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
MARCOPLOS FOR COMMISSIONER	7HD49C
b. Mailing Address (include City, State and Zip Code)	**d. Date Filed**
7207 SOUTHERN TRAIL CHAPEL HILL, NC 27516	12/14/15
	e. Phone Number
	919-524-6287

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2016	1/1/16	1/29/16	MARK WARREN MARCOPLOS

6. Type of Committee (Check One)

- ☑ Candidate Campaign
- ☐ PAC
- ☐ Independent Expenditure
- ☐ Legal Expense Fund
- ☐ Party
- ☐ Referendum
- ☐ Joint Fundraiser

7. Type of Fund *(if applicable, check one)*

- ☐ Booster Fund
- ☐ Building Fund
- ☐ Other:

8. Number of Fundraisers this Report

9. Type of Report *(check only one type of report from one category)*

Municipal	State/County	Referendum
☐ Organizational	☐ Organizational	☐ Organizational
☐ Thirty-five day	Quarterly	☐ Pre-referendum
☐ Pre-primary	☐ First	☐ Final
☐ Pre-election	☐ Second	☐ Supplemental Final
☐ Pre-runoff	☐ Third	☐ Annual
Semi-annual	☐ Fourth	☐ Special
☐ Mid Year	Semi-annual	
☐ Year End	☐ Mid Year	**10. Special Report Name**
☐ Final	☐ Year End	
☐ Special	☐ Final	
	☐ Special	

11. Account Information

a. Financial Institution Full Name		b. Purpose	c. Account Code
YADKIN BANK		FUNDING CAMPAIGN	MFC
			d. Period Begin Balance
			$ 1255.03

11. Account Information

a. Financial Institution Full Name		b. Purpose	c. Account Code
			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.

Printed Name of Signer _____ Signature of Appointed Treasurer _____ Date _____

FOR OFFICE USE ONLY

Date Received:	3/7/16	Employee:	[illegible]
Date Postmarked:		Employee:	
Date Scanned:	3/21/16	Employee:	BB
Date Data Entered:		Employee:	

Delivery Method
- ☐ Normal Mail
- ☐ Registered Mail
- ☒ Hand Delivered
- ☐ Electronically Filed
- ☐ 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.

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Detailed Summary

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

Amendment ☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number
MARCOPLOS for Commissioner	INTERIM	7HD49C

Start of Election Cycle: January 1, 2015		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$ 1255.03	$
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	$ 2297.32	$ 2617.32
6) Contributions from Individuals	(CRO-1210)	$ 1325.00	$ 2605.00
7) Contributions from Political Party Committees	(CRO-1220)	$	$
8) Contributions from Other Political Committees	(CRO-1230)	$	$
9) Loan Proceeds	(CRO-1410)	$	$
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)	$	$
11e) Exempt Purchase Price Sales	(CRO-1265)	$	$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		$ 3622.32	$ 5222.32
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	$ 2253.39	$ 2598.36
13b) Contributions to Candidates/Political Committees	(CRO-1310)	$	$
13c) Coordinated Party Expenditures	(CRO-1310)	$	$
14) Aggregated Non-Media Expenditures	(CRO-1315)	$	$
15) Loan Repayments	(CRO-1420)	$	$
16) Refunds/Reimbursements from the Committee	(CRO-1320)	$	$
17) In-Kind Contributions	(CRO-1510)	$	$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		$ 2253.39	$ 2598.36
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		$ 2623.96	$ 2623.96
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	$	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	$	
22) Debts and Obligations owed by the Committee	(CRO-1610)	$	
23) Debts and Obligations owed to the Committee	(CRO-1620)	$	
24) Account Transfers Within the Committee	(CRO-1720)	$	
25) Administrative Support	(CRO-1710)	$	$
26) Forgiven Loans	(CRO-1440)	$	$
27) 48-Hour Notice Reports Sum	(CRO-2220)	$	$
28) Contributions to be Refunded	(CRO-1215)	$	$

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Aggregated Contributions from Individuals

Page 1 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
MARCOPLOS FOR COMMISSIONER	71HD49C

