Disclosure Report Cover Amendment Use this form for general report and committee information, must be signed and submitted along with other detailed forms. Do not use this form to update information 1. Committee Information a. Full Name c. ID Number FRIENDS OF ALAN NORMAN QBC-115-b. Mailing Address (include City, State and Zip Code) d. Date Filed 568 OAK GROVE/CLOVER HILL CH ROAD LAWNDALE, NC 28090 01/11/2015 e. Phone Number (704) 538-1465 2. Report Year 3. Period Start Date (mm/dd/yy) 4. Period End Date (mm/dd/yy) 5. Treasurer Full Name 2014 10/19/2014 KRISTEN BENTON HAMRICK 12/31/2014 6. Type of Committee (Check One) 9. Type of Report (check only one type of report from one category) X Candidate Campaign Party Municipal State/County Referendum Joint Fundraiser ☐ PAC Organizational Organizational Organizational ☐ Referendum Legal Expense Fund Thirty-five day Quarterly Pre-referendum 7. Type of Fund (if applicable, check one) Pre-primary First ☐ Final ■ "Booster Fund" Pre-election Second Supplemental Final Building Fund Pre-runoff Third Annual Presidential Election Year Candidates Fund Semi-annual Fourth ☐ Special ■ NC Public Campaign Financing Fund Mid Year Semi-annual Year End Mid Year П 10. Special Report Name Other: Final Year End 8. Number of Fundraisers this Report П Special ☐ Final ☐ Special 3. Account Information 3. Account Information a. Financial Institution Full Name a. Financial Institution Full Name BB&T b. Purpose c. Account Code b. Purpose c. Account Code CAMPAIGN FINANCE 01 d. Period Begin Balance d. Period Begin Balance 54,963.04 \$ 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 sentor (01/11/2015 Printed Name of Signer Signature of Appointed Treasurer Date FOR OFFICE USE ONLY

1-12-15 Delivery Method Date Received: Employee: ☐ Normal Mail ☐ Registered Mail Date Postmarked: Employee: Hand Delivered Date Scanned: ☐ Electronically Filed Employee: ☐ Signer has not received Date Data Entered: Employee: mandatory training

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

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

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 ALAN NORMAN 2014 Fourth Quarter QBC-115--Start of Election Cycle: January 1, Total this Total this 2011 Reporting Period **Election Cycle** 4) Cash on Hand at Start 54,963.04 4,955.02 RECEIPTS 5) Aggregated Contributions from Individuals (CRO-1205) \$ 100.00 14,233.00 6) Contributions from Individuals (CRO-1210) \$ 350.00 \$ 64,086.00 7) Contributions from Political Party Committees (CRO-1220) \$ 0.00 \$ 0.00 8) Contributions from Other Political Committees (CRO-1230) \$ 100.00 \$ 600.00 9) Loan Proceeds (CRO-1410) \$ 0.00 \$ 4,000.00 (0) Refunds/Reimbursements to the Committee (CRO-1240) \$ \$ 0.00 470.00 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 2) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e) \$ 550.00 83,389.00 **EXPENDITURES** 13) Disbursements 13a) Operating Expenditures (CRO-1310) 14,420.69 40,560.34 13b) Contributions to Candidates/Political Committees (CRO-1310) \$ 0.00 0.00 13c) Coordinated Party Expenditures (CRO-1310) \$ 0.00 0.00 (4) Aggregated Non-Media Expenditures (CRO-1315) \$ 46.00 67.33 (5) Loan Repayments (CRO-1420) 0.00 \$ 0.00 (6) Refunds/Reimbursements from the Committee (CRO-1320) \$ \$ 0.00 4,470.00 17) In-Kind Contributions (CRO-1510) \$ \$ 0.00 2,200.00 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) \$ \$ 14,466.69 47,297.67 (Add lines 4 and 12 together, then subtract line 18) \$ 41,046.35 41,046.35 ADDITIONAL INFORMATION 20) Non-Monetary Gifts Given to Other Committees (CRO-1330) \$ 0.00 21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430) \$ 4,000.00 22) Debts and Obligations owed by the Committee (CRO-1610) \$ 0.00 23) Debts and Obligations owed to the Committee (CRO-1620) \$ 0.00 24) Account Transfers Within the Committee (CRO-1720) \$ 0.00 25) Administrative Support (CRO-1710) 0.00 0.00 26) Forgiven Loans (CRO-1440) \$ 0.00 \$ 0.00 27) 48-Hour Notice Reports Sum (CRO-2220) 0.00 \$ 0.00 28) Contributions to be Refunded (CRO-1215) \$ 0.00 0.00

Aggregated Contributions from Individuals Amendment ☐ Yes X No Optional form used to report NC Contributions From Individuals of \$50 or less 1. Committee Full Name (and Fund if applicable) 2. ID Number FRIENDS OF ALAN NORMAN QBC-115--3. Contributor Information a. Amend b. Account Code c. Form of Payment d. In-Kind Description e. Date (mm/dd/yyyy) f. Amount Add 01 Check Remove 10/20/2014 \$ 40.00 Add 01 Check 10/20/2014 Remove \$ 30.00 Add 01 Check 10/26/2014 \$ Remove 30.00 4. Total only this Page \$ \$100.00 5. Total of ALL CRO-1205 Pages \$ \$100.00 (This line must be on line 5 of Detailed Summary Page CRO-1100)

NC State Board of Elections

April 2007

CRO-1205

		rom Individual			Pg 1 of 1		Amendmen Yes	No.
Use thi	is form to report in	ndividual contribution	as over \$50 or c	ontributions	under \$50 if form CRO	1205	5 is not used	IM NO
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NC State Board of Elections

