

# 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 <b>MARCOLOS FOR COMMISSIONER</b>		c. ID Number <b>THD 7W4</b>
b. Mailing Address (include City, State and Zip Code) <b>7207 SOUTHERN TRAIL CHAPER HILL, NC 27516</b>		d. Date Filed <b>7/10/2014</b>
		e. Phone Number <b>919-933-5562</b>

2. Report Year <b>2014</b>	3. Period Start Date (mm/dd/yy) <b>4/20/2014</b>	4. Period End Date (mm/dd/yy) <b>6/30/2014</b>	5. Treasurer Full Name <b>MARK WARREN MARCOLOS</b>
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<b>6. Type of Committee (Check One)</b> <input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> Legal Expense Fund		<b>9. Type of Report (check only one type of report from one category)</b> <b>Municipal</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special			<b>State/County</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input checked="" type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special		<b>Referendum</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special	
<b>7. Type of Fund (if applicable, check one)</b> <input type="checkbox"/> Booster Fund <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:		<b>10. Special Report Name</b>						
<b>8. Number of Fundraisers this Report</b>								

<b>11. Account Information</b> a. Financial Institution Full Name <b>YADKIN</b>				<b>11. Account Information</b> a. Financial Institution Full Name			
b. Purpose <b>CAMPAIGN EXPENSES</b>		c. Account Code <b>MFC</b>		b. Purpose		c. Account Code	
		d. Period Begin Balance <b>\$ 448.61</b>				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.

MARK WARREN MARCOLOS Mark Warren Marcolos 7/10/2014  
 Printed Name of Signer Signature of Appointed Treasurer Date

**FOR OFFICE USE ONLY**

Date Received:	<u>9/8/14</u>	Employee:	<u>SS</u>	<b>Delivery Method</b> <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training
Date Postmarked:	_____	Employee:	_____	
Date Scanned:	_____	Employee:	_____	
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.

**RECEIVED**

**SEP 08 2014**

Orange County Bd. of Elections

# 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	
MARCOLOS for Commissioner	2nd Quarter	TH07W4	
Start of Election Cycle: January 1, _____		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 448.61	\$
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals (CRO-1205)	\$	\$	\$ 4219.35
6) Contributions from Individuals (CRO-1210)	\$ 1314.35	\$	\$
7) Contributions from Political Party Committees (CRO-1220)	\$	\$	\$
8) Contributions from Other Political Committees (CRO-1230)	\$	\$	\$
9) Loan Proceeds (CRO-1410)	\$ 981.00	\$	\$ 1385.95
10) Refunds/Reimbursements to the Committee (CRO-1240)	\$	\$	\$ 1472.95
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)	\$	\$	\$ 5605.30
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$ 2295.35	\$	\$ 5692.30
<b>EXPENDITURES</b>			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)	\$ 2252.01	\$	\$ 5113.35
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)	\$ 491.95	\$	\$ 491.95
16) Refunds/Reimbursements from the Committee (CRO-1320)	\$	\$	\$
17) In-Kind Contributions (CRO-1510)	\$	\$	\$ 5605.3
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 2743.96	\$	\$ 5692.30
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 0	\$	\$ 0
<b>ADDITIONAL INFORMATION</b>			
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)	\$ 894.00	\$	\$
27) 48-Hour Notice Reports Sum (CRO-2220)	\$	\$	\$
28) Contributions to be Refunded (CRO-1215)	\$	\$	\$

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 DEC 8 2014  
 ORANGE COUNTY BOARD OF ELECTIONS  
 August 2008

