

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.

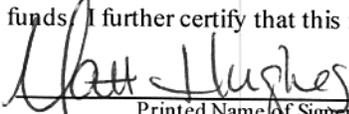
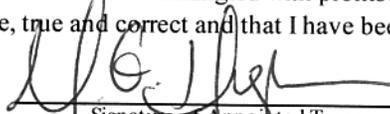
1. Committee Information	
a. Full Name	c. ID Number
FRIENDS OF MATT HUGHES	
b. Mailing Address (include City, State and Zip Code)	d. Date Filed
P.O. BOX 1406 HILLSBOROUGH, NC 27278	03/07/2016
	e. Phone Number
	(919) 928-4480

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2016	01/01/2016	02/29/2016	MATTHEW HUGHES

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	Municipal		State/County
<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> PAC	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Referendum	<input type="checkbox"/> Legal Expense Fund	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> NC Public Campaign Financing Fund		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
<input type="checkbox"/> Other:		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	
8. Number of Fundraisers this Report		10. Special Report Name		
1				

3. Account Information		3. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
SUNTRUST			
b. Purpose	c. Account Code	b. Purpose	c. Account Code
CAMPAIGN ACCOUNT	01		
	d. Period Begin Balance		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

 Printed Name of Signer
 Signature of Appointed Treasurer
 03/07/2016 Date

FOR OFFICE USE ONLY

Date Received:	3/8/16	Employee:		Delivery Method
Date Postmarked:		Employee:		<input type="checkbox"/> Normal Mail
Date Scanned:	3/21/16	Employee:		<input type="checkbox"/> Registered Mail
Date Data Entered:		Employee:		<input checked="" 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	
FRIENDS OF MATT HUGHES	2016 First Quarter		
Start of Election Cycle: January 1, 2015		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 15,593.50	\$ 0.00
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 1,895.00	\$ 5,385.00
6) Contributions from Individuals (CRO-1210)		\$ 5,595.00	\$ 18,537.42
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00	\$ 0.00
8) Contributions from Other Political Committees (CRO-1230)		\$ 386.00	\$ 386.00
9) Loan Proceeds (CRO-1410)		\$ 0.00	\$ 1,000.00
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$ 0.00	\$ 0.00
11) Other Receipt Sources			
11a) Interest on Bank Accounts (CRO-1250)		\$ 0.00	\$ 0.00
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$ 0.00	\$ 0.00
11c) Outside Sources of Income (CRO-1250)		\$ 0.00	\$ 0.00
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$ 0.00	\$ 0.00
11e) Exempt Purchase Price Sales (CRO-1265)		\$ 0.00	\$ 0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		\$ 7,876.00	\$ 25,308.42
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$ 4,141.36	\$ 5,062.86
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$ 0.00	\$ 0.00
13c) Coordinated Party Expenditures (CRO-1310)		\$ 0.00	\$ 0.00
14) Aggregated Non-Media Expenditures (CRO-1315)		\$ 43.00	\$ 83.00
15) Loan Repayments (CRO-1420)		\$ 0.00	\$ 0.00
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$ 0.00	\$ 0.00
17) In-Kind Contributions (CRO-1510)		\$ 0.00	\$ 877.42
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 4,184.36	\$ 6,023.28
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 19,285.14	\$ 19,285.14
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 1,000.00	
22) Debts and Obligations owed by the Committee (CRO-1610)		\$ 0.00	
23) Debts and Obligations owed to the Committee (CRO-1620)		\$ 0.00	
24) Account Transfers Within the Committee (CRO-1720)		\$ 0.00	
25) Administrative Support (CRO-1710)		\$ 0.00	\$ 0.00
26) Forgiven Loans (CRO-1440)		\$ 0.00	\$ 0.00
27) 48-Hour Notice Reports Sum (CRO-2220)		\$ 0.00	\$ 0.00
28) Contributions to be Refunded (CRO-1215)		\$ 0.00	\$ 0.00