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove	1	ELECTRONIC		1/2/2016	$ 50.00
☐ Add ☐ Remove	1	ELECTRONIC		1/2/2016	$ 50.00
☐ Add ☐ Remove	1	ELECTRONIC		1/3/2016	$ 25.00
☐ Add ☐ Remove	1	CHECK		1/4/2016	$ 50.00
☐ Add ☐ Remove	1	CHECK		1/4/2016	$ 50.00
☐ Add ☐ Remove	1	CHECK		1/5/2016	$ 50.00
☐ Add ☐ Remove	1	ELECTRONIC		1/15/2016	$ 25.00
☐ Add ☐ Remove	1	CHECK		1/15/2016	$ 25.00
☐ Add ☐ Remove	1	ELECTRONIC		1/15/2016	$ 25.00
☐ Add ☐ Remove	1	CHECK		1/16/2016	$ 40.00
☐ Add ☐ Remove	1	CHECK		1/16/2016	$ 50.00
☐ Add ☐ Remove	1	CHECK		1/16/2016	$ 50.00
☐ Add ☐ Remove	1	ELECTRONIC		1/19/2016	$ 50.00
☐ Add ☐ Remove	1	ELECTRONIC		1/19/2016	$ 50.00
☐ Add ☐ Remove	1	ELECTRONIC		1/19/2016	$ 25.00
☐ Add ☐ Remove	1	ELECTRONIC		1/19/2016	$ 50.00
☐ Add ☐ Remove	1	ELECTRONIC		1/25/2016	$ 50.00
☐ Add ☐ Remove	1	CHECK		1/27/2016	$ 25.00
☐ Add ☐ Remove	1	ELECTRONIC		1/27/2016	$ 25.00
☐ Add ☐ Remove	1	ELECTRONIC		1/27/2016	$ 25.00
☐ Add ☐ Remove	1	ELECTRONIC		1/28/2016	$ 50.00
☐ Add ☐ Remove	1	CHECK		1/28/2016	$ 20.00
☐ Add ☐ Remove	1	ELECTRONIC		1/29/2016	$ 25.00

4. Total only this Page	$ 885.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ 2297.32

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Aggregated Contributions from Individuals

Page 2 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
MARCOPLOS FOR COMMISSIONER	7HD49C

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove	1	ELECTRONIC		1/30/2016	$ 20.00
☐ Add ☐ Remove	1	CHECK		1/30/2016	$ 50.00
☐ Add ☐ Remove	1	CHECK		1/30/2016	$ 35.00
☐ Add ☐ Remove	1	CHECK		1/30/2016	$ 30.00
☐ Add ☐ Remove	1	CHECK		1/31/2016	$ 50.00
☐ Add ☐ Remove	1	CASH		1/31/2016	$ 20.00
☐ Add ☐ Remove	1	CASH		1/31/2016	$ 10.00
☐ Add ☐ Remove	1	ELECTRONIC		1/31/2016	$ 20.00
☐ Add ☐ Remove	1	CHECK		1/31/2016	$ 10.00
☐ Add ☐ Remove	1	CASH		1/31/2016	$ 10.00
☐ Add ☐ Remove	1	CASH		1/31/2016	$ 15.00
☐ Add ☐ Remove	1	CASH		1/31/2016	$ 20.00
☐ Add ☐ Remove	1	ELECTRONIC		2/1/2016	$ 50.00
☐ Add ☐ Remove	1	CHECK		2/1/2016	$ 50.00
☐ Add ☐ Remove	1	CHECK		2/1/2016	$ 30.00
☐ Add ☐ Remove	1	CHECK		2/1/2016	$ 25.00
☐ Add ☐ Remove	1	CHECK		2/1/2016	$ 50.00
☐ Add ☐ Remove	1	CHECK		2/1/2016	$ 50.00
☐ Add ☐ Remove	1	CHECK		2/1/2016	$ 50.00
☐ Add ☐ Remove	1	ELECTRONIC		2/3/2016	$ 25.00
☐ Add ☐ Remove	1	CHECK		2/4/2016	$ 25.00
☐ Add ☐ Remove	1	CHECK		2/8/2016	$ 50.00
☐ Add ☐ Remove	1	ELECTRONIC		2/9/2016	$ 12.32

4. Total only this Page	$ 707.32
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ 2297.32

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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
MARCOPLOS FOR COMMISSIONER	7HD49C

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove	1	CHECK		2/10/2016	$ 25.00
☐ Add ☐ Remove	1	CHECK		2/10/2016	$ 25.00
☐ Add ☐ Remove	1	ELECTRONIC		2/11/2016	$ 25.00
☐ Add ☐ Remove	1	CHECK		2/12/2016	$ 50.00
☐ Add ☐ Remove	1	CHECK		2/13/2016	$ 30.00
☐ Add ☐ Remove	1	CHECK		2/17/2016	$ 30.00
☐ Add ☐ Remove	1	ELECTRONIC		2/17/2016	$ 25.00
☐ Add ☐ Remove	1	ELECTRONIC		2/17/2016	$ 25.00
☐ Add ☐ Remove	1	CHECK		2/18/2016	$ 50.00
☐ Add ☐ Remove	1	CHECK		2/19/2016	$ 50.00
☐ Add ☐ Remove	1	CHECK		2/20/2016	$ 50.00
☐ Add ☐ Remove	1	ELECTRONIC		2/20/2016	$ 20.00
☐ Add ☐ Remove	1	ELECTRONIC		2/22/2016	$ 25.00
☐ Add ☐ Remove	1	CHECK		2/22/2016	$ 40.00
☐ Add ☐ Remove	1	ELECTRONIC		2/23/2016	$ 50.00
☐ Add ☐ Remove	1	ELECTRONIC		2/24/2016	$ 10.00
☐ Add ☐ Remove	1	CHECK		2/25/2016	$ 50.00
☐ Add ☐ Remove	1	CHECK		2/26/2016	$ 50.00
☐ Add ☐ Remove	1	CHECK		2/27/2016	$ 50.00
☐ Add ☐ Remove	1	ELECTRONIC		2/29/2016	$ 25.00
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$

