

Disclosure Report Cover

Amendment
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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 CIANCIOLO FOR COUNCIL	c. ID Number
b. Mailing Address (include City, State and Zip Code) 7704 AMESBURY DR. Chapel Hill, NC 27514	d. Date Filed 09/30/2013
	e. Phone Number (919)48-98539

2. Report Year 2013	3. Period Start Date (mm/dd/yy) 07/22/2013	4. Period End Date (mm/dd/yy) 09/24/2013	5. Treasurer Full Name Michael G. PARKER
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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	Referendum
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input checked="" type="checkbox"/> Thirty-five day	Quarterly	<input type="checkbox"/> Pre-referendum
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> Booster Fund		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> Other:		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	10. Special Report Name
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	

11. Account Information		11. Account Information	
a. Financial Institution Full Name WELLS FARGO	a. Financial Institution Full Name	b. Purpose CAMPAIGN RECEIPTS + DISBURSEMENTS	c. Account Code 1
		d. Period Begin Balance \$ 972.53	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.

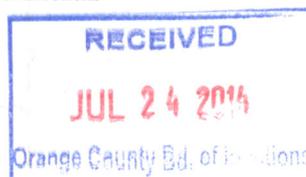
MICHAEL G. PARKER Michael G. Parker 07/22/2014
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: <u>7/24/14</u>	Employee: _____	Delivery Method <input checked="" 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
Date Postmarked: <u>7/22/14</u>	Employee: _____	
Date Scanned: <u>7/28/14</u>	Employee: <u>661</u>	
Date Data Entered: _____	Employee: _____	

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.



Detailed Summary

Amendment
 Yes No

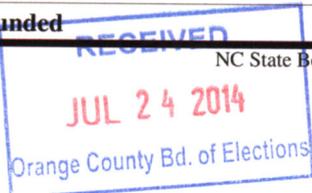
Use this form to summarize all disclosure reporting forms and to total monetary information

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number	
CIANCILO FOR COUNCIL	2013THIRTY FIVE DAY		
Start of Election Cycle: January 1, <u>2013</u>	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start	\$ 972.53	\$ 0.00	
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 1,186.00	\$ 1,186.00	
6) Contributions from Individuals (CRO-1210)	\$ 4,942.13	\$ 4,942.13	
7) Contributions from Political Party Committees (CRO-1220)	\$ 0.00	\$ 0.00	
8) Contributions from Other Political Committees (CRO-1230)	\$ 0.00	\$ 0.00	
9) Loan Proceeds (CRO-1410)	\$ 2,000.00	\$ 3,000.00	
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)	\$ 8,128.13	\$ 9,128.13	
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)	\$ 4,146.33	\$ 4,173.80	
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)	\$ 164.02	\$ 164.02	
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)	\$ 162.13	\$ 162.13	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 4,472.48	\$ 4,499.95	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 4628.18	\$ 4628.18	
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$ 0.00		
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$ 3,000.00		
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	

CRO-1100

NC State Board of Elections

August 2008

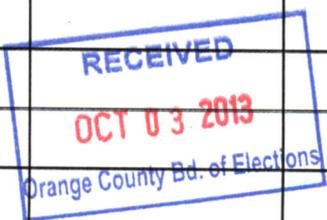


Aggregated Contributions from Individuals

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	
CIANCIOLO FOR COUNCIL					
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	1	Electronic Funds Tra		09/18/2013	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		09/07/2013	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		09/06/2013	\$ 35.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		09/24/2013	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		09/04/2013	\$ 40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		09/01/2013	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		09/08/2013	\$ 35.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		09/17/2013	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		09/20/2013	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		09/03/2013	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		09/22/2013	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		09/22/2013	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Electronic Funds Tra		09/06/2013	\$ 26.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		09/04/2013	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		09/09/2013	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Electronic Funds Tra		09/24/2013	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	In Kind	2 BOTTLES OF WINE FOR FUND-RAISER	09/22/2013	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		09/06/2013	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		09/22/2013	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		09/22/2013	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		09/19/2013	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		09/22/2013	\$ 35.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		09/22/2013	\$ 50.00
4. Total only this Page				\$	\$961.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>				\$	1186. ⁰⁰ \$961.00

