

**TO: North Carolina Board of Elections
Campaign Finance Management & Investigations
Raleigh, North Carolina**

J. Morris Hand delivered
Received

Complaint:

MAR 17 2014

Campaign Finance

March 17, 2014

Re: Brian Brown

NC House of Representatives

**Narrative and Forward To
REVIEW QUESTIONS:**

To whom it may concern;

My name is Todd Bennett from Farmville, NC and I am a political activist within the Republican Party in my home county of Pitt. Recent political involvement of activists around the state volunteering their time and energy have assisted in compiling the information that follows. This foreword provided by myself are observations that I made while looking over the Campaign Finance reports of Representative Brian Brown of the NC House. I was led to search his campaign finance reports because of an ongoing research investigation by volunteer activists into "Pay to Play" within the NCGOP elected leaders. Specifically, a radical environmental group known as Coastal Conservation Association and their known membership having undue influence on legislative efforts and appointments to various regulatory agencies including, but not limited to the Division of Marine Fisheries. More specifically, the incestuous relationship between special interest group CCA, Governor McCrory, Speaker Tillis, and a certain group known as "The House Republican Caucus." The investigation led us to Rep. Brian Brown as a result of his efforts on the CCA's behalf that ran contrary to the interests of NC's sovereignty, access to our own public trust resources, as well as NC's ability to feed itself, without foreign imports, clean / high quality sea food as a source of protein. What happened as I began to search through Rep. Brown's finances caused so much confusion, I abandoned the original intent of the search of his records and simply wanted to try and understand what they meant.

Immediately upon glancing at the forms little things began to pop out to me as unusual. Some things somewhat harmless, but plainly violations none the less. The first thing that caught my eye was the repeated error of not recording the employment or field of occupation/profession of many of Rep. Brown's contributors. The information was simply omitted.

Then I began to have a very difficult time following the balances from one report to another. Ending balances from one report were frequently not the beginning balances for the next report. Radical changes in balances including negative balances seemed to just wipe out with the next report for beginning balances without an explanation that I could understand. Although other campaign reports had not caused me such problems in the past I thought perhaps I just didn't understand Brown's reporting style, that perhaps the answer was buried in paperwork, but I just couldn't put it together.

I then noted expenses, often paid via debit card, that I can only assume are not personal, for odds and ends that left one to wonder if the expenses were personal, business, or his campaign....purchases at Food Lion (for example) without accompanying explanation at all.

Another point that looked glaringly inaccurate were the in kind contributions listed from Henry Hinton of Inner Banks Media. While some are noted such as a lunch event (listed twice), nothing was indicated from the massive amount of free air time and publicity that Hinton has been showering on Rep. Brown. It is noteworthy that Hinton claims to have "hand picked" Brown and then uses his radio show / connections to everything Pirate or Established Republican leaders to lure in listeners. He then follows up with a love fest for his 'hand picked' candidate (Brown),

Speaker Thom Tillis, and Governor McCrory. Any mention of primary opposition or other candidates is to either be negative or to simply call them, 'the challenger.' I am at a loss at how a man owning an FCC license can be so blatantly in the tank and not at least claim some 'in kind contributions'.

My antenna went up and checked more reports. What began to jump out was a number of expenditures on Brown's reports to Rep Express. The expenditures were billed as 'Town Halls'. I'm not sure what constitutes a Town Hall, but they were four digit expenditures and the last "Town Hall" I heard about Rep. Brown having at 'Rep Express' was this past December and according to one attendee it was NOT a town hall. The occasion was a get together of certain supporters, including Hinton and there was NO question answer series with any "Constituents". I look forward to that report with interest. None of that notwithstanding, there are dates listed, Did the events happen?

Then in the 2012 third quarter and fourth quarters I noted reports continued to fail to give occupations throughout. Next of interest was a contribution by Ed Mooney (I thought Treasurer or perhaps resigned Treasurer) that looked very strange. All I can say is I could not understand it. Additional noteworthy items included multiple swearing in ceremonies of four figures on different dates not in January, expenditures to Rep Express for fundraisers, but could not tell what was raised at the event, and round number expenses to Rep Express for events such as 1800 dollars. Having been in the restaurant business in my past, I found 1800 an interesting amount on an approximately 75 person limit facility. Such a round number with sales taxes and city taxes included seemed odd.

The number of Rep Express expenses in one period of time was an inflated percentage of Brown's campaign expenditures. It appeared to be over two thirds at first estimates. Again, I'm not a math major and it may not even be illegal, but there has got to be some kind of ethical line somewhere in cashing in on your campaign machine with your company.

I also note Brown's original Treasurer resigned. I tried to send feelers out to him for information, but was not successful in obtaining a response. Perhaps your offices can be more influential.

Other interesting names also showed up, I believe related to the membership of "The House Republican Caucus", in what made me think of a bundling effort in reverse, and then rebundling (for lack of a better word) in Brown's Campaign. The records of those individual contributors and where they got the funds to give to Brown will be checked by volunteers when time permits. The name of the "Caucus" is a misnomer, in that a very small group of players are in control of any decision making on funding candidates and i do not believe all House Republicans have membership.

I have gone through Brian's Campaign reports and have more questions than answers. Some things are just sloppy, but others leave me scratching my head. How do they make a living? Could Rep Express even exist without the campaign? Are Rep Express and the political

campaign synonymous / symbiotic? How can the business survive when it is never open without an appointment if not for the political machine? Or does Rep. Brown have some really good family members that help out frequently when the chips are down, like I have myself when my kids are in need? Maybe Brown is independently wealthy and doesn't need any real income and the Representative's wage is just icing on his cake, I just don't know.

At any rate, enough flags had been set off in my mind to ask a few volunteer activists with strong math and line by line skills to give their say. Their combined efforts follow. They have asked that their names be withheld for various reasons and I am going to honor that in exchange for the best free/honest effort to understand the paperwork of Rep. Brian Brown that I could not understand. Follow the money line by line, realizing we are not lawyers or experts on the laws governing our elected officials. I just wanted to understand his reports. Why are his reports so difficult in comparison with reports I had seen from other politicians? They have given their best honest efforts and ask that professionals that do understand the laws and the accepted accounting practices of campaign financing conduct a thorough and transparent audit of Rep. Brown, Rep Express, and the couple's finances for explanation. Report Follows.

Sincerely,

Todd Bennett
Farmville, NC

SOSID: 919736
 Date Filed: 6/1/2007 4:09:00 PM
 Elaine F. Marshall
 North Carolina Secretary of State
 C200715000322

**State of North Carolina
 Department of the Secretary of State**

**Limited Liability Company
 ARTICLES OF ORGANIZATION**

Pursuant to §57C-2-20 of the General Statutes of North Carolina, the undersigned does hereby submit these Articles of Organization for the purpose of forming a limited liability company.