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4. Total only this Page	$ 705.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ 2297.32

Contributions from Individuals

Pg 1 of 4

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
MARCOPLOS FOR COMMISSIONER	7HD49C

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
DAVID STUCKEY 411 JAMES St. CARRBORO, NC 27510	FINANCIAL PLANNER	SELF		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐					$
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
TOM O'DWYER 105 BOULDER LN. CHAPEL HILL, NC 27514	BUILDER	SELF		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐					$
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
TODD SHAPLEY-QUINN 130 JUSTICE ST. CHAPEL HILL, NC 27516	PHYSICIAN	DUKE UNIV.		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐					$
☐					$
☐					$

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)*	$ 1325.00

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Contributions from Individuals

Pg 2 of 4

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
MARCOPLOS FOR COMMISSIONER	7HD49C

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MARY HUGHES BROOKHART	RETIRED			$ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☑	1	CHECK		12/20/2015	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
GORDON MERKLEIN 504 HIGHGROVE DR. CHAPEL HILL, NC 27516	REAL ESTATE MGR.	UNC-CH		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐					$
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ALEX CASTRO 5915 MORROW MILL RD CHAPEL HILL, NC 27516	RETIRED			$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐					$
☐					$
☐					$

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4. Total only this Page	$ 350.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 1325.00

Contributions from Individuals

Pg 3 of 4

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
MARCOPLOS FOR COMMISSIONER	7HD 49C

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
DAN KREBILL 107 SILO DR. CHAPEL HILL, NC 27514	RETIRED			$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐					$
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JOHN FISCHER 1620 IRA RD. EFLAND, NC 27243	RETIRED			$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐					$
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
TOM WILLS 600 BRANDYWINE RD. CHAPEL HILL, NC 27516	SOLAR WATER TECH	SOLAR CONSULTANTS INC		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐					$
☐					$
☐					$

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)*	$ 1325.00

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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
MARCOPLOS FOR COMMISSIONER	7HD49C

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
KATIE HARRIS 301 HILLSBOROUGH RD., APT. B CARRBORO, NC 27510	ATHLETIC TRAINER	SELF		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐					$
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ELIZABETH SEARLES-BOTTS 5001 MURPHY SCHOOL RD DURHAM, NC 27705	FARMER	SELF		$ 75.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐					$
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	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
☐					$
☐					$
☐					$

4. Total only this Page	$ 175.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 1325.00

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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)	2. ID Number
MARCOPLOS FOR COMMISSIONER	7HD49C

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)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
CHAPEL HILL-CARRBORO CHAMBER OF COMMERCE 104 SOUTH ESTES DR. CHAPEL HILL, NC 27514		☐ Federal ☑ County: ☐ State ☐ Municipality:	O EVENT FEE	$ 70.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				$	
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
NATIONBUILDER 2520 S. GRAND AVE. LAS ANGELES, CA 90011		☐ Federal ☑ County: ☐ State ☐ Municipality:	A WEB EXPENSES	$ 58.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
A	ELECTRONIC	WEB EXPENSES (A)	12/14/205	$ 29.00	
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
NC DEMOCRATIC PARTY 220 HILLSBOROUGH ST RALEIGH, NC 27603		☐ Federal ☐ County: ☐ State ☐ Municipality:	O VOTER DATABASE	$ 394.62

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	$ 443.62
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)*	$ 1853.39

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)**

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Orange County Bd. of Elections

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)	2. ID Number
MARCOPLOS FOR COMMISSIONER	7HD49C

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)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
DEMOCRACY ENGINE 2125 14th St. NW WASHINGTON, D.C. 20009		☐ Federal ☐ County: ☐ State ☐ Municipality:	C FINANCE FEES	$ 69.89

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	ELECTRONIC	C	12/16/2015	$ 15.97	FINANCE FEES
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
SIGNS NOW 1322 FORDHAM BLVD CHAPEL HILL, NC 27514		☐ Federal ☐ County: ☐ State ☐ Municipality:	B SIGNS	$ 830.44

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				$	
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
NATION BUILDER 2520 S. GRAND AVE. LAS ANGELES, CA 90071		☐ Federal ☐ County: ☐ State ☐ Municipality:	A WEB EXPENSES	$ 87.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	ELECTRONIC	A	12/14/2016	$ 29.00	WEB EXPENSES
1	ELECTRONIC	A		$ 29.00	WEB EXPENSES

5. Total only this Page	$ 929.33
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)*	$ 1853.39

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)**

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Disbursements

Pg 3 of 3

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)	2. ID Number
MARCOPLOS FOR COMMISSIONER	7HD49C

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)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
SIGNS NOW 1322 FORDHAM BLVD. CHAPEL HILL NC 27514		☐ Federal ☐ County: ☐ State ☐ Municipality:	B SIGNS	$ 1660.88

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	CHECK	B	2/3/2016	$ 830.44	SIGNS
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
		☐ Federal ☐ County: ☐ State ☐ Municipality:		$

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				$	
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
		☐ Federal ☐ County: ☐ State ☐ 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	$ 830.44
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)*	$ 1853.39

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)**

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