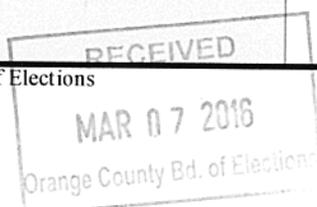
Aggregated Contributions from Individuals

Amendment

Yes No

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
FRIENDS OF MATT HUGHES					
3. Contributor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (m/m/dd/yyyy)	f. Amount
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Cash		02/05/2016	\$ 40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		02/20/2016	\$ 35.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		02/08/2016	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		01/28/2016	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		02/21/2016	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		02/01/2016	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		01/30/2016	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		01/09/2016	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		02/05/2016	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		01/05/2016	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		02/21/2016	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		02/01/2016	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		01/23/2016	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		02/22/2016	\$ 35.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		02/01/2016	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		02/06/2016	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		01/09/2016	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		01/07/2016	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		01/28/2016	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Cash		01/18/2016	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		02/26/2016	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		02/22/2016	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		01/22/2016	\$ 25.00
4. Total only this Page				\$	\$860.00
5. Total of ALL CRO-1205 Pages				\$	\$1,895.00
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					



Aggregated Contributions from Individuals

Amendment
 Yes No

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
FRIENDS OF MATT HUGHES					
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 <input type="checkbox"/> Remove	01	Credit Card		02/13/2016	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		02/20/2016	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		02/02/2016	\$ 30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		02/20/2016	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		02/19/2016	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		01/16/2016	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		02/08/2016	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		02/20/2016	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		02/18/2016	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		02/26/2016	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		02/17/2016	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		02/20/2016	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		02/24/2016	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		02/20/2016	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		01/31/2016	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		02/20/2016	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		01/25/2016	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		02/19/2016	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		01/28/2016	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		01/18/2016	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		01/29/2016	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		01/01/2016	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		01/01/2016	\$ 50.00
4. Total only this Page				\$	\$885.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>				\$	\$1,895.00

CRO-1205

NC State Board of Elections RECEIVED

April 2007

MAR 07 2016

Orange County Bd. of Elections

Aggregated Contributions from Individuals

Page 3 of 3

Amendment
 Yes No

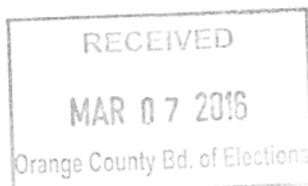
Optional form used to report NC Contributions From Individuals of \$50 or less

1. Committee Full Name (and Fund if applicable)					2. ID Number	
FRIENDS OF MATT HUGHES						
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (m m/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add	01	Check		02/27/2016	\$	25.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	01	Check		02/08/2016	\$	50.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	01	Check		02/06/2016	\$	50.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	01	Credit Card		01/25/2016	\$	25.00
<input type="checkbox"/> Remove						
4. Total only this Page					\$	\$150.00
5. Total of ALL CRO-1205 Pages					\$	\$1,895.00
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

CRO-1205

NC State Board 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	
FRIENDS OF MATT HUGHES						
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	
VERNON BEAN 114 N WAKE ST HILLSBOROUGH, NC 27278			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	Credit Card		02/20/2016	\$ 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	
JAMEZETTA BEDFORD 401 KNOB CT CHAPEL HILL, NC 27517			CPA			
			c. Employer's Name/Specific Field COLEMAN HONTOON & BROWN PLLC			
					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	Credit Card		02/28/2016	\$ 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)			b. Job Title/Profession		d. Comments	
FARLEY BERNHOLZ 7020 KNOTTY PINE DRIVE CHAPEL HILL, NC 27517			RETIRED			
			c. Employer's Name/Specific Field RETIRED			
					e. Election Sum to Date	
					\$ 250.00	
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		01/05/2016	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 225.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 5,595.00	