1. The name of the limited liability company is: Rep Express LLC
2. If the limited liability company is to dissolve by a specific date, the latest date on which the limited liability company is to dissolve: (*If no date for dissolution is specified, there shall be no limit on the duration of the limited liability company.*) _____
3. The name and address of each person executing these articles of organization is as follows:
(State whether each person is executing these articles of organization in the capacity of a member, organizer or both).
LegalZoom.com, Inc., as Organizer
7083 Hollywood Blvd., Suite 180
Los Angeles, CA 90028
4. The street address and county of the initial registered office of the limited liability company is:
 Number and Street 2237 Penncross Drive
 City, State, Zip Code Greenville, North Carolina 27834 County Pitt
5. The mailing address, *if different from the street address*, of the initial registered office is:

6. The name of the initial registered agent is: Brian M. Brown
7. Principal office information: (*Select either a or b.*)
 - a. The limited liability company has a principal office.
 The street address and county of the principal office of the limited liability company is:
 Number and Street _____
 City, State, Zip Code _____ County _____
 - b. The limited liability company does not have a principal office.

8. Check one of the following:

(i) **Member-managed LLC**: all members by virtue of their status as members shall be managers of this limited liability company.

(ii) **Manager-managed LLC**: except as provided by N.C.G.S. Section 57C-3-20(a), the members of this limited liability company shall not be managers by virtue of their status as members.

9. Any other provisions which the limited liability company elects to include are attached.

10. These articles will be effective upon filing, unless a date and/or time is specified:

This is the 23 day of May, 20 07.



Signature

Tamar Baloshian, Assistant Secretary, LegalZoom.com, Inc., Organizer

Type or Print Name and Title

NOTES:

1. Filing fee is \$125. This document must be filed with the Secretary of State.

CORPORATIONS DIVISION
(Revised January 2002)

P.O. Box 29622

RALEIGH, NC 27626-0622
(Form L-01)

State of North Carolina
Department of the Secretary of State

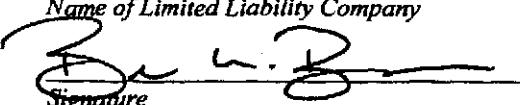
Limited Liability Company
AMENDMENT OF ARTICLES OF ORGANIZATION

Pursuant to §57C-2-22 of the General Statutes of North Carolina, the undersigned limited liability company hereby submits the following Articles of Amendment for the purpose of amending its Articles of Organization.

1. The name of the limited liability company is: Rep Express LLC
2. The text of each amendment adopted is as follows (attach additional pages if necessary):
Raymond S. Kent is to be added as a Member as of 8/1/2007
Kathleen A. Kent is to be added as a Member as of 8/1/2007

3. (Check either a or b, whichever is applicable)
 - a. The amendment(s) was (were) duly adopted by the unanimous vote of the organizers of the limited liability company prior to the identification of initial members of the limited liability company.
 - b. The amendment(s) was (were) duly adopted by the unanimous vote of the members of the limited liability company or was (were) adopted as otherwise provided in the limited liability company's Articles of Organization or a written operating agreement.
4. These articles will be effective upon filing, unless a date and/or time is specified: _____

This the 1 day of August, 20 07.

Rep Express LLC
Name of Limited Liability Company

Signature

Brian M. Brown - Member
Type or Print Name and Title

NOTES:

1. Filing fee is \$50. This document must be filed with the Secretary of State.

**DETAIL EVALUATION AND QUESTIONS
ON BRIAN BROWN CAMPAIGN**

REPORTS & COMPLAINT:

North Carolina Elections Board
CAMPAIGN FINANCE AUDIT DEPARTMENT
Raleigh, North Carolina

REGARDING: COMPLAINT REQUEST FOR INVESTIGATION OF
BRIAN BROWN, HOUSE OF REPRESENTATIVES
DISTRICT 9, Pitt County, North Carolina

TO WHOM IT MAY CONCERN:

This is a request for investigation and "audit" as my assumptions may not be correct, surely, the indicator, is that the REPORTS, herein stated, lack the information required, per Campaign Contributors, with the Title/Position, and the Employer/Specified Field, for the donations I believe, for the majority of supporters, and most do not have the UNITED TOTALS, to be able to review the entire contributions do not exceed State limits for specific years, being 2013, and increase, 2014 years.

In addition, the reports indicate, ENDING BALANCE, LINE #19, is not reported correctly, on "most reports" or very confusing to follow and understand. In addition, NEGATIVE BALANCES, as reported in REPORT, dated 4/22/2012 to 6/30/2012, shows NEGATIVE \$---2864.68, but it does not appear, on the continuous monthly report, 7/01/2012 to 10/20/2012, which is concerning and NEGATIVE BALANCES can not be on Campaign Finance Forms. MORE REPORTS SHOW NEGATIVE BALANCES, or disappearing balances, 'out of the blue balances'.

Transparency, and correct information is when the reports indicate ZERO beginning balance, \$3,189.67 contributions by individuals, LINE ITEM 6, FORM CRO-1100, should have been LINE ITEM #6, being \$1300; LINE ITEM #10, REFUNDS, REIMBURSEMENTS TO THE COMMITTEE, being \$1889.67 a CASH CONTRIBUTION. Problem is NO CASH exceeding \$50.00 can be accepted and reported, and the alleged \$1889.67 must be in verifiable form.

In addition, LINE 13) DISPURSEMENTS, ITEM 13a) OPERATING EXPENSES, \$6,054.35, can not possibly exist, since the NEGATIVE of \$2864.68 alleges some checks DID NOT CLEAR THE BANK, HOLD CHECKS (KITING CHECKS), or FALSE AND MISLEADING REPRESENTATIONS, on "DISPURSEMENT FORM, CRO-1310. Therefore an AUDIT of all receipts, disbursements, and representations are surely in order, based on his report, and others.

FIND, in the specifics, as attached, the REPORTS, and those suspect issues we are requesting the State Board of Elections, CAMPAIGN FINANCE, review in detail, and ask Representative Brian Brown, to disclose by opening his personal checking account bank statements, bank card receipts, campaign finance account, and verifications of disbursements by related individuals and companies for transparency, including his company, (WITH PARTNERS) REP EXPRESS.

Certainly we can not be conclusive of other campaign violations, in addition to those of insufficient information, totals being transparent in representing those contributions, and totals of fact, not "lost from one report to the next". We are simply asking for transparency in the reports, and abiding within Campaign Finance Manual Guidelines as a elected official and as one prospective for another term.

