

Disclosure Report Cover

Amendment
<input 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 FRIENDS OF TALAC	c. ID Number 1HDF0Q
b. Mailing Address (include City, State and Zip Code) 1202 N GREENSBORO ST CARRBORO, NC 27510	d. Date Filed 7/10/14
	e. Phone Number 919-308-6288

2. Report Year 2014	3. Period Start Date (mm/dd/yy) 07/19/2014	4. Period End Date (mm/dd/yy) 06/30/2014	5. Treasurer Full Name TALAC Y ASAO
-------------------------------	--	--	---

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 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
		<input type="checkbox"/> Pre-election	<input checked="" type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
		Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
		<input checked="" type="checkbox"/> Mid Year	Semi-annual	
		<input type="checkbox"/> Year End	<input checked="" 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	

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

Booster Fund

Building Fund

Other:

8. Number of Fundraisers this Report

10. Special Report Name

11. Account Information		11. Account Information	
a. Financial Institution Full Name PNC BANK	a. Financial Institution Full Name	b. Purpose	c. Account Code
b. Purpose Campaign Fund Op Expenses	c. Account Code PNC 6	b. Purpose	c. Account Code
d. Period Begin Balance \$ 213.74	d. Period Begin Balance	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 of Elections.

TALAC ASAO Printed Name of Signer TALAC ASAO Signature of Appointed Treasurer 7/10/14 Date

FOR OFFICE USE ONLY

Date Received: 7/14/14 Employee: BBJ Delivery Method: Normal Mail Registered Mail Hand Delivered Electronically Filed

Date Postmarked: 7/10/14 Employee: BBJ Signer has not received mandatory training

Date Scanned: 7/19/14 Employee: BBJ

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	
FRIENDS OF TALAL		2 ND QUARTER		IHDF00	
Start of Election Cycle: January 1, <u>2014</u>		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 213.74		\$ —	
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 167.70 167.70	\$ 167.70		
6) Contributions from Individuals	(CRO-1210)	\$ 118.95	\$ 1107.37		
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)		\$ 286.65		\$ 1275.07	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$ 449.89	\$ 786.15		
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)	\$ 36.65	\$ 475.07		
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 486.54		\$ 1261.22	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 13.85		\$ 13.85	
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)					

CRO-1100

NC State Board of Elections

August 2008

RECEIVED
JUL 14 2014
Orange County Bd. of Elections

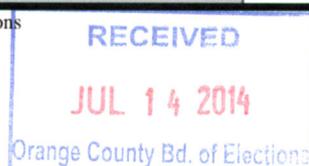
Contributions from Individuals

Pg 1 of 1

Amendment
 Yes No

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

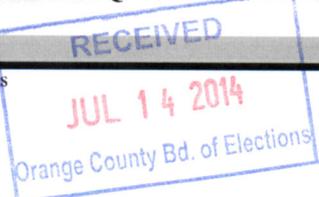
1. Committee Full Name (and Fund if applicable)						2. ID Number	
FRIENDS OF TALAL						1HDF0Q	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JOHN ADAM LUDLOW 100 Rivercreek Pl Carrboro, NC 27510				CONSULTANT			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				JW LUDLOW		\$ 0.00 0.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	PNC 6	CHECK		05/01/2014	\$ 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	
TALAL Y ASAD				CANDIDATE			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
						\$ 538.42	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	PNC 6	Personal Debit	Hosting - Web May	04/28/2014	\$ 18.95		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
				c. Employer's Name/Specific Field		e. Election Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 118.95	
5. Total of ALL CRO-1210 Pages						\$ 118.95	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							



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 TIAL					1HDF00	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <small>(include city, state, & zip)</small>			b. Coordinated Committee Name		d. Comments	
JACK TWIDDY 4720 NORBURY PL RALEIGH, NC 27614			FRIENDS OF TIAL		CARRBORO SOLAR DECK RENDERING	
			c. Level Registered (Specify)		e. Election Sum to Date	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$ 75.00 0.00	
CARRBORO						
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
PNC 6	CHECK	A	05/06/2014	\$ 75.00		
				\$		
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <small>(include city, state, & zip)</small>			b. Coordinated Committee Name		d. Comments	
RYAN HUMBERT ^{DBA} RYAN MICHAEL DESIGN 1579 APPLGROVE ST NW NORTH CANTON, OH 44720					Design - Lawn Sign Facebook Post Card	
			c. Level Registered (Specify)		e. Election Sum to Date	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$ 150.00 0.00	
CARRBORO						
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
PNC 6	CHECK	A		\$ 150.00	Design Work	
				\$		
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <small>(include city, state, & zip)</small>			b. Coordinated Committee Name		d. Comments	
LADY PRINTING INC PO BOX 8429 SEMINOLE, FL 33775					DOOR HANGERS	
			c. Level Registered (Specify)		e. Election Sum to Date	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$ 179.51 0.00	
CARRBORO						
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
PNC 6	DEBIT	B	04/28/2014	\$ 179.51		
				\$		
5. Total only this Page					\$ 404.51	
6. Total of ALL CRO-1310 Pages					\$	
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>						
<i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>						
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>						
7. Purpose Codes <small>(List detailed expenditure code in (h.) above)</small>						
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) FRIENDS OF TUAL	2. ID Number
---	---------------------

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) MARATHON GAS 1501 E FRANKLIN ST CHAPEL HILL, NC 27514	b. Coordinated Committee Name	d. Comments GAS/TRAVEL REIMBURSEMENT
	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 \$ 0.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
PNC 6	DEBIT	0	05/15/2014	\$ 45.38	GAS FOR ALL CAMPAIGN TRAVEL
				\$	

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
	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 \$

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	d. Comments
	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 \$

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

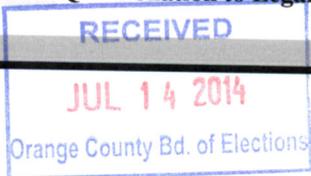
5. Total only this Page \$ 45.38

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)
 \$ 449.89

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)



In-Kind Contributions

Amendment
 Yes 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	
FRIENDS OF TALAC		1HDF00	
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
TALAC ASAD 1202 N GREENSBORO ST CARRBORO, NC 27510		<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
			\$ 538.42
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount	
Hosting - May	04/28/2014	\$ 18.95	
		\$	
		\$	
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
KATE MURPHY 506 N GREENSBORO ST #33 CARRBORO, NC 27510		<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	Kite - Invoiced Late
			d. Election Sum to Date
			\$ 17.70
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount	
Kite - Talal For Aldermen Promo	04/25/2014	\$ 17.70	
		\$	
		\$	
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 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
			\$
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount	
		\$	
		\$	
		\$	
4. Total only this Page		\$ 36.65	
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		\$	