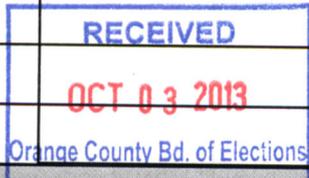


Contributions from Individuals

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

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
CIANCIOLO FOR COUNCIL							
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	
MELISSA M. CAIN 3905 SWEETEN CREEK RD. CHAPEL HILL, NC 27514				EXECUTIVE DIRECTOR			
				c. Employer's Name/Specific Field			
				CHAPEL HILL PUB. LIBRARY FDN.			
				e. Election Sum to Date			
				\$		242.13	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	Check		09/10/2013	\$ 100.00		
<input type="checkbox"/>	1	In Kind	12 BOTTLES OF WINE AND FLOWERS FOR	09/22/2013	\$ 142.13		
<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 COZART 601 WEST ROSEMARY ST., APT. 305 CHAPEL HILL, NC 27516				FUND-RAISER			
				c. Employer's Name/Specific Field			
				UNC-CH			
				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"/>	1	Electronic Funds Tra		09/18/2013	\$ 75.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
MICHAEL G. PARKER 601 WEST ROSEMARY ST. APT. 311 CHAPEL HILL, NC 27516 (919) 883-2063				CONSULTANT			
				c. Employer's Name/Specific Field			
				BIOASSET ADVISORS LLC			
				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"/>	1	Check		08/01/2013	\$ 300.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 617.13	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 4,942.13	

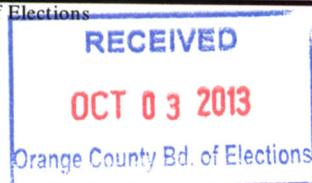


Contributions from Individuals

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

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
CIANCIOLO FOR COUNCIL						
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 BROAD 2541 BOOKER CREEK RD. CHAPEL HILL, NC 27514			RETIRED			
			c. Employer's Name/Specific Field			
					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"/>	1	Check		09/04/2013	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
ROBERT SEYMOUR 750 WEAVER DAIRY RD., APT. 219 CHAPEL HILL, NC 27514			RETIRED			
			c. Employer's Name/Specific Field			
					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"/>	1	Check		08/25/2013	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
RICHARD SURWIT 3804 SWEETEN CREEK RD. CHAPEL HILL, NC 27514			PROFESSOR			
			c. Employer's Name/Specific Field			
			DUKE UNIVERSITY		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"/>	1	Check		09/08/2013	\$ 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>					\$ 4,942.13	



Contributions from Individuals

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

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
CIANCIOLO FOR COUNCIL							
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	
KENNETH S. BROUN 140 WEST FRANKLIN ST. CHAPEL HILL, NC 27516				RETIRED			
				c. Employer's Name/Specific Field			
						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"/>	1	Check		09/22/2013	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
GENE PEASE 208 GLANDON DR. CHAPEL HILL, NC 27514				CEO			
				c. Employer's Name/Specific Field			
				VESTRICS		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"/>	1	Electronic Funds Tra		09/20/2013	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
MICHAEL P. WILDER 3905 SWEETEN CREEK RD. CHAPEL HILL, NC 27514				SALES MGR.			
				c. Employer's Name/Specific Field			
				BARBER & TAYLOR		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"/>	1	Check		09/10/2013	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 300.00	
5. Total of ALL CRO-1210 Pages						\$ 4,942.13	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							



Contributions from Individuals

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

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
CIANCIOLO FOR COUNCIL							
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	
SHERRY BREAUX 7708 AMESBURY DR. CHAPEL HILL, NC 27514				QUALITY REVIEW SPECIALIST			
				c. Employer's Name/Specific Field			
				DUKE UNIVERSITY MED. CENT.			
				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"/>	1	Check		09/07/2013		\$ 300.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
D.R. BRYAN 607 ABERDEEN DR CHAPEL HILL, NC 27516				OWNER			
				c. Employer's Name/Specific Field			
				BRYAN PROPERTIES			
				e. Election Sum to Date			
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	1	Check		09/16/2013		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JOHN P. EVANS 208 LAUREL HILL RD CHAPEL HILL, NC 27514				ACTING DEAN			
				c. Employer's Name/Specific Field			
				UNC SCHOOL OF BUSINESS			
				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"/>	1	Check		09/18/2013		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 500.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 4,942.13	