Respectfully submitted, best of my knowledge, belief, and opinion, this information is herein submitted, with request for review and audit. THIS NEEDS IMMEDIATE ATTENTION, as the citizens in Pitt County, NEED TO KNOW BEFORE THEY VOTE, in May, 2014, Primary if there are CAMPAIGN VIOLATIONS, broken laws, as it appears.



CAMPAIN FINANCE COMPLAINT FILER

ADDRESS: 4105 E church St

Forville NC 27828

DATE: 3-17-14

NOTARY STATEMENT:

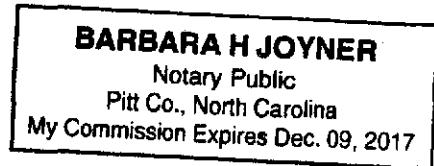
NORTH CAROLINA
PITT COUNTY

I, Barbara H Joyner, a Notary of this County, do hereby attest, the referenced individual, Marshall Todd Bennett

Did personally appear before me this day, 17 day of March, 2014, and sign this document.

Barbara H Joyner _____ (SEAL)

My Commission Expires: 6-9-17



**REPORT 4/22/2012 - 6/30/2012 CAMPAIGN FINANCE for
BRIAN BROWN.**

Stated within the letter herein. (LETTER SUMMARY)

**REPORT 7/01/2012 -- 10/20/2012 CAMPAIGN FINANCE for
BRIAN BROWN**

1. Complete information on contributors is missing as represented in prior report, LINE ITEM #6. as required – FORM CRO -1100; FORM CRO -1210 disclosures of JOB TITLE/PROFESSION (a. (b); and (a (c) information.
2. NEGATIVE BALANCE, ---\$2,864.8 was changed to positive \$16.00 on FORM CRO-1100, ITEM #4.
3. NO CAMPAIGN FINANCE REPORTS can show, ENDING or BEGINNING “NEGATIVE BALANCE”. 4/22/2012 – 6/30/2012 violates this, and this REPORT, shows \$16.00 POSITIVE, with no accounting to the NEGATIVE BALANCE, and checks represented as paid, that certainly are not accounted for. FROM CRO-1310.
4. In KIND, CONTRIBUTIONS show \$22,106.41 and as LINE ITEM #7, which appear to be correct.
5. LINE ITEM #19, FORM CRO-1100 appears to be incorrect at \$11,260.19, as the \$16.00 is not the carry over, but NEGATIVE, \$2864.68 would indicate the balance of ITEM 19 as “\$8,379.51” as the correct balance, not as represented.

**REPORT 10/21/2012 - 12/31/2012 CAMPAIGN FINANCE for
BRIAN BROWN**

1. Complete information on contributors is missing as represented in prior Report, LINE ITEM #6 - FORM CRO-1100, as required, and FORM CRO-1210. (a) (b), (c). including running totals of the individual contributions and they not exceed the state requirements or limits.
 2. BALANCE of LINE ITEM #4, FORM CRO-1100 appears to be suspect As the balance should be \$8,379.51, if one would "remember the negative \$2864.68 applied. THIS NEEDS VERIFICATIONS.
 3. FORM CRO-1100, LINE ITEM 12, is to combine LINE ITEM, THIS REPORT, (6), 8, 9 to achieve ITEM 12, which is represented as \$18,545.00 which is not true, since \$11,260.00 CASH FROM THE START, is not correct; and is added to achieve the improper balance Reported.
 3. The true balance of LINE ITEM 12, FORM CRO-1100, may be more \$7,285.00 not as stated \$18,545.00.
 4. FORM CRO-1100, \$22,695.58, ITEM 13 (a) plus ITEM 14, #15, indicating \$25,865.37, however, would be deducted from LINE ITEM (4) FORM CRO-1100 plus \$7,285.00 LINE ITEM 12, indicating total of \$15,664.51 and deducting line item \$25,865.37 would leave a negative of --- NEGATIVE \$10,200.86, and not as represented, POSITIVE \$3,939.63. as CAMPAIGN FINANCE REPORTS indicate.
 5. In addition, the \$22,695.58 OPERATING EXPENSES, ITEM 13 (a) indicates, disbursements, FORM CRO-1310, that appear misrepresentations or need VERIFICATIONS and AUDIT.
-

**REPORT 1/01/2013 - 06/30/2013 CAMPAIGN FINANCE for
BRIAN BROWN.**

1. FORM CRO-1100, item 4, CASH ON HAND, is reported as \$55.29, But the prior REPORT, reported, \$15,664.51, ITEM 19, CASH ON HAND, and it disappeared, EVEN INCORRECT, to \$55.29, is very Troubling to follow, and appears suspect.

Where did the alleged \$15,664.51 go from end of 2012, to January 1, 2013, and why \$55.29?

The real balance, assumed, as best the reviewer can indicate, would Be NEGATIVE \$10,200.86, ITEM 19, CASH ON HAND, or lack Of CASH.....where did it go?

2. Cash on hand, could not be \$55.29, and suspect.
3. Contributions, ITEM 6, indicates \$6000.00 and needs the information Per ITEM 13, a, b, and c, e.
4. Contributions from other political parties, \$4000, ITEM 8, reaching TOTAL of ITEM 12, as \$10,000.00 appears correct.
5. EXPENSES, operating is represented, \$497.75, ITEM 13(a).
6. PROBLEM, if the CASH ON HAND, ITEM 4, was NEGATIVE \$10,200.86, minus ITEMS 6, 8, or ITEM combined #10, then the balance appears, NEGATIVE \$9,703.11 and not POSITIVE \$9,557.54.

TOTALS can must be united from prior reports, regardless of Year, it is believed, and therefore, creating a new \$55.29, and Not accounting for it, appears CAMPAIGN FINANCE violations.

**REPORT 7/01/2013 - 12/31/2012 CAMPAIGN FINANCE for
BRIAN BROWN.**

1. Same, filling in CAMPAIGN FINANCE information for contributions, FORM CRO-1210, including a, b, and c, individual info and totals (e) running totals, appear missing on all reports, some, but most are not written in accurately.
2. CASH ON HAND IS INCORRECT, or suspect, which appears to be NEGATIVE \$10,200.86, based on operating expenses, and income.
3. CASH ON HAND from prior report, represented as \$9,557.54, Item #4, should be NEGATIVE \$ 9,703.11, causing serious concerns for the REPORT as presented.
4. RECEIPTS, of the above referenced dates, indicate LINE ITEM 6 Being \$14,250.00; ITEM 8 being \$3,750.00; and ITEM 8 being \$3,750.00 totaling \$23,000.70 ITEM 12, TOTAL RECEIPTS.
5. ITEM #12 added to item #4, would indicate \$13,296.89 that has to pay, ITEM 13 DISPURSEMENTS, FORM CRO -1310 being \$8,326.17 ITEM 13 (a) and 13 (b) \$8,300.00 CONTRIBUTIONS TO CANDIDATES, totaling \$16,681.93.
6. Problem, Line item 12, plus Item 4, equals \$13,296.89 and would continue to leave a negative, of NEGATIVE \$3,384.42 instead of REPORTING, ITEM 19, CASH ON HAND, of \$15,876.31.