CRO-1210

Amendment

\$

\$100.00

April 2007

Contributions from Other Political Committees Pg 1 of ☐ Yes X No Use this form to report contributions from other candidate, referendum or PAC committees 1. Committee Full Name (and Fund if applicable) 2. ID Number FRIENDS OF ALAN NORMAN QBC-115--3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Type of Committee d. Comments (include city, state, & zip) Candidate X PAC NC HOME BUILDERS ASSOCIATION BUILD ☐ Referendum POLITICAL ACTION COMMITTEE c. Level Registered (Specify) Federal PO BOX 99090 County: X State RALEIGH, NC 27624 ■ Municipality: e. Election Sum to Date 100.00 f. Account Code g. Form of Payment h. In-Kind Description i. Date (mm/dd/yyyy) j. Amount 01 Check 10/29/2014 \$ 100.00 \$ \$ 4. Total only this Page \$ \$100.00 5. Total of ALL CRO-1230 Pages

NC State Board of Elections

(This line must be on line 8 of Detailed Summary Page CRO-1100)

CRO-1230

Disbursements	Dis	sement	8
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Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

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Pg __2 of

Amendment

5 Yes

No

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

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DIS	burs	em	ents

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3_	of	5_		Yes	M	No

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

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Disbursements

JAN 12 2015

		Amendme	ent
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X No Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

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SHELBY, NC 2	28152				☐ Federal		County				
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Disb	irsements
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Amendment

5 of _5 \ \tag{Yes} X No Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

	ll Name (and Fund	if applicable)						2. ID Nu	ımber
FRIENDS OF ALAN NORMAN						QBC-115			
3. Type of Disbur	manusmat (Dlassa		0 1210 6						
M Operating Expe	THE RESERVE OF THE PERSON NAMED IN COLUMN 2 IN COLUMN	use separate CR	U-1310 for	ns for eac	ch type	THE RESERVE OF THE PERSON NAMED IN		MARKET PARKET OF THE PARKET OF	
NAME AND ADDRESS OF THE OWNER, OF TAXABLE PARTY.		ributions to Candida	tes/Political (Committee	S	☐ Co	ordinat	ed Party E	expenditures
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(include city, state	e, & zip)								
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SHELBY, NC 2	8150			Federal	_	County			
			ш	State		Munici	pality:	e. Electio	on Sum to Date
								\$	245.00
f. Account Code g	g. Form of Payment	h. Purpose Code	i. Date (mr	n/dd/vvvv	i. Am	ount	k. Re	quired Re	marke
01	Check			0.10.0.10.0.0.0		AMPS			
					-	70.00	15171	IVII D	
					\$				
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	des (List detailed								
A* - Media	B* - Printin		C* - Fundr			D. To	Anoth	ner Candio	data
E - Salaries								Public Office Expenses	
T D							on to Legal Expense Fund		
O* Other				•	7.	Q -D	viiatiU	n to Lega	a Expense rund
* Codes require of	detailed explanation	in required rem	arks field	k)					
CRO-1310			tate Board of						December 2009

Aggregated	Non-Media	Expenditures	12 201
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	Amendment		
Page1_ of1_	☐ Yes 🗓	No	

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

		ort NC Non-Media d Fund if applicable)		of \$30 of less.		2 ID	Number		
FRIENDS OF ALAN NORMAN						QBC-115			
3. Payee Info	ormation								
	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/	уууу)	f. Amo	ount	g. Required Remarks	
Add Remove	01	Check	0	11/05/2014		\$	32.03	CAPS	
Add Remove	01	Electric Funds Tran	K	10/22/2014		\$	13.97	BANK CHECKS	
4. Total or	nly this Page					\$		46.00	
	ALL CRO-1 ust be on line 14 o	315 Pages f Detailed Summary Pa	ge CRO-1100)			\$		46.00	
6. Purpose	Codes (List o	detailed expenditur	re code in (d) a	bove)					
	B*	- Printing	c		D - 7	To Another Candidate			
E - Salari		- Equipment				* - Holding Public Office Expenses			
I - Postag		Penalties				- Donations to Legal Expense Fund			
O* - Oth	er			•				gar zapense i une	
* Codes	require detai	led explanation i	required ren	narks field (o)				

CRO-1315

NC State Board of Elections

December 2009

Outstanding	Loans
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Pg 1 of 1

Amendment

☐ Yes
▼ No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

	ittee Full Name (and Fund if applicable)				2. ID Number		
FRIENDS OF ALAN NORMAN					QBC-115		
	Information		dd 🗖 Rei	nove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b.	Job Title/Pro		d. Comments		
		S	HERIFF				
	IORMAN				2		
568 OAK GROVE CLOVER HILL CH RD					e. Start Date (mm/dd/yyyy)		
LAWNDALE, NC 28090		c. Employer's Name/Specific Field CLEVELAND COUNTY			10/16/2012		
							SHERIFF OFFICE
g. Rate	h. Security Pledged		i. Original	Loan Amount	j. Remaining L	oan Balance	
0.00%			\$	4,000.00	\$	4,000.00	
k. Full Name of Lending Institution					I. Loan Number		
4. Total	only this Page				0	1,000,00	
5. Total of ALL CRO-1430 Pages				\$	4,000.00		
	of ALL CKO-1450 Pages e must be on line 21 of Detailed Summary Page	e CRO-11	(00)		\$	4,000.00	
CRO-143			d of Elections			December 200	