

Disclosure Report Cover

Amendment
 Yes 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 Sally Greene for Town Council			c. ID Number 104536	
b. Mailing Address (include City, State and Zip Code) 406 Morgan Creek Rd. Chapel Hill, NC 27517			d. Date Filed 09/30/2013	
			e. Phone Number (919)968-2743	
2. Report Year 2013	3. Period Start Date (mm/dd/yy) 07/01/2013	4. Period End Date (mm/dd/yy) 09/24/2013	5. Treasurer Full Name Leah Josephson	
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser		Municipal <input type="checkbox"/> Organizational <input checked="" type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input checked="" type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special		
7. Type of Fund (if applicable, check one)		State/County <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special		
<input type="checkbox"/> Booster Fund <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:		Referendum <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special		
8. Number of Fundraisers this Report 0		10. Special Report Name		
11. Account Information		11. Account Information		
a. Financial Institution Full Name Coastal Federal Credit Union		a. Financial Institution Full Name Coastal Federal Credit Union		
b. Purpose Campaign Finance	c. Account Code 01	b. Purpose Campaign Finance	c. Account Code 02	
	d. Period Begin Balance \$ 450.00		d. Period Begin Balance \$ 987.65	
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.				
Leah Josephson				9/30/2013
Printed Name of Signer		Signature of Appointed Treasurer		Date
FOR OFFICE USE ONLY				
Date Received: 10-1-13	Employee: OC	Delivery Method		
Date Postmarked:	Employee:	<input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed		
Date Scanned: 10/7/13	Employee: BJ	<input type="checkbox"/> Signer has not received mandatory training		
Date Data Entered:	Employee:			
Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information. You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.				

RECEIVED
OCT 01 2013
 Orange County Bd. of Elections

Detailed Summary

Amendment
 Yes No

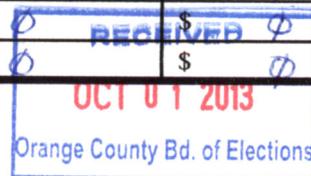
Use this form to summarize all disclosure reporting forms and to total monetary information

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number
Sally Greene for Town Council	35-D24 Report	107536
Start of Election Cycle: January 1, <u>2010</u>	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	\$ 1437.65	\$ 3159.84
RECEIPTS		
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 0	\$ 0
6) Contributions from Individuals (CRO-1210)	\$ 4030.00	\$ 4080.00
7) Contributions from Political Party Committees (CRO-1220)	\$ 0	\$ 0
8) Contributions from Other Political Committees (CRO-1230)	\$ 0	\$ 0
9) Loan Proceeds (CRO-1410)	\$ 0	\$ 0
10) Refunds/Reimbursements to the Committee (CRO-1240)	\$ 0	\$ 0
11) Other Receipt Sources		
11a) Interest on Bank Accounts (CRO-1250)	\$ 0.16	\$ 36.13
11b) Contributions from Not-For-Profit Organizations (CRO-1250)	\$ 0	\$ 0
11c) Outside Sources of Income (CRO-1250)	\$ 0	\$ 0
11d) Legal Expense Fund - Other Sources (CRO-1270)	\$ 0	\$ 0
11e) Exempt Purchase Price Sales (CRO-1265)	\$ 0	\$ 0
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)	\$ 4030.16	\$ 4116.13
EXPENDITURES		
13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$ 154.84	\$ 1939.84
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$ 500.00	\$ 500.00
13c) Coordinated Party Expenditures (CRO-1310)	\$ 0	\$ 0
14) Aggregated Non-Media Expenditures (CRO-1315)	\$ 0	\$ 24.00
15) Loan Repayments (CRO-1420)	\$ 0	\$ 0
16) Refunds/Reimbursements from the Committee (CRO-1320)	\$ 0	\$ 0
17) In-Kind Contributions (CRO-1510)	\$ 700.00	\$ 700.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 1354.84	\$ 3163.84
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 4112.97	\$ 4112.97
ADDITIONAL INFORMATION		
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$ 0	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$ 0	
22) Debts and Obligations owed by the Committee (CRO-1610)	\$ 0	
23) Debts and Obligations owed to the Committee (CRO-1620)	\$ 0	
24) Account Transfers Within the Committee (CRO-1720)	\$ 581.00	
25) Administrative Support (CRO-1710)	\$ 0	\$ 0
26) Forgiven Loans (CRO-1440)	\$ 0	\$ 0
27) 48-Hour Notice Reports Sum (CRO-2220)	\$ 0	\$ 0
28) Contributions to be Refunded (CRO-1215)	\$ 0	\$ 0