Certainly, without being a staff of CAMPAIGN FINANCE, it is Only a "RED FLAG" that TOTALS DISAPPEAR from one report To the next, and moneys swap, or appear to "APPEAR, and DISAPPEAR at will."

7. Indicator of NEGATIVE, "again" is continuous violations, and cause of concern for "ALL REPRESENTATIONS" on donations/contributions and DISPURSEMENTS, and reason to audit all accounts, and related, being the following:
 - BRIAN BROWN PERSONAL ACCOUNT.
 - BRIAN BROWN - REP EXPRESS ACCOUNT ALL.
 - CAMPAIGN FINANCE REPORTS.
 - ALL DONATIONS, DEBIT CARDS (ALL ACCTS) and all related.....DISPURSEMENTS, by CHECK.

SUMMARY:

This concludes 2012, which is not an election cycle. However, Mr. BROWN AND HIS PARTNERS, business, REP EXPRESS, did have some accounts, which the following:

9/02/2012	\$ 382.79
8/30/2012.....	158.20
8/30/2012.....	127.60
10/11/2012.....	380.90
10/24/2012.....	501.48
12/10/2012.....	1,500.00
12/10/2012.....	1,500.00
12/10/2012.....	1500.00
10/22/2012.....	501.48

**TOTALING.....\$ 6,552.45 (based ON 3
DUPLICATIONS IT APPEARS, BUT USED "per page" TOTALS.**

With a capacity of 75 PEOPLE, REP EXPRESS building, it would indicate, a large variety, that would be OWNER - BILLED OUT, especially, when a PREVIOUS CHECK, \$1889.67 was to US FOODS, and shows some unique floating of representations, indicating an AUDIT IS IN ORDER by State Board of Elections, if these things are as it appears.

EVIDENCE AND REPORTS SUMMARY:

Each REPORT is attached, and listed as EXHIBITS, as follows:

EXHIBIT A.....REPORTS 4/22/2012 -- 6/30/2012

EXHIBIT B.....REPORTS 7/01/2012 -- 10/20/2012

EXHIBIT C.....REPORTS 10/21/2012 --12/31/2012

EXHIBIT D.....REPORTS 1/01/2013 -- 6/30/2013

EXHIBIT E.....REPORTS 7/01/2013 -- 12/31/2013

Each, the REVIEWER can review, and evaluate, but the elements of information, missing, as required, duplicated, or simple balances, CASH ON HAND, ITEM 19, of REPORT FORM CRO -1100 is very troubling, and bears a AUDIT, of all accounts, and related, accounts.

REP EXPRESS, in 2013, the following purchases show up on DISPURSEMENTS, which in some reports, represent about 76% of the OPERATING EXPENSES, which should be troubling, seat capacity of 75, and interesting would be the FOODS PURCHASED, in the REP EXPRESS, accounting.

REP EXPRESS DISPURSEMENTS from BRIAN BROWN CAMPAIGN:

7/2/2013.....	\$ 2,241.46
10/14/2013.....	2,275.00
11/6/2013.....	115.93
11/20/2013.....	1,800.00

TOTALING.....\$ 6,432.39

NOTICE: of the alleged, \$8,326.17 OPERATING EXPENSES, 76% is REP EXPRESS, and 24% is other DISPURSEMENTS, which appear SUSPECT. ITEM 13 (a) FORM CRO -1100.

The end result of this REPORT, can only be determined, in understanding, if the balances, at the end of REPORTS, can disappear, with new ones appearing.

Information and Belief "
In 2012/2013, Representative Brown, "built a approximate \$40,000 addition to his home", without building permits, as required pursuant to ORDINANCE 12, per BUILDING PERMITS, and G.S. 153A, Counties, requirements. This is of concern for accounting for the MONEY to pay the contractors, and WHY NO PERMIT, and even if the CONTRACTORS were paid as agreed.

REP EXPRESS, per the Secretary of State, have "partners", husband and wife, others and the TAX RETURNS, both personal, and business related, should be audited by State Bureau of Elections, for any material misrepresentation of CAMPAIGN FINANCE, appears to be very serious for whatever reasons.

In the elements, of concern, this citizen, has reviewed the data, asked questions of ELECTIONS people, local, and now submit this for review. Surely, floating balances that disappear, even by representations, CAN NOT BE GOOD CAMPAIGN FINANCE MANAGEMENT.

However, it leads the researcher, that prompts this request for investigation, to answer the question, IF THIS IS SEEN, WHAT MORE IS NOT SEEN, and why the balances, simply do not add up from REPORT TO REPORT.

Thank you for your time, and it is our hope, that a clear answer is forth coming, under TIME IS OF THE ESSENCE, since CAMPAIGN FRAUDS, can not be in a candidate that seeks a trust of those he represents. ASK THE QUESTIONS, but require DOCUMENTS, bank statements, food lists, to see if Representative BROWN, has "steered profit to his REP EXPRESS" that is usually open by appointment and what is his personal source of paying bills, without substantial "creative income" in these troubling times for all of us financially in North Carolina.

Our hope is answers, and if our assumptions are not completely correct, perhaps our hope is that enough problems are pointed out, as suspect and concerns, it prompts the State Board of Elections, to review more careful these type of things, and see CORRECT CAMPAIGN FINANCE REPORTS are required, by law, manual, and in good faith.

RESPECTFULLY SUBMITTED, as signed and notarized, herein in this report.

THE END. *MTB*

PLUS EXHIBITSA.....thru E, CAMPAIGN REPORTS.

EXHIBITS.....