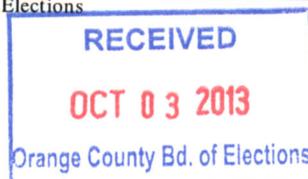


Contributions from Individuals

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

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
CIANCIOLO FOR COUNCIL							
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	
TERESA TRUITT BROWN 3605 SWEETEN CREEK RD CHAPEL HILL, NC 27514				PHYSICIAN			
				c. Employer's Name/Specific Field			
				NC DIAGNOSTIC IMAGING			
				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"/>	1	Check		09/22/2013	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
WHIT RUMMEL 201 HILLCREST RD CHAPEL HILL, NC 27514				FILMMAKER			
				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"/>	1	Check		09/18/2013	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
GARY SALEEBY 840 PINEHURST DR. CHAPEL HILL, NC 27517				REAL ESTATE			
				c. Employer's Name/Specific Field			
				Debi and Gary Saleeby Real Estate			
				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"/>	1	Check		09/22/2013	\$ 250.00		
<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>						\$ 4,942.13	



Contributions from Individuals

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

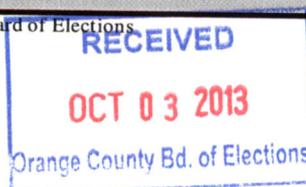
Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number	
CIANCIOLO FOR COUNCIL							
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	
DAVID KLECKNER 3816 SWEETEN CREEK RD. CHAPEL HILL, NC 27514				IT MANAGER			
				c. Employer's Name/Specific Field			
				UNIV. OF NO. CAROLINA -- CH			
				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"/>	1	Check		09/21/2013	\$ 75.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
BARBARA MCNULTY 7608 JUSTIN PL. CHAPEL HILL, NC 27514				CONSULTANT			
				c. Employer's Name/Specific Field			
				SELF			
				e. Election Sum to Date			
						\$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	Electronic Funds Tra		09/23/2013	\$ 150.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JOE ROGERS 2477 FOXWOOD DR. CHAPEL HILL, NC 27514				DIRECTOR			
				c. Employer's Name/Specific Field			
				MERICAN DIPLOMACY PUBLISHING			
				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"/>	1	Electronic Funds Tra		09/23/2013	\$ 300.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 525.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 4,942.13	

CRO-1210

NC State Board of Elections

April 2007



Contributions from Individuals

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

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
CIANCIOLO FOR COUNCIL							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JOSEPH DEVAUGH-GEISS 3817 SWEETEN CREEK RD. CHAPEL HILL, NC 27514				PHYSICIAN			
				c. Employer's Name/Specific Field			
				DUKE UNIV.			
						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"/>	1	Electronic Funds Tra		09/19/2013	\$ 300.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
GERHART T. WALDORF 106 GURNSEY TRAIL CHAPEL HILL, NC 27517				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"/>	1	Check		08/21/2013	\$ 300.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
ROBERT E. WOODRUFF 209 NOTTINGHAM DR. CHAPEL HILL, NC 27517				MANGER			
				c. Employer's Name/Specific Field			
				THE CEDARS			
						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"/>	1	Check		09/18/2013	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 700.00	
5. Total of ALL CRO-1210 Pages						\$ 4,942.13	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

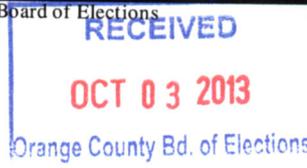


Contributions from Individuals

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

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
CIANCIOLO FOR COUNCIL						
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
DAVID A. BOOKHOUT 3801 SWEETEN CREEK RD. CHAPEL HILL, NC 27514				RETIRED		
				c. Employer's Name/Specific Field		
						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"/>	1	Check		09/09/2013	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
DONNABETH LEFFLER NC				FREELANCE CONTRACTOR		
				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"/>	1	Electronic Funds Tra		09/15/2013	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
RICHARD J YOST 7700 AMESBURY DR. CHAPEL HILL, NC 27514				DIR., BUSINESS DEVELOPMENT		
				c. Employer's Name/Specific Field		
				PAY PROS		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"/>	1	Check		09/22/2013	\$ 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)					\$ 4,942.13	