CRO-1100

NC State Board of Elections

August 2008



Contributions from Individuals

Pg 1 of 17

Amendment
 Yes 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) GRASSROOTS FOR GREENE	2. ID Number
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3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) BENJAMIN ABRAM 695 DOLORES STREET SAN FRANCISCO, CA 94110	b. Job Title/Profession ENTREPRENEUR	d. Comments
	c. Employer's Name/Specific Field SELF	
		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
<input type="checkbox"/>	01	Check		07/05/2013	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) JASON BAKER 913 SHADY LAWN RD EXT B CHAPEL HILL, NC 27514	b. Job Title/Profession WEB DEVELOPER	d. Comments
	c. Employer's Name/Specific Field SELF	
		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
<input type="checkbox"/>		In-Kind	WEB DEVELOPMENT & WEB HOSTING	09/15/2013	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) GAYLEN BRUBAKER 110 Silver Cedar Ln. CHAPEL HILL, NC 27514	b. Job Title/Profession ENVIRONMENTAL CONSULTANT	d. Comments
	c. Employer's Name/Specific Field GEI CONSULTANTS	
		e. Election Sum to Date \$ 25.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	Check		09/15/2013	\$ 25.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page	\$ 225.00
5. Total of ALL CRO 1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO 1100)</i>	\$ 4,675.00

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 Orange County Bd. of Elections

Contributions from Individuals

Amendment
 Yes 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
GRASSROOTS FOR GREENE						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
D.R. BRYAN 607 Aberdeen Dr. CHAPEL HILL, NC 27517				MANAGER		
				c. Employer's Name/Specific Field		
				BRYAN PROPERTIES		
						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	
<input type="checkbox"/>	01	Check		09/16/2013	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
WILLIAM BURK 47 Oakwood Dr. CHAPEL HILL, NC 27517				RETIRED		
				c. Employer's Name/Specific Field		
				N/A		
						e. Election Sum to Date
						\$ 25.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	01	Check		09/14/2013	\$ 25.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
JOSEPH CAPOWSKI 404 Coolidge St. PITTSBORO, NC 27516				RETIRED		
				c. Employer's Name/Specific Field		
				N/A		
						e. Election Sum to Date
						\$ 50.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	01	Check		09/20/2013	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page						\$ 175.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 4,675.00

Contributions from Individuals

Amendment
 Yes 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) GRASSROOTS FOR GREENE		2. ID Number
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3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) HODDING CARTER 211 Friendly Ln. CHAPEL HILL, NC 27514		b. Job Title/Profession PROFESSOR	d. Comments
		c. Employer's Name/Specific Field UNC-CHAPEL HILL	
		e. Election Sum to Date \$ 150.00	

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	Check		09/20/2013	\$ 150.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) VIRGINIA CHAMBERS 246 W. Smith Rd. CHAPEL HILL, NC 27312		b. Job Title/Profession HEALTH CONSULTANT	d. Comments
		c. Employer's Name/Specific Field SELF	
		e. Election Sum to Date \$ 50.00	

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	Check		09/15/2013	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) MARK CHILTON 203 Ashe St. CARRBORO, NC 27510		b. Job Title/Profession ATTORNEY	d. Comments
		c. Employer's Name/Specific Field EMPOWERMENT, INC.	
		e. Election Sum to Date \$ 25.00	

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	Check		09/12/2013	\$ 25.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page	\$ 225.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 4,675.00

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Contributions from Individuals