**BRIAN BROWN, HOUSE of REPRESENTATIVES
DISTRICT 9**

**James E. Mooney, II
Treasurer**

BRIAN BROWN, NC HOUSE

2013 CAMPAIGN FINANCE REPORTS

EXHIBITA

Reports 4/22/2012 – 6/30/2012

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 BRIAN BROWN FOR HOUSE	Received		c. ID Number
b. Mailing Address (include City, State and Zip Code) P.O. BOX 8053 GREENVILLE, NC 27858	Campaign Finance		d. Date Filed 07/11/2012
		e. Phone Number (252) 414-3943	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2012	04/22/2012	06/30/2012	JAMES EDWARD MOONEY II
6. Type of Committee (Check One)		7. Type of Report (check only one type of report from this category)	
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund		Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> Thirty-five day <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Pre-primary <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Pre-election <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Year End <input type="checkbox"/> Year End <input type="checkbox"/> Semi-annual <input type="checkbox"/> Final <input type="checkbox"/> Final <input type="checkbox"/> Mid Year <input type="checkbox"/> Special <input type="checkbox"/> Special	
7. Type of Fund (if applicable check one)		Referendum <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	
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:		10. Special Report Name	
8. Number of Fundraisers this Report			
1			
3. Account Information			
a. Financial Institution Full Name			
BRIAN BROWN FOR HOUSE			
b. Purpose		c. Account Code	
CAMPAIGN FUND MANAGEMENT		1650	
		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			
<u>James E. Mooney II</u> Printed Name of Signer		<u>James E. Mooney II</u> Signature of Appointed Treasurer	
		07/11/2012 Date	
FOR OFFICE USE ONLY			
Date Received:	7/12/12	Employee:	<u>GJ</u>
Date Postmarked:	No PM	Employee:	<u>GW</u>
Date Scanned:	7/12/2012	Employee:	<u>JWS</u>
Date Data Entered:		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			
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
BRIAN BROWN FOR HOUSE	2012 Second Quarter	
Start of Election Cycle: January 1, 2012	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	\$ 0.00	\$ 0.00
RECEIPTS		
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 0.00	\$ 0.00
6) Contributions from Individuals (CRO-1210)	\$ 3,189.67	\$ 3,189.67
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)	\$ 0.00	\$ 0.00
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)	\$ 3,189.67	\$ 3,189.67
EXPENDITURES		
13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$ 6,054.35	\$ 6,054.35
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)	\$ 0.00	\$ 0.00
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)	\$ 0.00	\$ 0.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 6,054.35	\$ 6,054.35
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ (2,864.68)	\$ (2,864.68)
ADDITIONAL INFORMATION		
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$ 0.00	
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

→ Should be
1300.00

→ Should be
1889.67

- Cannot be
negative
- 2864.68

Contributions from Individuals

Pg 1 of 2 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. Total Amount Received			
BRIAN BROWN FOR HOUSE					
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) JEFF BEAMAN 233 Orton Dr GREENVILLE, NC 27858					
		b. Job Title/Profession	d. Comments		
		c. Employer's Name/Specific Field			
		e. Election Sum to Date			
		\$ 500.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	
<input type="checkbox"/>	1650	Check		05/01/2012	
<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) BRIAN BROWN 412 Knoll Cr GREENVILLE, NC 27858					
		b. Job Title/Profession	d. Comments		
		PRESIDENT	THIS WAS A REIMBURSEMENT FOR AN ACCIDENTAL DISBURSEMENT OF		
		c. Employer's Name/Specific Field	Rep Express Catering		
		e. Election Sum to Date			
		\$ 1,889.67			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	
<input type="checkbox"/>	1650	Cash		06/04/2012	
<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) BENJAMIN HARDY 4221 NC HWY. 258 N LA GRANGE, NC 28551					
		b. Job Title/Profession	d. Comments		
		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)	
<input type="checkbox"/>	1650	Check		05/10/2012	
<input type="checkbox"/>				\$	
<input type="checkbox"/>				\$	
4. Total only this Page					\$ 2,489.67
5. Total of ALL CRO 1210 Pages (This line must be on the 5 of Detailed Summary Page CRO-1200)					\$ 3,189.67

*Ad Reports
MOST
not filled
IN*

*many
not accurate*

*Can not
give cash
more than
\$50*

Contributions from Individuals

Pg 2 of 2 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 Identification)			2. ID Number		
BRIAN BROWN FOR HOUSE					
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) PARKER OVERTON 3933 Mobleys Bridge Rd Grimesland, NC 27837					
b. Job Title/Profession c. Employer's Name/Specific Field d. Comments 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"/>	1650	Check		05/08/2012	\$ 200.00
<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) POLLY PILAND 3910 Fernwood LN GREENVILLE, NC 27834					d. Comments
					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"/>	1650	Check		05/01/2012	\$ 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) CHRIS TAYLOR 605 Kensington Dr GREENVILLE, NC 27858					d. Comments
					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"/>	1650	Check		05/01/2012	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 700.00
5. Total of All CRO-1210 Pages (This line must be on line 6 of Detailed Statement of Receipts and Expenditures)					\$ 3,189.67

Disbursements

Amendment

Pg 1 of 3 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) BRIAN BROWN FOR HOUSE				2. ID Number	
3. Type of Disbursement <small>(Please see reverse CRO-1310 form for detailed instructions)</small>					
<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) COASTAL POLITICAL STARTEGIES NC		b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		d. Comments e. Election Sum to Date \$ 2,450.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1650	Check	K	05/03/2012	\$ 450.00	POLITICAL CONSULTING SERVICES
1650	Check	O	05/30/2012	\$ 2,000.00	POLITICAL CONSULTING
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) ASHTON GODWIN NC		b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		d. Comments e. Election Sum to Date \$ 1,000.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1650	Check	O	05/09/2012	\$ 850.00	TRAINING
1650	Check	O	05/10/2012	\$ 150.00	TRAINING
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) MICHAELS GREENVILLE, NC 27858		b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		d. Comments e. Election Sum to Date \$ 6.39	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1650	Debit Card		05/08/2012	\$ 6.39	OFFICE SUPPLIES
5. Total only this Page \$ 3,456.39					
6. Total of ALL CRO-1310 Pages					
<small>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</small> <small>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</small> <small>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</small>					
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					
<small>* Codes require detailed explanation in required remarks field (k)</small>					

CRO-1310

NC State Board of Elections

December 2009

With -2864.68 -
How was it paid?
Check cleared Date?