Contributions from Individuals

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

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
CIANCIOLO FOR COUNCIL						
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
MARIANNA DAY BURROUGHS 110 CEDAR HILLS DR. CHAPEL HILL, NC 27514				WRITER		
				c. Employer's Name/Specific Field		
				IPAS		
						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"/>	1	Check		09/22/2013	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
VIRGINIA A. JANZEN 107 CEDAR HILLS DR. CHAPEL HILL, NC 27514				OFFICE MGR.		
				c. Employer's Name/Specific Field		
				SOUTHERN NEIGHBOR		
						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"/>	1	Check		08/25/2013	\$ 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
WILLIAM P. JANZEN 107 CEDAR HILLS DR. CHAPEL HILL, NC 27514				PROFESSOR		
				c. Employer's Name/Specific Field		
				UNC		
						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"/>	1	Check		08/25/2013	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 600.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 4,942.13	



Contributions from Individuals

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

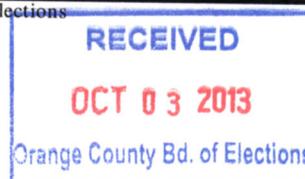
Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number	
CIANCIOLO FOR COUNCIL							
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	
JOSH GURLITZ 208 SPRING LANE CHAPEL HILL, NC 27514				ARCHITECT			
				c. Employer's Name/Specific Field			
				GGA ARCHITECTS, PA			
				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"/>	1	Check		09/22/2013	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
STEPHEN A. RICH 603 EAST FRANKLIN ST. CHAPEL HILL, NC 27514				RETIRED			
				c. Employer's Name/Specific Field			
				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"/>	1	Check		09/22/2013	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
DIANA WHITTINGHILL STEELE 1207 MASON FARM RD. CHAPEL HILL, NC 27514				OWNER			
				c. Employer's Name/Specific Field			
				WILLOW HILL PRESCHOOL			
				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"/>	1	Check		09/22/2013	\$ 200.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 400.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 4,942.13	

CRO-1210

NC State Board of Elections

April 2007



Contributions from Individuals

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

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
CIANCIOLO FOR COUNCIL					
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
ROB MAITLAND 2 COUCH ROAD CHAPEL HILL, NC 27514			ATTORNEY		
			c. Employer's Name/Specific Field MAITLAND LAW FIRM		
					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"/>	1	Electronic Funds Tra		09/15/2013	\$ 250.00
<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>					\$ 4,942.13

CRO-1210

NC State Board of Elections

April 2007



Loan Proceeds

Pg 1 of 1

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

Use this form to report proceeds from a loan and loan endorser's information
 A loan proceeds statement must accompany each loan that is from an individual

1. Committee Full Name (and Fund if applicable)				2. ID Number	
CIANCIOLO FOR COUNCIL					
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	
GEORGE J. CIANCIOLO 7704 AMESBURY DR. CHAPEL HILL, NC 27514 (919) 684-8131		ASSOCIATE PROFESSOR		e. Start Date (mm/dd/yyyy)	
		c. Employer's Name/Specific Field		f. End Date (mm/dd/yyyy)	
		DUKE UNIVERSITY			
g. Rate	h. Security Pledged	i. Account Code	j. Form of Payment	k. Amount	
0.000 %		1	Electronic Funds Tra	\$ 2,000.00	
l. Full Name of Lending Institution					m. Loan Number
4. Endorsers/Makers <i>(The people who guarantee the loan.)</i>					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
		%		\$	
5. Total of ALL CRO-1410 Pages <i>(This line must be on line 9 of Detailed Summary Page CRO-1100)</i>					\$ 2,000.00