Amendment
 Yes 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) GRASSROOTS FOR GREENE	2. ID Number
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3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) SANDRA CLARK 411 Morgan Creek Rd. CHAPEL HILL, NC 27517	b. Job Title/Profession PHYSICIAN	d. Comments
	c. Employer's Name/Specific Field CARRBORO COMMUNITY HEALTH SERVICES	
		e. Election Sum to Date \$ 50.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	Check		09/22/2013	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) VICI COOK 640 Morgan Creek Rd. CHAPEL HILL, NC 27517	b. Job Title/Profession REALTOR	d. Comments
	c. Employer's Name/Specific Field THE HOME TEAM	
		e. Election Sum to Date \$ 50.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	Credit Card		09/13/2013	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) BURTON CRAIGE 3404 Churchill Rd. RALEIGH, NC 27607	b. Job Title/Profession ATTORNEY	d. Comments
	c. Employer's Name/Specific Field PATTERSON HARKAVY	
		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
<input type="checkbox"/>	01	Check		09/14/2013	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page	\$ 200.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 4,675.00

Contributions from Individuals

Amendment
 Yes 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) GRASSROOTS FOR GREENE	2. ID Number
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3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) MICHAEL CZEISZPERGER 112 THARRINGTON DRIVE CHAPEL HILL, NC 27516	b. Job Title/Profession PRESIDENT	d. Comments
	c. Employer's Name/Specific Field WEB PERFORMANCE INC.	
	e. Election Sum to Date \$ 200.00	

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		In-Kind	CANDIDATE PORTRAIT SESSION W/ FAMILY	09/06/2013	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) MICHAEL CZEISZPERGER 112 THARRINGTON DRIVE CHAPEL HILL, NC 27516	b. Job Title/Profession PRESIDENT	d. Comments
	c. Employer's Name/Specific Field WEB PERFORMANCE INC.	
	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
<input type="checkbox"/>		In-Kind	CANDIDATE PORTRAIT SESSION	09/08/2013	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) GARRETT DIXON 1513 EAST FRANKLIN STREET #136 CHAPEL HILL, NC 27514	b. Job Title/Profession POLITICAL CONSULTANT	d. Comments
	c. Employer's Name/Specific Field SELF	
	e. Election Sum to Date \$ 15.00	

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	Credit Card		09/19/2013	\$ 15.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page	RECEIVED	315.00
5. Total of ALL CRO-1210 Pages <i>(This total to be on line 6 of Detailed Summary Page CRO-1100)</i>	OCT 01 2013	4,675.00

Contributions from Individuals

Amendment
 Yes 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
GRASSROOTS FOR GREENE						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
MARTIN FEINSTEIN 400 Coolidge St. CHAPEL HILL, NC 27516				RETIRED		
				c. Employer's Name/Specific Field N/A		
						e. Election Sum to Date
						\$ 25.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	01	Check		09/20/2013	\$ 25.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
MARCIE COHEN FERRIS 3 Mint Springs Ln. CHAPEL HILL, NC 27514				PROFESSOR		
				c. Employer's Name/Specific Field UNC-CHAPEL HILL		
						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	
<input type="checkbox"/>	01	Credit Card		09/13/2013	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
MAEDA GALINSKY 750 Weaver Dairy Rd. #154 CHAPEL HILL, NC 27514				RETIRED		
				c. Employer's Name/Specific Field N/A		
						e. Election Sum to Date
						\$ 50.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	01	Check		09/24/2013	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page						\$ 175.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 4,675.00

Contributions from Individuals

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) GRASSROOTS FOR GREENE	2. ID Number
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3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) BERNARD GLASSMAN 412 Johns Woods Rd. CHAPEL HILL, NC 27516	b. Job Title/Profession PROFESSOR	d. Comments			
	c. Employer's Name/Specific Field UNC-CHAPEL HILL				
			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
<input type="checkbox"/>	01	Check		09/08/2013	\$ 300.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) JOSEPH GLATTHAAR 501 Morgan Creek Rd. CHAPEL HILL, NC 27517	b. Job Title/Profession PROFESSOR	d. Comments			
	c. Employer's Name/Specific Field UNC-CHAPEL HILL				
			e. Election Sum to Date		
			\$ 150.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	Check		09/18/2013	\$ 150.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) DARRYL GLESS 905 Greenwood Rd. CHAPEL HILL, NC 27514	b. Job Title/Profession PROFESSOR	d. Comments			
	c. Employer's Name/Specific Field UNC-CHAPEL HILL				
			e. Election Sum to Date		
			\$ 150.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	Check		09/19/2013	\$ 150.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page	\$ 600.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 4,675.00