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) BRIAN BROWN FOR HOUSE		2. ID Number																			
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 <table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Coordinated Committee Name</td> <td>c. Comments</td> </tr> <tr> <td>N.C. REPUBLICAN HOUSE CAUCUS NC</td> <td></td> <td></td> </tr> <tr> <td></td> <td>c. Level Registered (Specify)</td> <td></td> </tr> <tr> <td></td> <td><input type="checkbox"/> Federal <input type="checkbox"/> County:</td> <td></td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:</td> <td>e. Election Sum to Date</td> </tr> <tr> <td></td> <td></td> <td>\$ 300.00</td> </tr> </table>				a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Comments	N.C. REPUBLICAN HOUSE CAUCUS NC				c. Level Registered (Specify)			<input type="checkbox"/> Federal <input type="checkbox"/> County:			<input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Sum to Date			\$ 300.00
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Comments																			
N.C. REPUBLICAN HOUSE CAUCUS NC																					
	c. Level Registered (Specify)																				
	<input type="checkbox"/> Federal <input type="checkbox"/> County:																				
	<input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Sum to Date																			
		\$ 300.00																			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)																		
1650	Check	G	05/21/2012																		
			\$ 300.00																		
			\$																		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Coordinated Committee Name</td> <td>c. Comments</td> </tr> <tr> <td>O'CHARLEYS GREENVILLE, NC 27858</td> <td></td> <td></td> </tr> <tr> <td></td> <td>c. Level Registered (Specify)</td> <td></td> </tr> <tr> <td></td> <td><input type="checkbox"/> Federal <input type="checkbox"/> County:</td> <td></td> </tr> <tr> <td></td> <td><input type="checkbox"/> State <input type="checkbox"/> Municipality:</td> <td>e. Election Sum to Date</td> </tr> <tr> <td></td> <td></td> <td>\$ 40.78</td> </tr> </table>				a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Comments	O'CHARLEYS GREENVILLE, NC 27858				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			\$ 40.78
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Comments																			
O'CHARLEYS GREENVILLE, NC 27858																					
	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																			
		\$ 40.78																			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)																		
1650	Debit Card		05/08/2012																		
			\$ 40.78 BUSINESS LUNCH																		
			\$																		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Coordinated Committee Name</td> <td>c. Comments</td> </tr> <tr> <td>PIP PRINTING GREENVILLE, NC 27858</td> <td></td> <td></td> </tr> <tr> <td></td> <td>c. Level Registered (Specify)</td> <td></td> </tr> <tr> <td></td> <td><input type="checkbox"/> Federal <input type="checkbox"/> County:</td> <td></td> </tr> <tr> <td></td> <td><input type="checkbox"/> State <input type="checkbox"/> Municipality:</td> <td>e. Election Sum to Date</td> </tr> <tr> <td></td> <td></td> <td>\$ 337.05</td> </tr> </table>				a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Comments	PIP PRINTING GREENVILLE, NC 27858				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			\$ 337.05
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Comments																			
PIP PRINTING GREENVILLE, NC 27858																					
	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																			
		\$ 337.05																			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)																		
1650	Debit Card		05/09/2012																		
			\$ 337.05 CAMPAIGN LITERATURE																		
			\$																		
5. Total only this Page \$ 677.83																					
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) \$ 6,054.35																					
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

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 Part if applicable) BRIAN BROWN FOR HOUSE		2. ID Number																					
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 <table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Coordinated Committee Name</td> <td colspan="2">d. Comments</td> </tr> <tr> <td>U.S.FOODS NC</td> <td></td> <td colspan="2"></td> </tr> <tr> <td></td> <td>c. Level Registered (Specify)</td> <td colspan="2"></td> </tr> <tr> <td></td> <td><input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:</td> <td colspan="2">e. Election Sum to Date</td> </tr> <tr> <td></td> <td></td> <td colspan="2">\$ 1,889.67</td> </tr> </table>				a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments		U.S.FOODS NC					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				\$ 1,889.67	
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments																					
U.S.FOODS NC																							
	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																					
		\$ 1,889.67																					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)																				
1650	Check	O	06/01/2012																				
			\$ 1,889.67																				
			ACCIDENTAL																				
			S DISPURSEMENT OF																				
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Coordinated Committee Name</td> <td colspan="2">d. Comments</td> </tr> <tr> <td>STAPLES GREENVILLE, NC 27858</td> <td></td> <td colspan="2"></td> </tr> <tr> <td></td> <td>c. Level Registered (Specify)</td> <td colspan="2"></td> </tr> <tr> <td></td> <td><input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:</td> <td colspan="2">e. Election Sum to Date</td> </tr> <tr> <td></td> <td></td> <td colspan="2">\$ 26.17</td> </tr> </table>				a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments		STAPLES GREENVILLE, NC 27858					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				\$ 26.17	
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments																					
STAPLES GREENVILLE, NC 27858																							
	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																					
		\$ 26.17																					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)																				
1650	Debit Card		05/01/2012																				
			\$ 13.36																				
			OFFICE SUPPLIES																				
1650	Debit Card		05/04/2012																				
			\$ 12.81																				
			OFFICE SUPPLIES																				
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Coordinated Committee Name</td> <td colspan="2">d. Comments</td> </tr> <tr> <td>USPS GREENVILLE, NC 27858</td> <td></td> <td colspan="2"></td> </tr> <tr> <td></td> <td>c. Level Registered (Specify)</td> <td colspan="2"></td> </tr> <tr> <td></td> <td><input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:</td> <td colspan="2">e. Election Sum to Date</td> </tr> <tr> <td></td> <td></td> <td colspan="2">\$ 4.29</td> </tr> </table>				a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments		USPS GREENVILLE, NC 27858					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				\$ 4.29	
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments																					
USPS GREENVILLE, NC 27858																							
	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																					
		\$ 4.29																					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)																				
1650	Debit Card		05/31/2012																				
			\$ 4.29																				
			POSTAL EXPENSE																				
			\$																				
5. Total only this Page \$ 1,920.13																							
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) \$ 6,054.35																							
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)																							

James Mooney
453 Stone Gate Drive
Greenville, NC 27858
July 5, 2012

Tonya Bowen
North Carolina SBOE
Education and Disclosure Specialist
441 North Harrington
Raleigh, NC 27603

Dear Ms. Bowen:

I am writing this letter in regards to the accidental disbursement of funds from Mr. Brian Brown's election campaign account as discussed during our conversation on June 12th, 2012.

Mr. Brown keeps his campaign check book in the same physical location as his business checkbook for Rep Express Catering. While Mr. Brown was absent from his business location, a vendor made a delivery. An authorized employee was paying the vendor and accidentally wrote a check on Mr. Brown's campaign check book instead of his business check book. As soon as Mr. Brown became aware of this, he contacted me and in turn I contacted the SBOE for direction on correcting and reporting this event.

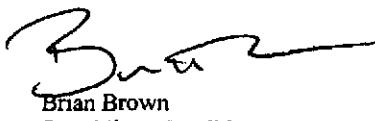
Per your instruction:

- a. Mr. Brown has repaid his campaign account for the full amount.
- b. Obtained copies of the check in question to submit with this letter.
- c. Submit this letter, signed by Mr. Brian Brown and myself with July 11th Report.

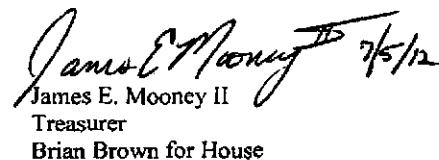
Brown
Signed
OK-

I appreciate your help in this matter. Please contact me at your convenience if this does not rectify the issue in full.