CRO-1210

RECEIVED NC State Board of Elections

April 2007

MAR 07 2016
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	
FRIENDS OF MATT HUGHES							
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	
STAN BLACK 100 RHODODENDRON DR CHAPEL HILL, NC 27517				PROFESSOR			
				c. Employer's Name/Specific Field			
				UNC-CH		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		02/01/2016		\$ 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	
RICHARD CHADY 6 LARK CIR CHAPEL HILL, NC 27517				RETIRED			
				c. Employer's Name/Specific Field			
						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 checked="" type="checkbox"/>	01	Credit Card		12/31/2015		\$ 25.00	
<input type="checkbox"/>	01	Credit Card		02/04/2016		\$ 50.00	
<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	
DEBORAH CHRISTIE 5212 TWIN PINES LN DURHAM, NC 27705				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED		e. Election Sum to Date	
						\$ 350.00	
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		02/03/2016		\$ 250.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 400.00	
5. Total of ALL CRO-1210 Pages						\$ 5,595.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

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	
FRIENDS OF MATT HUGHES						
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	
NANCY CIOCCI 286 SAINT MARYS RD HILLSBOROUGH, NC 27278			RETIRED			
			c. Employer's Name/Specific Field RETIRED			
					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		02/05/2016	\$ 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	
CHARLES COBLE 109 ROSE LANE CHAPEL HILL, NC 27514			N/A			
			c. Employer's Name/Specific Field N/A			
					e. Election Sum to Date	
					\$ 350.00	
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		02/24/2016	\$ 250.00	
<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	
KAYE CRAWFORD 416 N CAMERON STREET HILLSBOROUGH, NC 27278			RETIRED			
			c. Employer's Name/Specific Field RETIRED			
					e. Election Sum to Date	
					\$ 55.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input checked="" type="checkbox"/>	01	Check		11/14/2015	\$ 25.00	
<input type="checkbox"/>	01	Check		02/12/2016	\$ 30.00	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 380.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 5,595.00	

CRO-1210

NC State Board of Elections

April 2007

RECEIVED

MAR 07 2016

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	
FRIENDS OF MATT HUGHES							
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	
SUSANA DANCY 105 PARKVIEW CRES CHAPEL HILL, NC 27516				REAL ESTATE INVESTOR			
				c. Employer's Name/Specific Field			
				ROCKWOOD DEVELOPMENT		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 checked="" type="checkbox"/>	01	Credit Card		12/30/2015		\$ 50.00	
<input type="checkbox"/>	01	Credit Card		02/17/2016		\$ 100.00	
<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	
DEBORAH DEBOURG-BROWN 2110 BUCK QUARTER FARM RD HILLSBOROUGH, NC 27278				N/A			
				c. Employer's Name/Specific Field			
				N/A		e. Election Sum to Date	
						\$ 125.00	
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		02/19/2016		\$ 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	
CARL EDWARDS 201 BOX TURTLE TRAIL CHAPEL HILL, NC 27516				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED		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		01/12/2016		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 250.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 5,595.00	

RECEIVED
MAR 17 2015

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	
FRIENDS OF MATT HUGHES						
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 OSCAR FLEMING 106B HAYES ST HILLSBOROUGH, NC 27278				PUBLIC HEALTH PRO		
				c. Employer's Name/Specific Field UNC CH		
				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	Credit Card		02/06/2016		\$ 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
LINDA FOXWORTH 103 WOODSHIRE LN CHAPEL HILL, NC 27514				CHILD MENTAL HEALTH DIRECTOR		
				c. Employer's Name/Specific Field CHAPEL HILL TRAINING OUTREACH PROJECT		
				e. Election Sum to Date		
				\$		400.00
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		02/08/2016		\$ 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
SUSAN FRANKENBERG 131 E QUEEN ST HILLSBOROUGH, NC 27278				RETIRED		
				c. Employer's Name/Specific Field RETIRED		
				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		02/13/2016		\$ 100.00
<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>						\$ 5,595.00



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	
FRIENDS OF MATT HUGHES							
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	
JONAH GARSON 220 PARK AVENUE SOUTH NEW YORK, NY 10003				ATTORNEY			
				c. Employer's Name/Specific Field			
				LAW FIRM			
						e. Election Sum to Date	
						\$ 140.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	01	Cash		02/20/2016		\$ 40.00	
<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	
WENDY GREENE 102 HUNTERS RIDGE RD CHAPEL HILL, NC 27517				NONE			
				c. Employer's Name/Specific Field			
				NONE			
						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		01/05/2016		\$ 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	
PRISCILLA GUILD 100 VIRGINIA DR CHAPEL HILL, NC 27514				N/A			
				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		02/15/2016		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 240.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 5,595.00	



