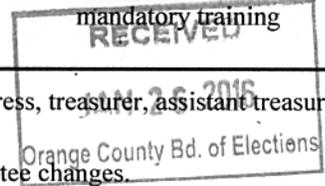


Disclosure Report Cover

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 Nancy Oates for Town Council		c. ID Number 64D08M	
b. Mailing Address (include City, State and Zip Code) 112 Mendel Dr. Chapel Hill, NC 27514		d. Date Filed 07/07/2015	
		e. Phone Number 919-942-0969	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2015	01/01/2016	01/19/2016	E. Thomas Henkel
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"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> Legal Expense Fund		Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input checked="" type="checkbox"/> Final <input type="checkbox"/> Special	
		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	
7. Type of Fund (if applicable, check one) <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:		10. Special Report Name _____	
8. Number of Fundraisers this Report			
2			
11. Account Information		11. Account Information	
a. Financial Institution Full Name Wells Fargo Bank, N.A.		a. Financial Institution Full Name	
b. Purpose Receive donations & pay expenses	c. Account Code NEO	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 77.39		d. Period Begin Balance \$
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.			
E. Thomas Henkel		<i>E. Thomas Henkel</i>	01/19/2016
Printed Name of Signer		Signature of Appointed Treasurer	Date
FOR OFFICE USE ONLY			
Date Received:	1/26/16	Employee:	_____
Date Postmarked:	_____	Employee:	_____
Date Scanned:	2/4/16	Employee:	<i>BB</i>
Date Data Entered:	_____	Employee:	_____
			Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training
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.			



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	
Nancy Oates for Town Council		Final		64D08M	
Start of Election Cycle:	January 1,	2012	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start			\$ 77.39	\$ 0	
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)		\$ 0	\$ 646.75	
6) Contributions from Individuals	(CRO-1210)		\$ 0	\$ 6208.00	
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	\$ 7424.34	
10) Refunds/Reimbursements To the Committee	(CRO-1240)		\$ 0	\$ 22.27	
11) Other Receipt Sources					
11a) Interest on Bank Accounts	(CRO-1250)		\$ 0	\$ 0	
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	
11 e) 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)			\$ 0	\$ 14311.26	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)		\$ 0	\$ 6781.88	
13b) Contributions to Candidates/Political Committees	(CRO-1310)		\$ 77.39	\$ 77.39	
13c) Coordinated Party Expenditures	(CRO-1310)		\$ 0	\$ 0	
14) Aggregated Non-Media Expenditures	(CRO-1315)		\$ 0	\$ 0	
15) Loan Repayments	(CRO-1420)		\$ 0	\$ 7434.24	
16) Refunds/Reimbursements From the Committee	(CRO-1320)		\$ 0	\$ 0	
17) In-Kind Contributions	(CRO-1510)		\$ 0	\$ 17.75	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)			\$ 77.39	\$ 14311.26	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)			\$ 0	\$ 0	
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)		\$ 0		
25) Administrative Support	(CRO-1710)		\$ 0	\$ 0	
26) Forgiven Loans	(CRO-1440)	JAN 10 2016	\$ 0	\$ 0	
27) 48-Hour Notice Reports Sum	(CRO-2200)		\$ 0	\$ 0	
28) Contributions to be Refunded	(CRO-1215)		\$ 0	\$ 0	

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
Nancy Oates for Town Council					6HD08M
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	
CHALT-PAC 408 Lyons Road Chapel Hill, NC 27514		c. Level Registered (Specify)		e. Election Sum to Date \$ 77.39	
		<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
NEO	Check	G	01/18/2016	\$77.39	Contribution
				\$	
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	
		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
				\$	
				\$	
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	
		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
				\$	
				\$	
5. Total only this Page					\$ 77.39
6. Total of ALL CRO-1310 Pages <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					\$ 77.39
7. Purpose Codes (List detailed expenditure code in (h.) above)					
A* - Media		B* - Printing		C* - Fundraising	
E - Salaries		F* - Equipment		G - Political Party	
I - Postage		J - Penalties		K* - Office Expenses	
O* - Other				D - To Another Candidate	
				H* - Holding Public Office Expenses	
				Q* - Donation to Legal Expense Fund	
* Codes require detailed explanation in required remarks field (k)					

JAN 19 2016



North Carolina
 State Board of Elections
 441 N Harrington Street
 Raleigh, NC 27603

Kim Westbrook Strach
 Executive Director

Mailing Address
 PO Box 27255
 Raleigh, NC 27611-7255
 (919) 733-7173

Certification to Close Committee

This Certification is used to express the intent to close the committee after all funds have been properly disbursed.

This Certification is filed at the Board of Elections office where the committee's campaign reports are filed.

FILED BY:

Committee Name: NANCY DATES FOR TOWN COUNCIL

Treasurer Name: E. THOMAS HENKEL

Treasurer Address: 3 MOUNT BOLUS RD

(include city, state, & zip) CHAPEL HILL, NC 27514

Treasurer Phone: 919-960-2589

I certify that the above mentioned Committee intends to close and cease existence. Upon signing this certification, I declare that all funds have been distributed and reported (if required). In addition, no contributions will be accepted or disbursements made after the "Final Report" is filed or this form is signed. If the Committee at any future time intends to accept or spend funds in support or opposition of any candidate or ballot issue, a new political committee must be formed and registered with the Board of Elections before such activities may commence.

Committees that have filed under the \$1,000 threshold will only be required to sign this Certification. No "Final Report" will be required for committees meeting this criterion. Any Committee that did not file under the \$1,000 threshold must submit a "Final Report" with this Certification. This report must have a zero balance with no outstanding loans or debts.

01/19/2016
 Date Signed

E. Thomas Henkel
 Signature