Sincerely,


Brian Brown

Republican Candidate
NC House District 9


James E. Mooney II
Treasurer
Brian Brown for House

Brian Brown for House
Brian Brown
P.O. Box 8033
Greenville NC 27835

TrustAtlantic Bank
1310 W. Arlington Boulevard
Greenville NC 27834

06-1204631

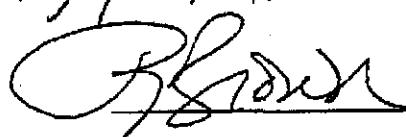
1007

Date 6-1-12

\$ 1889.67

Pay to the
Order of U.S Foods
one thousand eight hundred eighty nine 67/100 — dollars

U.S Foods 6-1-12 apply to est



Repaid 6/4/2012 \$ 1889.67
CAST
Violation (50 Under
Cast)

EXHIBIT B

Reports 07/01/2012 - 1/20/2012

Disclosure Report Cover

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

Amendment

Yes

No

1. Committee Information

a. Full Name BRIAN BROWN FOR HOUSE	e. ID Number STA-Q956DK-C-001
b. Mailing Address (include City, State and Zip Code) PO BOX 8053 GREENVILLE, NC 27858	c. Date Filed 10/29/2012
	d. Phone Number 252-414-3943



2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2012	07/01/2012	10/20/2012	JAMES EDWARD MOONEY II

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 <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Independent <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> Expenditure <input type="checkbox"/> Legal Expense Fund		Municipal	State/County	Referendum
		<input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Organizational Quarterly	<input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum
		<input type="checkbox"/> Pre-primary <input checked="" type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff Semi-annual	<input type="checkbox"/> First <input checked="" type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth Semi-annual	<input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special
7. Type of Fund (if applicable, check one) <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:		<input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	10. Special Report Name
8. Number of Fundraisers this Report		0		

11. Account Information		11. Account Information	
a. Financial Institution Full Name TRUST ATLANTIC BANK		a. Financial Institution Full Name	
b. Purpose CAMPAIGN FUN MANAGEMENT	c. Account Code 1650	b. Purpose	c. Account Code
d. Period Begin Balance \$ 5000.00		d. Period Begin Balance WAS -2864.68	

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.

JAMES E. MOONEY II

Printed Name of Signer

Jane E. Mooney II
Signature of Appointed Treasurer

10/29/2012

Date

FOR OFFICE USE ONLY

Date Received: <u>11-5-12</u>	Employee: _____	Delivery Method
Date Postmarked: <u>10-31-12</u>	Employee: <u>A.S</u>	<input checked="" type="checkbox"/> Normal Mail
Date Scanned: <u>11-6-12</u>	Employee: <u>A.S</u>	<input type="checkbox"/> Registered Mail
Date Data Entered: _____	Employee: _____	<input type="checkbox"/> Hand Delivered
		<input type="checkbox"/> Electronically Filed
		<input type="checkbox"/> Signer has not received mandatory training

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

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

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
BRIAN BROWN FOR HOUSE	3RD QTR	STA-Q956DR-C-101
Start of Election Cycle:	January 1,	Total this Reporting Period
4) Cash on Hand at Start		16,00 + \$
RECEIPTS		
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ \$
6) Contributions from Individuals	(CRO-1210)	\$ 36024 \$
7) Contributions from Political Party Committees	(CRO-1210)	\$ 22106.41 \$
8) Contributions from Other Political Committees	(CRO-1230)	\$ 14700.00 \$
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)		\$ 73830.41 \$
EXPENDITURES		
13) Disbursements		
13a) Operating Expenditures	(CRO-1310)	\$ 30479.81 \$
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 10,000.00 \$
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)	\$ 22106.41 \$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 62586.22 \$
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 11,260.19 \$
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-2200)	\$ \$
28) Contributions to be Refunded	(CRO-1215)	\$ \$

Not
Correct
-2864.
68

Not
Correct

Contributions from Other Political Committees

Pg 1 of 5

Amendment

Yes 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
BRIAN BROWN FOR HOUSE	

3. Contributor Information		<input type="checkbox"/> Add	<input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Committee	d. Comments		
RAYNE BROWN FOR HOUSE 416 Lee Ave LEXINGTON, NC 27295	<input type="checkbox"/> Candidate <input type="checkbox"/> Referendum	<input type="checkbox"/> PAC		
	c. Level Registered (Specify)			
	<input type="checkbox"/> Federal <input type="checkbox"/> State	<input type="checkbox"/> County: <input type="checkbox"/> Municipality:		
			e. Election Sum to Date	
			\$ 300.00	

f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
1650	CHECK		08/25/2012	\$ 300.00
				\$
				\$

3. Contributor Information		<input type="checkbox"/> Add	<input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Committee	d. Comments		
SARAH STEVENS FOR HOUSE 2161 Margaret Dr MT. AIRY, NC 27030	<input type="checkbox"/> Candidate <input type="checkbox"/> Referendum	<input type="checkbox"/> PAC		
	c. Level Registered (Specify)			
	<input type="checkbox"/> Federal <input checked="" type="checkbox"/> State	<input type="checkbox"/> County: <input type="checkbox"/> Municipality:	e. Election Sum to Date	
			\$ 200.00	

f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
1650	CHECK		09/07/2012	\$ 200.00
				\$
				\$

3. Contributor Information		<input type="checkbox"/> Add	<input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Committee	d. Comments		
BILL BRAWLEY COMMITTEE 13612 O Toole Dr MATTHEWS, NC 28501	<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Referendum	<input type="checkbox"/> PAC		
	c. Level Registered (Specify)			
	<input type="checkbox"/> Federal <input checked="" type="checkbox"/> State	<input type="checkbox"/> County: <input type="checkbox"/> Municipality:	e. Election Sum to Date	
			\$ 250.00	

f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
1650	CHECK		09/07/2012	\$ 250.00
				\$
				\$

4. Total only this Page	\$ 300.00	75000
5. Total of ALL CRO-1230 Pages (This line must be on line 8 of Detailed Summary Page CRO-1100)	\$ 14700	150