RECEIVED
OCT 01 2013
Orange County Bd. of Elections

Contributions from Individuals

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) GRASSROOTS FOR GREENE	2. ID Number
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3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) DANA GREENWOOD 412 Morgan Creek Rd. CHAPEL HILL, NC 27517	b. Job Title/Profession RETIRED	d. Comments
	c. Employer's Name/Specific Field N/A	
		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
<input type="checkbox"/>	01	Check		09/13/2013	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) JACQUELINE HAGAN 501 Morgan Creek Road CHAPEL HILL, NC 27517	b. Job Title/Profession PROFESSOR	d. Comments
	c. Employer's Name/Specific Field UNC-CHAPEL HILL	
		e. Election Sum to Date \$ 150.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	Check		09/18/2013	\$ 150.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) FRED HOBSON 110 Hunters Ridge CHAPEL HILL, NC 27516	b. Job Title/Profession PROFESSOR	d. Comments
	c. Employer's Name/Specific Field UNC-CHAPEL HILL	
		e. Election Sum to Date \$ 30.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	Check		09/17/2013	\$ 30.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page \$ 280.00

5. Total of ALL CRO-1210 Pages \$ 4,675.00
(This line must be on line 6 of Detailed Summary Page CRO-1100)

Contributions from Individuals

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

Pg 9 of 17

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) GRASSROOTS FOR GREENE		2. ID Number
--	--	--------------

3. Contributor Information		<input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
SUSAN IRONS 3 Litchford Rd. CHAPEL HILL, NC 27516		PROFESSOR			
		c. Employer's Name/Specific Field			
		UNC-CHAPEL HILL			
		e. Election Sum to Date			
		\$ 50.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	Check		09/20/2013	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information		<input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
SUE JACKSON 221 IRONWOODS DRIVE CHAPEL HILL, NC 27516		COMPLIANCE CONSULTANT			
		c. Employer's Name/Specific Field			
		SELF			
		e. Election Sum to Date			
		\$ 50.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	Check		09/17/2013	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information		<input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
THOMAS JENSEN 1513 EAST FRANKLIN STREET #120 CHAPEL HILL, NC 27514		DIRECTOR			
		c. Employer's Name/Specific Field			
		PUBLIC POLICY POLLING			
		e. Election Sum to Date			
		\$ 50.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	Check		06/10/2013	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page	\$ 150.00
5. Total of ALL CRO 1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO 1100)</i>	\$ 4,675.00

CRO-1210

NC State Board of Elections

RECEIVED
 \$
 OCT 01 2013
 Orange County Bd. of Elections

April 2007

Contributions from Individuals

Amendment
 Yes 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
GRASSROOTS FOR GREENE	

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
LEAH JOSEPHSON 208 BARCLAY ROAD CHAPEL HILL, NC 27516	DEVELOPMENT	
	c. Employer's Name/Specific Field	
	NC HILLEL FOUNDATION	
		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
<input type="checkbox"/>		In-Kind	WEB DEVELOPMENT	09/15/2013	\$ 300.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
HARRIET KIMBALL KING 610 North St. CHAPEL HILL, NC 27514	RETIRED	
	c. Employer's Name/Specific Field	
	N/A	
		e. Election Sum to Date
		\$ 50.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	Check		09/12/2013	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
ELEANOR KINNAIRD 750 WEAVER DAIRY ROAD #123 CHAPEL HILL, NC 27514	RETIRED	
	c. Employer's Name/Specific Field	
	N/A	
		e. Election Sum to Date
		\$ 35.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	Check		09/14/2013	\$ 35.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page	\$ 385.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 4,675.00

Contributions from Individuals

Amendment
 Yes 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) GRASSROOTS FOR GREENE		2. ID Number
--	--	--------------

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) TED LEINBAUGH 107 Amber Ct. CARRBORO, NC 27510		b. Job Title/Profession PROFESSOR	d. Comments
		c. Employer's Name/Specific Field UNC-CHAPEL HILL	
		e. Election Sum to Date \$ 20.00	