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	
FRIENDS OF MATT HUGHES						
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	
JON HAEBIG 100 ESSEX DR CHAPEL HILL, NC 27514			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		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		02/22/2016	\$ 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	
JOHN HAMMOND 114 ESSEX DR CHAPEL HILL, NC 27514			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
					\$ 500.00	
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		02/19/2016	\$ 250.00	
<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	
DEBORAH HILL 176 W. KING ST HILLSBOROUGH, NC 27278			N/A			
			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		02/20/2016	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 450.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 5,595.00	

CRO-1210

NC State Board of Elections

April 2007

RECEIVED
MAR 07 2015
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	
FRIENDS OF MATT HUGHES							
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	
KATHLEEN HOFFMAN 6506 MEBANE OAKS RD MEBANE, NC 27302				RETIRED			
				c. Employer's Name/Specific Field			
				NONE		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	Credit Card		01/29/2016		\$ 200.00	
<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	
BRENT JENKINS 1313 OLD GREENSBORO RD CHAPEL HILL, NC 27516				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED		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		02/08/2016		\$ 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	
ARLON KEMPLE 706 BOLIN CREEK RD CARRBORO, NC 27510				N/A			
				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		01/31/2016		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 400.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 5,595.00	

CRO-1210

NC State Board of Elections

April 2007

RECEIVED

MAR 07 2016

Orange County Bd. of Elections

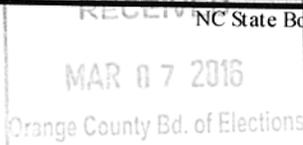
Contributions from Individuals

Amendment

Yes No

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

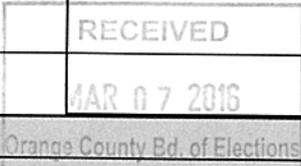
1. Committee Full Name (and Fund if applicable)						2. ID Number	
FRIENDS OF MATT HUGHES							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
THOMAS KENAN P.O. BOX 4150 CHAPEL HILL, NC 27515				VICE-CHAIRMAN			
				c. Employer's Name/Specific Field			
				FLAGLER SYSTEM, INC			
						e. Election Sum to Date	
						\$ 250.00	
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		02/11/2016		\$ 250.00	
<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	
GREGORY MACK 505 N SCOTTSWOOD BLVD HILLSBOROUGH, NC 27278				DISASTER DIRECTOR			
				c. Employer's Name/Specific Field			
				AMERICAN RED CROSS			
						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		02/14/2016		\$ 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	
ELIZABETH MATHESON 173 W MARGARET LANE HILLSBOROUGH, NC 27278				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
						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		02/20/2016		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 450.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 5,595.00	



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)					2. ID Number	
FRIENDS OF MATT HUGHES						
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	
GLORIA MEARES 4020 WESTCHASE BLVD. SUITE 130 RALEIGH, NC 27607			PSYCHOLOGIST			
			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		01/07/2016	\$ 200.00	
<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	
THERESA MERRITT-WATSON 1009 SABRE COURT CHAPEL HILL, NC 27516			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
					\$ 250.00	
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		02/24/2016	\$ 250.00	
<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	
JANIE MORRIS P.O. BOX 1182 HILLSBOROUGH, NC 27278			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		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		02/20/2016	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 550.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 5,595.00	