# Contributions from Individuals

Pg 1 of 3

Amendment  
 Yes  No

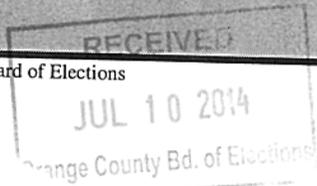
Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number	
MARCOPLOS FOR COMMISSIONER						THD 7WY	
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 STIEBEL 3222 HENDERSON FIELD RD. MEBANE, NC 27302				OWNER			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				RESTORATION WOODWORKS		\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	MFC	CK		4/28/2014	\$ 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	
ANDY GERSHUTZ 5504 HIDEAWAY DR. CHAPEL HILL, NC 27516				LAWYER			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				MOORE & VAN ALLEN LAW FIRM		\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	MFC	CK		4/30/2014	\$ 48.25		
<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 DEAR 207 WYNDHAM DR. CHAPEL HILL, NC 27516				EXEC. DIR.			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				PEOPLE OF FAITH AGAINST THE DEATH PENALTY		\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	MFC	CK		5/2/2014	\$ 101.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 199.25	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 1314.35	

CRO-1210

NC State Board of Elections

April 2007



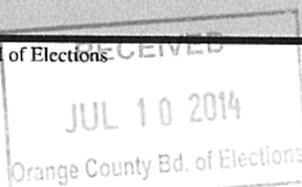
# Contributions from Individuals

Pg 2 of 3

Amendment  
 Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
MARCOPLOS FOR COMMISSIONER					THD 7W4	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) PAUL KILLOUGH 208 JUSTICE ST. CHAPEL HILL, NC 27516				<b>b. Job Title/Profession</b> RETIRED		<b>d. Comments</b>
				<b>c. Employer's Name/Specific Field</b>		
				<b>e. Election Sum to Date</b> \$ 30.00		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	MFC	CK		5/6/2014	\$ 30.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) CARLA ANTONNACIO 5206 NC HWY 86 CHAPEL HILL, NC 27514				<b>b. Job Title/Profession</b> PROFESSOR		<b>d. Comments</b>
				<b>c. Employer's Name/Specific Field</b> DUKE UNIV.		
				<b>e. Election Sum to Date</b> \$ 200.00		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	MFC	CK		5/12/2014	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) SOL + SANDI OSTERKATZ 3201 WINGED ELM LN, DURHAM, NC 27705				<b>b. Job Title/Profession</b>		<b>d. Comments</b>
				<b>c. Employer's Name/Specific Field</b>		
				<b>e. Election Sum to Date</b> \$ 25.00		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	MFC	CK		5/13/2014	\$ 25.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 155.00	
<b>5. Total of ALL CRO-1210 Pages</b> <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>					1314.35	



# Contributions from Individuals

Pg 3 of 3

Amendment  
 Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b> MARCOPLOS FOR COMMISSIONER	<b>2. ID Number</b> THD7W4
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<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) MARK MARCOPLOS 7207 SOUTHERN TRAIL CHAPEL HILL NC 27516	<b>b. Job Title/Profession</b> PRESIDENT	<b>d. Comments</b>	<b>e. Election Sum to Date</b> \$ 913.00
<b>c. Employer's Name/Specific Field</b> MARCOPLOS CONSTRUCTION INC.			

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	MFC	CK		4/30/2014	\$ 913.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) MATT FUNTER	<b>b. Job Title/Profession</b> FARMER	<b>d. Comments</b>	<b>e. Election Sum to Date</b> \$ 47.10
<b>c. Employer's Name/Specific Field</b> SELF			

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	MFC	CK		4/30/2014	\$ 47.10
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>b. Job Title/Profession</b>	<b>d. Comments</b>	<b>e. Election Sum to Date</b> \$
<b>c. Employer's Name/Specific Field</b>			

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"/>					\$

<b>4. Total only this Page</b>	\$ 960.10
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 1314.35

CRO-1210

NC State Board of Elections

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 JUL 10 2014  
 Orange County Bd. of Elections

April 2007





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

Kim Westbrook Strach  
 Executive Director

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

## Loan Proceeds Statement

This Statement is used to report detailed information about a new loan and is required to accompany the Loan Proceeds Form in the report for which the loan is initially disclosed. If the loan is from an individual, the lender's signature is required on this form.

This Statement is to be filed with the Election Board where the committee's reports are filed.