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	Check		09/15/2013	\$ 20.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) BETSY MALPASS 908 Woodbine Dr. CHAPEL HILL, NC 27517		b. Job Title/Profession RETIRED	d. Comments
		c. Employer's Name/Specific Field N/A	
		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
<input type="checkbox"/>	01	Check		09/14/2013	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) BILL MASSENGALE 211 N. Columbia St. CHAPEL HILL, NC 27514		b. Job Title/Profession ATTORNEY	d. Comments
		c. Employer's Name/Specific Field MASSENGALE AND OZER	
		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
<input type="checkbox"/>	01	Check		09/12/2013	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page \$ 220.00

5. Total of ALL CRO 1210 Pages \$ 4,675.00
(This line must be on line 6 of Detailed Summary Page CRO-1100)

CRO-1210

NC State Board of Elections

RECEIVED
 OCT 01 2013
 Orange County Bd. of Elections

April 2007

Contributions from Individuals

Amendment

Yes 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) GRASSROOTS FOR GREENE	2. ID Number
---	---------------------

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) LORRAINE MASTERS 513 Morgan Creek Rd. CHAPEL HILL, NC 27517	b. Job Title/Profession RETIRED	d. Comments
	c. Employer's Name/Specific Field N/A	
		e. Election Sum to Date \$ 50.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	Check		09/22/2013	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) ERIC MULLER 108 Anglese Ct. CHAPEL HILL, NC 27516	b. Job Title/Profession PROFESSOR	d. Comments
	c. Employer's Name/Specific Field UNC-CHAPEL HILL	
		e. Election Sum to Date \$ 75.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	Check		09/21/2013	\$ 75.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) MICHAEL PARKER 601 W. Rosemary St. #311 CHAPEL HILL, NC 27516	b. Job Title/Profession CONSULTANT	d. Comments
	c. Employer's Name/Specific Field SELF	
		e. Election Sum to Date \$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	Check		09/14/2013	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page \$ 325.00

5. Total of ALL CRO-1210 Pages \$ 4,675.00
(This line must be on line 6 of Detailed Summary Page CRO-1100)

Contributions from Individuals

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

Pg 13 of 17

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) GRASSROOTS FOR GREENE		2. ID Number
--	--	--------------

3. Contributor Information		<input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip) FLORENCE PEACOCK 306 Boundary St. CHAPEL HILL, NC 27514		b. Job Title/Profession MUSICIAN	d. Comments		
		c. Employer's Name/Specific Field SELF			
		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
<input type="checkbox"/>	01	Check		09/13/2013	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information		<input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip) ROSANN FARBER PETES 612 Morgan Creek Rd. CHAPEL HILL, NC 27517		b. Job Title/Profession PROFESSOR	d. Comments		
		c. Employer's Name/Specific Field UNC-CHAPEL HILL			
		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
<input type="checkbox"/>	01	Check		09/15/2013	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information		<input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip) JEAN PHAY 123 Morgan Bend Ct. CHAPEL HILL, NC 27517		b. Job Title/Profession RETIRED	d. Comments		
		c. Employer's Name/Specific Field N/A			
		e. Election Sum to Date \$ 25.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	Check		09/17/2013	\$ 25.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page	\$ 225.00
5. Total of ALL CRO 1210 Pages	\$ 4,675.00

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

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 OCT 01 2013
 Orange County Bd. of Elections

April 2007

Contributions from Individuals

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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
GRASSROOTS FOR GREENE	

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
ELIZABETH SPENCER RUSHER 402 Longleaf Dr. CHAPEL HILL, NC 27517			WRITER			
			c. Employer's Name/Specific Field			
			SELF		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	
<input type="checkbox"/>	01	Check		09/21/2013	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
ARIELLE SCHECHTER 440 Bayberry Dr. CHAPEL HILL, NC 27517			ARCHITECT			
			c. Employer's Name/Specific Field			
			SELF		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	
<input type="checkbox"/>	01	Check		09/16/2013	\$ 300.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
ROBERT SEYMOUR 750 WEAVER DAIRY ROAD #219 CHAPEL HILL, NC 27514			RETIRED			
			c. Employer's Name/Specific Field			
			N/A		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	
<input type="checkbox"/>	01	Check		09/14/2013	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	