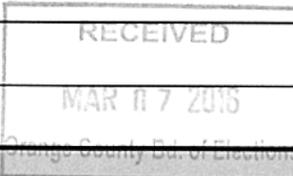
Contributions from Individuals

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	
FRIENDS OF MATT HUGHES							
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	
MICHAEL MORRISSEY 4725 GANESH PLACE DURHAM, NC 27705				IT CONSULTANT			
				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	Credit Card		02/03/2016		\$ 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	
NAN NIXON 2133 N LAKESHORE DR CHAPEL HILL, NC 27514				N/A			
				c. Employer's Name/Specific Field			
				N/A			
						e. Election Sum to Date	
						\$ 250.00	
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		02/06/2016		\$ 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	
ROBERT NUTTER 3111 DAIRYLAND RD HILLSBOROUGH, NC 27278				OWNER			
				c. Employer's Name/Specific Field			
				MAPLEVIEW FARMS			
						e. Election Sum to Date	
						\$ 250.00	
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		01/11/2016		\$ 250.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 450.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 5,595.00	



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)					2. ID Number	
FRIENDS OF MATT HUGHES						
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
RICHARD POOLE 1955 PRESTWICK LANE WILMINGTON, NC 28405				ATTORNEY		
				c. Employer's Name/Specific Field		e. Election Sum to Date
				SELF		
						\$ 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		01/18/2016		\$ 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 RACE 601 W ROSEMARY STREET UNIT 602 CHAPEL HILL, NC 27516				PROFESSOR		
				c. Employer's Name/Specific Field		e. Election Sum to Date
				UNC-CH		
						\$ 450.00
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		02/23/2016		\$ 200.00
<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
ALLEN SPALT 300 JAMES STREET CARRBORO, NC 27510				RETIRED		
				c. Employer's Name/Specific Field		e. Election Sum to Date
				NONE		
						\$ 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	Credit Card		01/25/2016		\$ 75.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
4. Total only this Page						\$ 375.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 5,595.00

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)					2. ID Number	
FRIENDS OF MATT HUGHES						
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	
SCOTT TAYLOR 501 WEAVER MINE TRAIL CHAPEL HILL, NC 27517			ATTORNEY			
			c. Employer's Name/Specific Field			
			SELF		e. Election Sum to Date	
					\$ 1,100.00	
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		02/04/2016	\$ 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	
AMY TIEMANN 1289 FORDHAM BLVD #333 CHAPEL HILL, NC 27514			PRODUCER			
			c. Employer's Name/Specific Field			
			SPARK PRODUCTIONS		e. Election Sum to Date	
					\$ 250.00	
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		01/08/2016	\$ 250.00	
<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	
ANNA TILGHMAN 4122 ROCKINGHAM DR RALEIGH, NC 27609			CAMPAIGN MANAGER			
			c. Employer's Name/Specific Field			
			PRICE FOR CONGRESS		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	Credit Card		02/26/2016	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 550.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 5,595.00	

Orange County Bd. of Elections
RECEIVED
MAR 07 2016

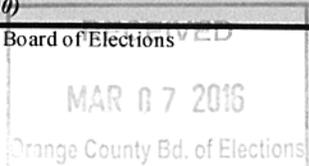
Contributions from Individuals

Amendment

Yes No

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

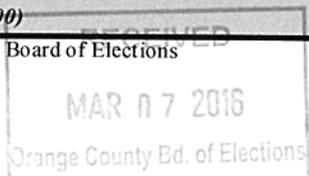
1. Committee Full Name (and Fund if applicable)					2. ID Number	
FRIENDS OF MATT HUGHES						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
JACKIE TUNIS 304 MOUNT EDEN PLACE CARY, NC 27518			SUPERVISOR			
			c. Employer's Name/Specific Field WAKEMED CARY			
					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		02/17/2016	\$ 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	
BRIAN TURNER 10 CEDARCLIFF RD ASHEVILLE, NC 28803			OWNER			
			c. Employer's Name/Specific Field TURNER SOA			
					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		01/21/2016	\$ 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	
HATTIE VANHOOK 5608 GREEN PINE RD CEDAR GROVE, NC 27231			RETIRED			
			c. Employer's Name/Specific Field RETIRED			
					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		01/09/2016	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 300.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 5,595.00	