- Name of committee to receive loan: MARCOPLOS FOR COMMISSIONER
- Person or committee to make loan: MARK MARCOPLOS
- Date of loan to committee: 5/5/2014
- Name of lending institution and account number (source): \_\_\_\_\_
- Amount of loan: 87.00
- Description (if in-kind loan): CASH LOAN
- Names of all parties responsible for payment of loan (guarantors): \_\_\_\_\_
- Period of loan: 5 DAYS
- Rate of interest of loan: -
- Security pledged for loan: -

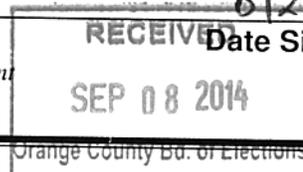
I, MARK MARCOPLOS, (Person lending money to committee) acknowledge that all of the information provided is complete, true, and accurate. I further understand I may not forgive a loan that has an outstanding balance to any source.

Maui Warren Marcuplo 8/21/2014  
 Signature of Lender Date Signed

Maui Warren Marcuplo 8/21/2014  
 Signature of Treasurer of Committee Date Signed

CRO-6100

Loan Proceeds Statement



July 2014



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

Kim Westbrook Strach  
Executive Director

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

## Loan Proceeds Statement

This Statement is used to report detailed information about a new loan and is required to accompany the Loan Proceeds Form in the report for which the loan is initially disclosed. If the loan is from an individual, the lender's signature is required on this form.

This Statement is to be filed with the Election Board where the committee's reports are filed.

- Name of committee to receive loan: MARCOLOS FOR COMMISSIONER
- Person or committee to make loan: MARK MARCOLOS
- Date of loan to committee: 4/30/2014
- Name of lending institution and account number (source):  
\_\_\_\_\_
- Amount of loan: \$ 894.00
- Description (if in-kind loan): CASH LOAN
- Names of all parties responsible for payment of loan (guarantors):  
\_\_\_\_\_  
\_\_\_\_\_
- Period of loan: 6 WEEKS
- Rate of interest of loan: -
- Security pledged for loan: -

I, MARK MARCOLOS, (Person lending money to committee), acknowledge that all of the information provided is complete, true, and accurate. I further understand I may not forgive a loan that has an outstanding balance to any source.

Mark Warren Marcoplo  
Signature of Lender 12/31/14  
Date Signed

Mark Warren Marcoplo  
Signature of Treasurer of Committee

CRO-6100

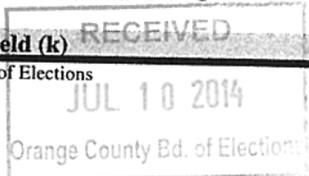
Loan Proceeds Statement



# Disbursements

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

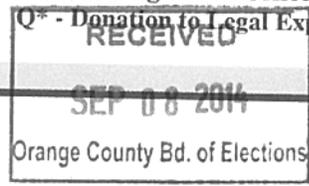
<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
MARCOLOS FOR COMMISSIONER						THD7WY	
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures			
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
NEWS OF ORANGE 104 E. KING ST. HILLSBOROUGH, NC 27278							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 650.36	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
MFC	CK	A	4/21/2014	\$ 233.58	AD		
				\$			
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
NEWS OF ORANGE 104 E. KING ST. HILLSBOROUGH, NC 27278							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 1179.35	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
MFC	CK	A	4/28/2014	\$ 528.99	AD		
				\$			
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
U.S. POSTAL SERVICE CHAPEL HILL, NC 27514							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 1003.05	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
MFC	CK	I	4/29/2014	\$ 954.05	<del>1003.05</del> MM		
				\$			
<b>5. Total only this Page</b>						\$ 1716.62	
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 2252.01	
<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>							
<b>7. Purpose Codes</b> (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**

