Disclosure Report Cover								
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 Infor	mation	10						
a. Full Name	c. ID Number							
COMMITTEE TO		9HLQH3						
	ude City, State and Zip Code)					d. Date Filed		
SCOTT LAWSON 176 HARBOUR VI		7/7/14						
PO Box 911						e. Phone Number		
HAMPSTEAD, NC	28443					910-622-0148		
2. Report Year 3. Period Start Date (mm/de		10/VV1	4. Period End Date (mm/dd/yy)		5. Treasurer Full Name			
2014	4/1/2014	,	6/30/2014	7/2014 RICK TUNNE				
6. Type of Committ	tee (Check One)	9. Type of	Report (check on	ly one type of report)	from one category)		
Candidate Campa		Municipal		State/C		Referendum		
PAC	Referendum	Organ	nizational		Organizational	Organizational		
Independent Expenditure Legal Expense Fi	Joint Fundraiser	Thirty	y-five day		Quarterly	Pre-referendum		
7. Type of Fund	(if applicable, check one)	Pre-p	rimary		First	Final		
"Booster Fund"		Pre-el	lection	\boxtimes	Second	Supplemental Final		
Building Fund		Pre-ru	inoff		Third	Annual		
			-annual		Fourth	Special		
			Mid Year		Semi-annual			
Other:			Year End		Mid Year	10. Special Report Name		
9 Number of Fred		Final		H .	Year End			
8. Number of Fund	raisers this Report	Speci Speci	aı		Final			
	0		1		Special			
11. Account Inform a. Financial Institution					nformation	South a state of the state of t		
TD BANK	ruii Name		a. Fina	incial Inst	itution Full Name			
b. Purpose	c. Account Code		h Pur	nose		c. Account Code		
CAMPAIGN			D. 1 ui	b. Purpose		c. Account Code		
ACCOUNT FOR	12	15						
RECEIPTS AND	d. Period Begin Balanc	d. Period Begin Balance				d. Period Begin Balance		
EXPENDITURES	\$ 3324.33					\$		
CERTIFICATION								
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 of Elections.								
RICK TUNNER 7/7/14								
	Printed Name of Signer		Signature	of Appoint	ted Treasurer	Date		
FOR OFFICE USE ONLY								
Date Received: RECEIVED JUL 10 2014 Employee: Delivery Method Normal Mail								
Date Postmarke	d:	Emp	loyee:			Registered Mail Hand Delivered		
Date Scanned:		Emp	loyee:			Electronically Filed Signer has not received		
Date Data Enter	ed:	Emp	loyee:			mandatory training		
Please Note: Thi	s form cannot be used to an	nend committe	ee information	such as	the committee address	ss, treasurer, assistant treasurer,		

Amendment

custodian of books information, or account information.

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

No

 \boxtimes

Detailed SummaryUse this form to summarize all disclosure reporting forms and to total monetary information.

	Type of Report 14 2 ND QUART EPORT	ER	3. ID Number 9HLQH3
Start of Election Cycle: January 1,	2014	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 3324.33	\$ 0
RECEIPTS	100		
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$	\$ 1,272.38
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$ 350.00
8) Contributions from Other Political Committees	\$	\$	
9) Loan Proceeds	\$	\$ 3,000.00	
10) Refunds/Reimbursements To the Committee	\$	\$	
11) Other Receipt Sources	4,4,75 %		
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$	\$
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d)	d and 11e)	\$	\$ 4,622.28
EXPENDITURES			
13) Disbursements			The second second
13a) Operating Expenditures	(CRO-1310)	\$ 24.00	\$ 1,321.95
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	\$
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$
15) Loan Repayments	(CRO-1420)	\$	\$
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	\$
17) In-Kind Contributions	(CRO-1510)	\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16	and 17)	\$ 24.00	\$ 1,321.95
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract	line 18)	\$ 3300.33	\$ 3,300.33
ADDITIONAL INFORMATION		A Company of the Comp	
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$	
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$	
24) Account Transfers Within the Committee	(CRO-1720)	\$	
25) Administrative Support	(CRO-1710)	\$	\$
26) Forgiven Loans	(CRO-1440)	\$	\$
27) 48-Hour Notice Reports Sum	(CRO-2200)	\$	\$
28) Contributions to be Refunded	(CRO-1215)	\$	\$

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										
	TO ELECT SCOTT				9HLQH3					
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)										
Operating E			ndidates/Political Committees		ordinated Party Expenditures					
4. Payee Inform	ation		Add	Remove						
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee Na	ame	d. Comments					
(include city, state,	& zip)									
TD BANK										
15280 US HWY 17N			c. Level Registered (Specify)							
HAMPSTEAD, NC 28443			Federal	County:	71 1 2 1 7 1					
			State	Municipality:	e. Election Sum to Date					
					\$ 16.00					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks					
1215	ELECTRONIC	В	4/30/2014	\$8.00	MAINTENANCE FEE					
1215	ELECTRONIC	В	5/30/2014	\$8.00	MAINTENANCE FEE					
4. Payee Inform	ation		Add	Remove						
	ng Address & Phone	——————————————————————————————————————	b. Coordinated Committee Na		d. Comments					
(include city, state,										
TD BANK										
15280 US HWY	17N		c. Level Registered (Specify)							
HAMPSTEAD,	NC 28443		Federal	County:						
			State	Municipality:	e. Election Sum to Date					
					\$ 8.00					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks					
1215	ELECTRONIC	В	6/30/2014	\$8.00	MAINTENANCE FEE					
				\$						
4. Payee Inform	ation		Add Remove							
	ng Address & Phone		b. Coordinated Committee Na	ame	d. Comments					
(include city, state,	& zip)									
			c. Level Registered (Specify)							
			Federal	County:						
			State	Municipality:	e. Election Sum to Date					
					\$					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks					
				\$						
				\$						
5. Total only thi	is Page			1	\$ 24.00					
					\$ 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)										
7. Purpose Codes (List detailed expenditure code in (h.) above)										
A* - Media E - Salaries I - Postage O* - Other	B* - Printing F* - Equipment J - Penalties	C* - Fund G - Politic K* - Offic	draising D - To Anothe H* - Holding CE Expenses Q* - Donatio		er Candidate Public Office Expenses n to Legal Expense Fund					
* Codes require detailed explanation in required remarks field (k)										

Disbursements

Amendment

 \boxtimes

No