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)					2. ID Number	
FRIENDS OF MATT HUGHES						
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
MAX WALLACE 210 W TRYON ST HILLSBOROUGH, NC 27278				CEO		
				c. Employer's Name/Specific Field ACCELERATE BRAIN CANCER CURE		
				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		02/20/2016	\$ 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
ELIZABETH WOODMAN 307 W KING STREET HILLSBOROUGH, NC 27278				EDUCATOR		
				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		02/20/2016	\$ 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
STEVE YUHASZ 1607 W BROOMFIELD DR HILLSBOROUGH, NC 27278				ATTORNEY		
				c. Employer's Name/Specific Field SELF		
				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		02/03/2016	\$ 75.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 275.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 5,595.00	



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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
FRIENDS OF MATT HUGHES					
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Type of Committee		d. Comments
MCKISSICK FOR NC SENATE 835 N MANGUM ST DURHAM, NC 27701			<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum		
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
					\$ 50.00
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
01	Check		02/01/2016	\$ 50.00	
				\$	
				\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Type of Committee		d. Comments
NC REALTORS PAC 4511 WEYBRIDGE LANE GREENSBORO, NC 27407			<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum		
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
					\$ 336.00
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
01	Check		02/09/2016	\$ 336.00	
				\$	
				\$	
4. Total only this Page				\$ 386.00	
5. Total of ALL CRO-1230 Pages (This line must be on line 8 of Detailed Summary Page CRO-1100)				\$ 386.00	

CRO-1230

NC State Board of Elections

April 2007



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
FRIENDS OF MATT HUGHES						
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 <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
CHAPEL HILL/CARRBORO CHAMBER OF COMMERCE PO BOX 2897 CHAPEL HILL, NC 27515						
				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:		
						\$ 75.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
01	Check	O	01/26/2016	\$ 70.00	ANNUAL MEETING	
				\$	TICKET	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
LASTING PRINTING AND GRAPHICS 2803 INDUSTRIAL DRIVE RALEIGH, NC 27609						
				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:		
						\$ 796.36
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
01	Check	B	01/03/2016	\$ 796.36	LETTERHEAD	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
RR CAMPAIGNS 19 WEST HARGETT STREET #702 RALEIGH, NC 27601						
				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:		
						\$ 3,775.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
01	Check	O	01/03/2016	\$ 1,000.00	CONSULTING SERVICES	
01	Check	O	02/22/2016	\$ 1,000.00	CONSULTING SERVICES	
5. Total only this Page						\$ 2,866.36
6. Total of ALL CRO-1310 Pages						\$ 4,141.36
<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)						

Aggregated Non-Media Expenditures

Amendment
 Yes No

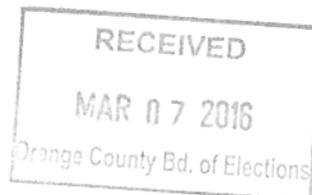
Optional form used to report NC Non-Media Expenditures of \$50 or less.

1. Committee Full Name (and Fund if applicable)					2. ID Number	
FRIENDS OF MATT HUGHES						
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	01	Cash	O	01/21/2016	\$ 5.00	EVENT TICKET
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check	O	01/09/2016	\$ 8.00	RIDGE RILEY FUND
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check	O	01/15/2016	\$ 30.00	EVENT ATTENDANCE
4. Total only this Page					\$	43.00
5. Total of ALL CRO-1315 Pages <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>					\$	43.00
6. Purpose Codes (List detailed expenditure code in (d) above)						
	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						
* Codes require detailed explanation in required remarks field (g)						

CRO-1315

NC State Board of Elections

December 2009



Outstanding Loans

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

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	
FRIENDS OF MATT HUGHES			
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
MATTHEW HUGHES P.O BOX 1406 HILLSBOROUGH, NC 27278 (919) 928-4480		ADMIN	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		UNC CHAPEL HILL	11/06/2015
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
0.00%		\$ 1,000.00	\$ 1,000.00
k. Full Name of Lending Institution		l. Loan Number	
4. Total only this Page		\$ 1,000.00	
5. Total of ALL CRO-1430 Pages <i>(This line must be on line 21 of Detailed Summary Page CRO-1100)</i>		\$ 1,000.00	

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NC State Board of Elections

December 2007