4. Total only this Page	\$ 500.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 4,675.00

Contributions from Individuals

Amendment
 Yes 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) GRASSROOTS FOR GREENE	2. ID Number
---	---------------------

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) JANE STEIN 222 Vance St. CHAPEL HILL, NC 27516	b. Job Title/Profession SMALL BUSINESS OWNER	d. Comments
	c. Employer's Name/Specific Field SELF	
		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
<input type="checkbox"/>	01	Check		09/22/2013	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) FRANKLIN TEW 511 Dogwood Dr. CHAPEL HILL, NC 27516	b. Job Title/Profession RETIRED	d. Comments
	c. Employer's Name/Specific Field N/A	
		e. Election Sum to Date \$ 50.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	Check		09/18/2013	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) HAWLEY TRUAX 101 Bolinwood Dr. CHAPEL HILL, NC 27514	b. Job Title/Profession PROGRAM OFFICER	d. Comments
	c. Employer's Name/Specific Field Z. SMITH REYNOLDS	
		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
<input type="checkbox"/>	01	Check		09/16/2013	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page \$ 250.00

5. Total of ALL CRO 1210 Pages \$ 4,675.00
(This line must be on Line 6 of Detailed Summary Page CRO 1100)

CRO-1210

NC State Board of Elections

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 \$ 4,675.00
 OCT 01 2013 April 2007
 Orange County Bd. of Elections

Contributions from Individuals

Amendment
 Yes 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) GRASSROOTS FOR GREENE	2. ID Number
---	---------------------

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip) LINDA WAGNER-MARTIN 601 W. Rosemary St. #402 CHAPEL HILL, NC 27516	b. Job Title/Profession RETIRED	c. Employer's Name/Specific Field N/A	d. Comments
			e. Election Sum to Date \$ 75.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	Check		09/20/2013	\$ 75.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip) ROGER WALDON 108 Bristol Dr. CHAPEL HILL, NC 27516	b. Job Title/Profession PLANNER	c. Employer's Name/Specific Field CLARION, INC.	d. Comments
			e. Election Sum to Date \$ 50.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	Check		09/12/2013	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip) ROSEMARY WALDORF 106 Gurnsey Trail CHAPEL HILL, NC 27517	b. Job Title/Profession PROJECT MANAGER	c. Employer's Name/Specific Field BRYAN PROPERTIES	d. Comments
			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
<input type="checkbox"/>	01	Check		09/17/2013	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page	\$ 225.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 4,675.00

Contributions from Individuals

Amendment
 Yes 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) GRASSROOTS FOR GREENE		2. ID Number
--	--	--------------

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) NINA WALLACE 808 Kings Mill Rd. CHAPEL HILL, NC 27517		b. Job Title/Profession RETIRED	d. Comments
		c. Employer's Name/Specific Field N/A	
		e. Election Sum to Date \$ 50.00	

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	Check		09/14/2013	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) ISABELLE WEBB 750 WEAVER DAIRY ROAD #122 CHAPEL HILL, NC 27514		b. Job Title/Profession RETIRED	d. Comments
		c. Employer's Name/Specific Field N/A	
		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
<input type="checkbox"/>	01	Check		09/15/2013	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) THOMAS WOLF 6 Whisper Ln. CHAPEL HILL, NC 27514		b. Job Title/Profession WRITER	d. Comments
		c. Employer's Name/Specific Field SELF	
		e. Election Sum to Date \$ 50.00	

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	Check		09/15/2013	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page	
5. Total of ALL CRO 1210 Pages <i>(This line may be on line 6 of Detailed Summary Page CRO-1100)</i>	200.00

RECEIVED
 OCT 01 2013
 Orange County Bd. of Elections
 April 2007

Other Receipt Sources

Use this form to report income not reported on another form. i.e. interest income, not for profit contributions etc.

