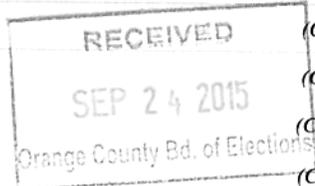


Detailed Summary

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	
Neebe for Town Council		35 Day Report 2015		4HD705	
Start of Election Cycle:	January 1,	2014	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start			\$ 24.26	\$ 24.26	
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)		\$ 5.00	\$ 5.00	
6) Contributions from Individuals	(CRO-1210)		\$ 300.00	\$ 300.00	
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)		\$	\$	
11) Other Receipt Sources					
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 and 11e)			\$ 305.00	\$ 305	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)		\$ 315.00	\$ 315.00	
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)		\$ 0	\$ 0	
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)			\$ 0	\$ 0	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)			\$ 14.26	\$ 14.26	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)		\$		
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)		\$ 300.00		
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)		\$	\$	



Aggregated Contributions from Individuals

Page

1 of 1

Amendment

Yes No

Optional form used to report NC Contributions From Individuals of \$50 or less

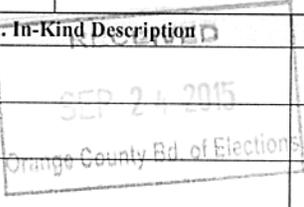
1. Committee Full Name (and Fund if applicable) Neebe for Town Council					2. ID Number 4HD705	
3. Contributor Information						
a. Amend		b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/>	Add	PMN	Cash		09/10/15	\$ 5.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
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<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
4. Total only this Page					\$ 5.00	
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$ 5.00	

RECEIVED
SEP 24 2015
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)					2. ID Number	
NEEBE FOR TOWN COUNCIL					4HD705	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Rachel B. Coley 815 Kenmore Drive Chapel Hill, NC 27514 919-929-8033			Retired			
			c. Employer's Name/Specific Field			
					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"/>	PMN	Check		09/11/15		\$ 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	
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>		Check				\$
<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	
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
4. Total only this Page					\$ 300.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 300.00	



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
Neebe for Town Council					4HD705
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 checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
John Allen 12254 Todd Court North Hollywood, CA 91605					
		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:			
				\$ 300.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
PMN	CHECK	A	08/11/2015	\$300.00	Website Build plus hosting
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Orange County Board of Elections 208 S. Cameron Street Hillsborough, NC 27278					
		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:			
				\$ 5.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
PMN	CASH	O	07/07/2015	\$5.00	Filing Fee
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Triangle Community Foundation 324 Blackwell St. Suite1220 Durham, NC 27701					
		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:			
				\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
PMN	Credit Card	O	08/27/2015	\$10.00	State of the Community Mtg.
				\$	
5. Total only this Page					\$ 315.00
6. Total of ALL CRO-1310 Pages					\$ 315.00
<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	RECEIVED OCT 24 2015 County Bd. of Elections		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)					

Outstanding Loans

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable)			2. ID Number
Neebe for Town Council			4HD705
3. Lender 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
Paul M. Neebe 1002 Highland Woods Road Chapel Hill, NC 27517 919-967-1554		Trumpeter/Musician	November 7, 2013
		Broker in Charge/ Neebe Real Estate	Repaid \$595.74
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
			09/16/2013
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$ 895.74	\$ 300.00
k. Full Name of Lending Institution			l. Loan Number
3. Lender 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
			c. Start Date (mm/dd/yyyy)
		c. Employer's Name/Specific Field	
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$	\$
k. Full Name of Lending Institution			l. Loan Number
3. Lender 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
			e. Start Date (mm/dd/yyyy)
		c. Employer's Name/Specific Field	
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$	\$
k. Full Name of Lending Institution			l. Loan Number
4. Total only this Page			\$ 300.00
5. Total of ALL CRO-1430 Pages <i>(This line must be on line 21 of Detailed Summary Page CRO-1100)</i>			\$ 300.00