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

<b>1. Committee Full Name (and Fund if applicable)</b> MARCOPUS FOR COMMISSIONER						<b>2. ID Number</b> THD 7W 4	
<b>3. Type of Disbursement</b> <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			
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i> SOLUTIONS ABOUND 169 BOONE SQ ST. HILLSBOROUGH, NC 27278				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
				<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b> \$ 2162.89	
<b>f. Account Code</b> MFC	<b>g. Form of Payment</b> CK	<b>h. Purpose Code</b> B	<b>i. Date (mm/dd/yyyy)</b> 4/30/2014	<b>j. Amount</b> \$ 183.23	<b>k. Required Remarks</b> ADVERTISING		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i> A BETTER IMAGE 1709 LEGION RD., #100 CHAPEL HILL, NC 27517				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
				<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b> \$ 352.06	
<b>f. Account Code</b> MFC	<b>g. Form of Payment</b> CK	<b>h. Purpose Code</b> B	<b>i. Date (mm/dd/yyyy)</b> 5/1/2014	<b>j. Amount</b> \$ 352.16	<b>k. Required Remarks</b> PRINTED A MAILER		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i>				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
				<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b> \$	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
				\$			
				\$			
<b>5. Total only this Page</b>						\$ 535.39	
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 2252.01	
<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>							
<b>7. Purpose Codes</b> <i>(List detailed expenditure code in (h.) above)</i>							
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)							



# Loan Repayments

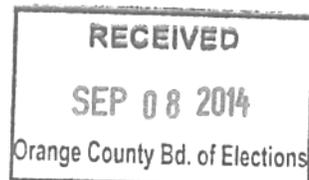
Use this form to report payments on an existing loan.

1. Committee Full Name (and Fund if applicable)				2. ID Number	
MARCOLOS FOR COMMISSIONER				THD7W4	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
MARK MARCOLOS 7207 SOUTHERN TRAIL CHAPEL HILL, NC 27516					
				c. Original Loan Date	
				5/5/2014	
				d. Original Loan Amount	
				\$ 87.00	
e. Remaining Loan Balance	f. Account Code	g. Form of Payment	h. Date (mm/dd/yyyy)	i. Repayment Amount	
\$		CK	5/12/2014	\$ 87.00	
\$				\$	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
MARK MARCOLOS 7207 SOUTHERN TRAIL CHAPEL HILL, NC 27516					
				c. Original Loan Date	
				3/7/2014	
				d. Original Loan Amount	
				\$ 404.95	
e. Remaining Loan Balance	f. Account Code	g. Form of Payment	h. Date (mm/dd/yyyy)	i. Repayment Amount	
\$			5/12/2014	\$ 404.95	
\$				\$ <del>404</del>	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
				c. Original Loan Date	
				d. Original Loan Amount	
				\$	
e. Remaining Loan Balance	f. Account Code	g. Form of Payment	h. Date (mm/dd/yyyy)	i. Repayment Amount	
\$				\$	
\$				\$	
4. Total only this Page				\$ 491.95	
5. Total of ALL CRO-1420 Pages <small>(This line must be on line 15 of Detailed Summary Page CRO-1100)</small>				\$ 491.95	

CRO-1420

NC State Board of Elections

December 2007





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

Kim Westbrook Strach  
 Executive Director

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

## Forgiven Loan Statement

This form is used to report a loan that has been forgiven by the lender. The lender's signature is required on this form and it must accompany the next filed report.

**This Statement is to be filed with the Election Board where the committee's reports are filed.**

<b>Name of Lender:</b>	MARK MARCOPLOS
<b>Committee receiving loan:</b>	MARCOPLOS FOR COMMISSIONER
<b>Date of loan:</b>	4/30/2014
<b>Amount of original loan:</b>	\$ 894.00
<b>*Amount of loan to be forgiven:</b>	\$ 894.00

I, MARK MARCOPLOS, do not wish to be reimbursed for the amount of the loan indicated above\* and will consider the amount loaned a contribution to the committee.

I understand and confirm no other parties are responsible for payment of this loan. I may not forgive a loan for which there is an outstanding balance owed to any source.

Mark Warren Marcoplos  
 Signature of Lender

Mark Warren Marcoplos  
 Signature of Committee Treasurer