1. Committee Full Name (and Fund if applicable)				2. ID Number	
GRASSROOTS FOR GREENE					
3. Type of Receipt Source <i>(Please use separate CRO-1250 forms for each type of Receipt Source.)</i>					
<input checked="" type="checkbox"/> Interest <input type="checkbox"/> Contributions from Not-for-Profit Organizations <input type="checkbox"/> Outside Sources of Income					
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #	d. Comments	
COASTAL FEDERAL CREDIT UNION P.O. BOX 58429 RALEIGH, NC 27658-8429					
			c. Outside Source Explanation		
			e. Election Sum to Date		
			\$ 4.62		
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
02	Draft		01/31/2013	\$ 0.08	
02	Draft		02/28/2013	\$ 0.07	
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #	d. Comments	
COASTAL FEDERAL CREDIT UNION P.O. BOX 58429 RALEIGH, NC 27658-8429					
			c. Outside Source Explanation		
			e. Election Sum to Date		
			\$ 4.62		
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
02	Draft		03/31/2013	\$ 0.08	
02	Draft		04/30/2013	\$ 0.07	
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #	d. Comments	
COASTAL FEDERAL CREDIT UNION P.O. BOX 58429 RALEIGH, NC 27658-8429					
			c. Outside Source Explanation		
			e. Election Sum to Date		
			\$ 4.62		
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
02	Draft		05/31/2013	\$ 0.08	
02	Draft		06/30/2013	\$ 0.08	
5. Total only this Page				\$ 0.46	
6. Total of ALL CRO-1250 Pages				\$ 0.62	
<i>(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest)</i> <i>(This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution)</i> <i>(This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)</i>					

Other Receipt Sources

Amendment

Yes No

Use this form to report income not reported on another form, i.e. interest income, not for profit contributions etc.

1. Committee Full Name (and Fund if applicable)				2. ID Number	
GRASSROOTS FOR GREENE					
3. Type of Receipt Source <i>(Please use separate CRO-1250 forms for each type of Receipt Source.)</i>					
<input checked="" type="checkbox"/> Interest <input type="checkbox"/> Contributions from Not-for-Profit Organizations <input type="checkbox"/> Outside Sources of Income					
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #	d. Comments	
COASTAL FEDERAL CREDIT UNION P.O. BOX 58429 RALEIGH, NC 27658-8429					
			c. Outside Source Explanation		
				e. Election Sum to Date	
				\$ 4.62	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
02	Draft		07/31/2013	\$ 0.08	
02	Draft		08/31/2013	\$ 0.08	
5. Total only this Page				\$ 0.16	
6. Total of ALL CRO-1250 Pages				\$ 0.62	
<i>(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest)</i> <i>(This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution)</i> <i>(This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)</i>					

CRO-1250

NC State Board of Elections

December 2007

RECEIVED
OCT 01 2013
Orange County Bd. of Elections

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	
GRASSROOTS FOR GREENE							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input type="checkbox"/> Operating Expenses		<input checked="" 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	
LILLIAN'S LIST OF NC 2912 HIGHWOODS BOULEVARD SUITE 214 RALEIGH, NC 27604							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 250.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
01	Check	G	07/30/2013	\$ 250.00			
				\$			
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	
VERLA INSKO FOR STATE HOUSE 236 STABLE ROAD CARRBORO, NC 27510							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 250.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
01	Check	D	08/15/2013	\$ 250.00			
				\$			
5. Total only this Page						\$ 500.00	
6. Total of ALL CRO-1310 Pages						\$ 500.00	
<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>							
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

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) GRASSROOTS FOR GREENE	2. ID Number
---	---------------------

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement)*

Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) COASTAL FEDERAL CREDIT UNION P.O. BOX 58429 RALEIGH, NC 27658-8429	b. Coordinated Committee Name	d. Comments
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 \$ 42.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
02	Draft	O	09/17/2013	\$ 3.00	OVERDRAFT FEE
				\$	

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) ORANGE COUNTY BOARD OF ELECTIONS 208 S CAMERON STREET HILLSBOROUGH, NC 27278	b. Coordinated Committee Name	d. Comments
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 \$ 5.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	Check	O	07/08/2013	\$ 5.00	CANDIDATE FILING FEE
				\$	

