN
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Debit Card	B	07/31/2011	\$ 38.89	CAMPAIGN BANNER
<input type="checkbox"/> Add <input type="checkbox"/> Remove	M	Check	O	07/25/2011	\$ 10.00	FILING FEE

**4. Total only this Page** \$ 149.76

**5. Total of ALL CRO-1315 Pages** \$ 397.23  
*(This line must be on line 14 of Detailed Summary Page CRO-1100)*

<b>B* - Printing</b>	<b>D - To Another Candidate</b>
<b>E - Salaries</b>	<b>G - Political Party</b>
<b>J - Penalties</b>	<b>Q* - Donations to Legal Expense Fund</b>
<b>O* - Other</b>	

\* Codes require detailed explanation in required remarks field (g)

# Refunds/Reimbursements From the Committee

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>	
FRIENDS OF MICHELLE MUIR					
<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>
ANTHONY BRUNO 107 LANDSER CT CARY, NC 27519			<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
			<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
			<b>e. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		<b>h. Original Receipt Date</b>
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		05/28/2011
					<b>i. Original Receipt Amount</b>
					\$ 25.00
<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	<b>f. Purpose Code</b>		<b>j. Election Sum to Date</b>
RETIRED		IBM	L		\$ 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>
M	Draft			07/08/2011	\$ 25.00
<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>
ANTHONY BRUNO 107 LANDSER CT CARY, NC 27519			<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
			<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
			<b>e. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		<b>h. Original Receipt Date</b>
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		05/28/2011
					<b>i. Original Receipt Amount</b>
					\$ 25.00
<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	<b>f. Purpose Code</b>		<b>j. Election Sum to Date</b>
RETIRED		IBM	L		\$ 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>
M	Electric Funds Tran			07/08/2011	\$ 25.00
<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>
VIRGINIA HUFF 105 ROSEBERRY HILLS RD CARY, NC 27513			<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
			<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
			<b>e. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		<b>h. Original Receipt Date</b>
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		06/23/2011
					<b>i. Original Receipt Amount</b>
					\$ 48.81
<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	<b>f. Purpose Code</b>		<b>j. Election Sum to Date</b>
REGISTRATION AND MEMBERSHIP SPECIALIST		RCI INC.	P		\$ 0.00
<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>
M	Check	FOOD FOR MEET AND GREET PICNIC		07/27/2011	\$ 48.81
<b>4. Total only this Page</b>					\$ 98.81
<b>5. Total of ALL CRO-1320 Pages</b> (This line must be on line 15 of Detailed Summary Page CRO-1100)					\$ 223.45
<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)					

# Refunds/Reimbursements From the Committee

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>	
FRIENDS OF MICHELLE MUIR					
<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>
MICHELLE MUIR 1423 DEBRA DRIVE CARY, NC 27511			<input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party		
			<b>e. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					<b>h. Original Receipt Date</b> 08/10/2011
					<b>i. Original Receipt Amount</b> \$ 124.64
<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>		<b>f. Purpose Code</b>	
PRESIDENT		THE SPOKEN IMAGE		P	
					<b>j. Election Sum to Date</b> \$ 494.65
<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>
M	Check	REFUND PERSONAL EXPENDITURES MADE FOR COMMITTEE		08/21/2011	\$ 124.64
<b>4. Total only this Page</b>					\$ 124.64
<b>5. Total of ALL CRO-1320 Pages</b> (This line must be on line 15 of Detailed Summary Page CRO-1100)					\$ 223.45
<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)					

# 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.

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
FRIENDS OF MICHELLE MUIR			
<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. Type of Contributor</b>	
MICHELLE MUIR 1423 DEBRA DRIVE CARY, NC 27511		<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	
		<b>c. Comments</b>	
		<b>d. Election Sum to Date</b>	
		\$ 494.65	
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	<b>g. Fair Market Amount</b>
7/11 - APEX PEAK MEETING 8/7 - MEET AND GREET DINNER		08/10/2011	\$ 124.64
			\$
			\$
<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. Type of Contributor</b>	
DEBBIE TOMASKO 102 WOODARBOR CT CARY, NC 27513		<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	
		<b>c. Comments</b>	
		<b>d. Election Sum to Date</b>	
		\$ 321.51	
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	<b>g. Fair Market Amount</b>
PICNIC SUPPLIES, OFFICE SUPPLIES, SHIPPING CHARGES, SNACKS FOR VOLUNTEERS, COPIES (VARIOUS DATES - IN-KIND LIST PROVIDED 9/3)		08/30/2011	\$ 311.51
			\$
			\$
<b>4. Total only this Page</b>		\$ 436.15	
<b>5. Total of ALL CRO-1510 Pages</b> (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 436.15	