CRO-1410

NC State Board of Elections

April 2007



Disbursements

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

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable)						2. ID Number	
CIANCIOLO FOR COUNCIL							
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
140 WEST FRANKLIN ST. HOA 140 WEST FRANKLIN ST. CHAPEL HILL, NC 27516							
				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:			
						\$ 100.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Check	C	09/18/2013	\$ 100.00	RENTAL OF PARTY ROOM		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
STAPLES CHAPEL HILL, NC							
				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:			
						\$ 158.03	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Debit Card	K	08/30/2013	\$ 158.03	PAPER AND ENVELOPES		
				\$			
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	
U.S. POSTAL SERVICE DURHAM, NC							
				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:			
						\$ 322.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Debit Card	I	08/30/2013	\$ 276.00			
1	Debit Card	I	09/23/2013	\$ 27.60			
5. Total only this Page						\$ 561.63	
6. Total of ALL CRO-1310 Pages						\$ 4,146.33	
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>							
<i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>							
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>							
7. Purpose Codes (List detailed expenditure code in (h.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							



Disbursements

Amendment
 Yes No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable)						2. ID Number
CIANCIOLO FOR COUNCIL						
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
BETTER IMAGE PRINTING 1709 LEGION RD., SUITE 100 CHAPEL HILL, NC 27517						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County:		
				<input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 272.32
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Check	B	09/09/2013	\$ 272.32	FUIND-RAISING MAILER	
				\$		
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
GIA BRANCIFORTE 1022A ALABAMA AVE. DURHAM, NC 27705						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County:		
				<input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 1,800.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Check	O	09/20/2013	\$ 1,800.00	WEB SITE DESIGN	
				\$		
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
STARS AND STRIPES 7560 W 100TH PLACE BRIDGEVIEW, IL 60455						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County:		
				<input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 1,512.38
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Debit Card	B	09/06/2013	\$ 1,512.38	YARD SIGNS	
				\$		
5. Total only this Page						\$ 3,584.70
6. Total of ALL CRO-1310 Pages						\$ 4,146.33
<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	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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	
CIANCIOLO FOR COUNCIL							
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	1	Electronic Funds Tra	O	09/24/2013	\$ 45.68	FEES FOR PAYPAL CONTRIBUTIONS	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Debit Card	O	07/29/2013	\$ 23.00	WEB SITE REGISTRATION	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Debit Card	O	08/05/2013	\$ 48.06	WEB SITE REGISTRATION &	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Debit Card	B	08/22/2013	\$ 47.28	BUSINESS CARDS	
4. Total only this Page						\$ 164.02	
5. Total of ALL CRO-1315 Pages						\$ 164.02	
<i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>							
6. Purpose Codes (List detailed expenditure code in (d) above)							
E - Salaries		B* - Printing		C* - Fundraising		D - To Another Candidate	
I - Postage		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
O* - Other		J - Penalties		K* - Office Expenses		Q* - Donations to Legal Expense Fund	
* Codes require detailed explanation in required remarks field (g)							

CRO-1315

NC State Board of Elections

December 2009



In-Kind Contributions

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

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.
 Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
CIANCIOLO FOR COUNCIL			
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			d. Election Sum to Date
			\$ 20.00
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
2 BOTTLES OF WINE FOR FUND-RAISER		09/22/2013	\$ 20.00
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
MELISSA M. CAIN 3905 SWEETEN CREEK RD. CHAPEL HILL, NC 27514		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			d. Election Sum to Date
			\$ 242.13
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
12 BOTTLES OF WINE AND FLOWERS FOR FUND-RAISING PARTY		09/22/2013	\$ 142.13
			\$
			\$
4. Total only this Page			\$ 162.13
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)			\$ 162.13



Outstanding Loans

Pg 1 of 1

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	
CIANCIOLO FOR COUNCIL			
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
GEORGE J. CIANCIOLO 7704 AMESBURY DR. CHAPEL HILL, NC 27514 (919) 684-8131		ASSOCIATE PROFESSOR	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		DUKE UNIVERSITY	09/10/2013
	f. End Date (mm/dd/yyyy)		
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
0.00%		\$ 2,000.00	\$ 2,000.00
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
GEORGE J. CIANCIOLO 7704 AMESBURY DR. CHAPEL HILL, NC 27514 (919) 684-8131		ASSOCIATE PROFESSOR	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		DUKE UNIVERSITY	07/15/2013
	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		\$ 3,000.00	
5. Total of ALL CRO-1430 Pages <i>(This line must be on line 21 of Detailed Summary Page CRO-1100)</i>		\$ 3,000.00	

CRO-1430

NC State Board of Elections

December 2007