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) STAPLES 1710 EAST FRANKLIN STREET CHAPEL HILL, NC 27514	b. Coordinated Committee Name	d. Comments
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 \$ 146.83

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	Check	B	09/06/2013	\$ 26.34	FLYERS
01	Check	B	09/09/2013	\$ 76.85	MAILING SUPPLIES

5. Total only this Page \$ 111.19

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)

\$ 154.83

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* - Donations to Legal Expense Fund
O* Other			

8. Codes require detailed explanation in required remarks field (k)

CRO-1310

RECEIVED
 OCT 01 2013
 Orange County Bd. of Elections

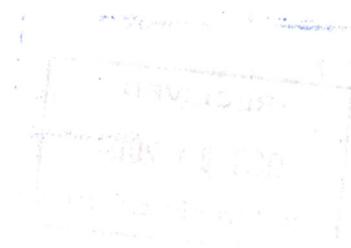
Disbursements

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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	
GRASSROOTS FOR GREENE					
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
STAPLES 1710 EAST FRANKLIN STREET CHAPEL HILL, NC 27514					
			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:		
					\$ 146.83
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	Check	B	09/10/2013	\$ 12.48	MAILING SUPPLIES
01	Check	B	09/15/2013	\$ 31.16	FLYERS
5. Total only this Page					\$ 43.64
6. Total of ALL CRO-1310 Pages					\$ 154.83
<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>					
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)					

CRO-1310



In-Kind Contributions

Page 1 of 2

Amendment
 Yes No

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	
GRASSROOTS FOR GREENE			
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	
JASON BAKER 913 SHADY LAWN RD EXT B CHAPEL HILL, NC 27514	<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		
e. Description		d. Election Sum to Date	
WEB DEVELOPMENT & WEB HOSTING		\$ 100.00	
f. Date (mm/dd/yyyy)		g. Fair Market Amount	
09/15/2013		\$ 100.00	
		\$	
		\$	
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	
MICHAEL CZEISZPERGER 112 THARRINGTON DRIVE CHAPEL HILL, NC 27516	<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		
e. Description		d. Election Sum to Date	
CANDIDATE PORTRAIT SESSION W/ FAMILY		\$ 200.00	
f. Date (mm/dd/yyyy)		g. Fair Market Amount	
09/06/2013		\$ 200.00	
		\$	
		\$	
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	
MICHAEL CZEISZPERGER 112 THARRINGTON DRIVE CHAPEL HILL, NC 27516	<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		
e. Description		d. Election Sum to Date	
CANDIDATE PORTRAIT SESSION		\$ 100.00	
f. Date (mm/dd/yyyy)		g. Fair Market Amount	
09/08/2013		\$ 100.00	
		\$	
		\$	
4. Total only this Page		\$ RECEIVED 400.00	
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		OCT 01 2013 700.00	

CRO-1510

NC State Board of Elections

Orange County Bd. of Elections
 October 1, 2007

In-Kind Contributions

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

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	
GRASSROOTS FOR GREENE			
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	
LEAH JOSEPHSON 208 BARCLAY ROAD CHAPEL HILL, NC 27516		<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	
		c. Comments	
		d. Election Sum to Date	
		\$ 300.00	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
WEB DEVELOPMENT		09/15/2013	\$ 300.00
			\$
			\$
4. Total only this Page			\$ 300.00
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>			\$ 700.00

CRO-1510



Account Transfers Within the Committee Page 1 of 1 Amendment Yes No

Use this form to transfer money between multiple bank, depository or credit accounts.

1. Committee Full Name (and Fund if applicable)				2. ID Number
GRASSROOTS FOR GREENE				
3. Transfer Information				
a. Amend	b. Account Code Transferred From	c. Account Code Transferred To	d. Date (mm/dd/yyyy)	e. Amount
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	02	04/30/2013	\$ 84.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	02	01	09/17/2013	\$ 497.00
4. Total only this Page				\$ 581.00
5. Total of ALL CRO-1720 Pages <i>(This line must be on line 24 of Detailed Summary Page CRO-1100)</i>				\$ 581.00

CRO-1720

NC State Board of Elections

December 2007