Contributions from Other Political Committees

Pg 2

of 5

Amendment

Yes 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																																							
BRIAN BROWN FOR HOUSE			STA-Q956DK-C-001																																							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td colspan="2">a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Type of Committee</td> <td colspan="2">d. Comments</td> </tr> <tr> <td colspan="2">Dollar for House P.O. Box 1369 CARY, NC 27512</td> <td><input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC</td> <td colspan="2" rowspan="2"></td> </tr> <tr> <td colspan="2"></td> <td><input type="checkbox"/> Referendum</td> </tr> <tr> <td colspan="2"></td> <td>c. Level Registered (Specify)</td> <td colspan="2"></td> </tr> <tr> <td colspan="2"></td> <td><input type="checkbox"/> Federal <input type="checkbox"/> County:</td> <td colspan="2"></td> </tr> <tr> <td colspan="2"></td> <td><input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:</td> <td colspan="2"></td> </tr> <tr> <td colspan="2"></td> <td colspan="3">e. Election Sum to Date</td> </tr> <tr> <td colspan="2"></td> <td colspan="3">\$ 1000.00</td> </tr> </table>					a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee	d. Comments		Dollar for House P.O. Box 1369 CARY, NC 27512		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC					<input type="checkbox"/> Referendum			c. Level Registered (Specify)					<input type="checkbox"/> Federal <input type="checkbox"/> County:					<input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:					e. Election Sum to Date					\$ 1000.00		
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee	d. Comments																																							
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		<input type="checkbox"/> Referendum																																								
		c. Level Registered (Specify)																																								
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		e. Election Sum to Date																																								
		\$ 1000.00																																								
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount																																						
1650	CHECK		09/27/2012	\$ 1000.00																																						
				\$																																						
				\$																																						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td colspan="2">a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Type of Committee</td> <td colspan="2">d. Comments</td> </tr> <tr> <td colspan="2">Citizens for Susan Martin PO Box 8157 WILSON, NC 27893</td> <td><input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC</td> <td colspan="2" rowspan="2"></td> </tr> <tr> <td colspan="2"></td> <td><input type="checkbox"/> Referendum</td> </tr> <tr> <td colspan="2"></td> <td>c. Level Registered (Specify)</td> <td colspan="2"></td> </tr> <tr> <td colspan="2"></td> <td><input type="checkbox"/> Federal <input type="checkbox"/> County:</td> <td colspan="2"></td> </tr> <tr> <td colspan="2"></td> <td><input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:</td> <td colspan="2"></td> </tr> <tr> <td colspan="2"></td> <td colspan="3">e. Election Sum to Date</td> </tr> <tr> <td colspan="2"></td> <td colspan="3">\$ 4000.00</td> </tr> </table>					a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee	d. Comments		Citizens for Susan Martin PO Box 8157 WILSON, NC 27893		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC					<input type="checkbox"/> Referendum			c. Level Registered (Specify)					<input type="checkbox"/> Federal <input type="checkbox"/> County:					<input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:					e. Election Sum to Date					\$ 4000.00		
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee	d. Comments																																							
Citizens for Susan Martin PO Box 8157 WILSON, NC 27893		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC																																								
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		e. Election Sum to Date																																								
		\$ 4000.00																																								
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount																																						
1650	CHECK		10/17/2012	\$ 4000.00																																						
				\$																																						
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3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td colspan="2">a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Type of Committee</td> <td colspan="2">d. Comments</td> </tr> <tr> <td colspan="2"></td> <td><input type="checkbox"/> Candidate <input type="checkbox"/> PAC</td> <td colspan="2" rowspan="2"></td> </tr> <tr> <td colspan="2"></td> <td><input type="checkbox"/> Referendum</td> </tr> <tr> <td colspan="2"></td> <td>c. Level Registered (Specify)</td> <td colspan="2"></td> </tr> <tr> <td colspan="2"></td> <td><input type="checkbox"/> Federal <input type="checkbox"/> County:</td> <td colspan="2"></td> </tr> <tr> <td colspan="2"></td> <td><input type="checkbox"/> State <input type="checkbox"/> Municipality:</td> <td colspan="2"></td> </tr> <tr> <td colspan="2"></td> <td colspan="3">e. Election Sum to Date</td> </tr> <tr> <td colspan="2"></td> <td colspan="3">\$</td> </tr> </table>					a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee	d. Comments				<input type="checkbox"/> Candidate <input type="checkbox"/> PAC					<input type="checkbox"/> Referendum			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					\$		
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee	d. Comments																																							
		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC																																								
		<input type="checkbox"/> Referendum																																								
		c. Level Registered (Specify)																																								
		<input type="checkbox"/> Federal <input type="checkbox"/> County:																																								
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		e. Election Sum to Date																																								
		\$																																								
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount																																						
				\$																																						
				\$																																						
				\$																																						
4. Total only this Page \$ 5000.00																																										
5. Total of ALL CRO-1230 Pages \$ 14700																																										
(This line must be on line 8 of Detailed Summary Page CRO-1100)																																										

Contributions from Other Political Committees

Pg 3

of

Amendment

Yes No

Use this form to report contributions from other candidate, referendum or PAC committees

1. Committee Full Name (and Fund if applicable)* BRIAN BROWN FOR HOUSE			2. ID Number STA-Q956DK-C-001											
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Type of Committee <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum</td> <td colspan="3">d. Comments</td> </tr> <tr> <td>Committee to Elect Pat B. Hurley 334 Shamrock Rd Ashboro, NC 27203</td> <td>c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:</td> <td colspan="3">e. Election Sum to Date \$ 250.00</td> </tr> </table>					a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Committee <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum	d. Comments			Committee to Elect Pat B. Hurley 334 Shamrock Rd Ashboro, NC 27203	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Sum to Date \$ 250.00		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Committee <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum	d. Comments												
Committee to Elect Pat B. Hurley 334 Shamrock Rd Ashboro, NC 27203	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Sum to Date \$ 250.00												
f. Account Code 1650	g. Form of Payment CHECK	h. In-Kind Description	i. Date (mm/dd/yyyy) 09/13/2012	j. Amount \$ 250.00										
				\$										
				\$										
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Type of Committee <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum</td> <td colspan="3">d. Comments</td> </tr> <tr> <td>Friends of Ruth Samuelson 1432 Ferncliff Rd CHARLOTTE, NC 28211</td> <td>c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:</td> <td colspan="3">e. Election Sum to Date \$ 4000.00</td> </tr> </table>					a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Committee <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum	d. Comments			Friends of Ruth Samuelson 1432 Ferncliff Rd CHARLOTTE, NC 28211	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Sum to Date \$ 4000.00		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Committee <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum	d. Comments												
Friends of Ruth Samuelson 1432 Ferncliff Rd CHARLOTTE, NC 28211	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Sum to Date \$ 4000.00												
f. Account Code 1650	g. Form of Payment CHECK	h. In-Kind Description	i. Date (mm/dd/yyyy) 09/17/2012	j. Amount \$ 2000.00										
1650	CHECK		10/14/2012	\$ 2000.00										
				\$										
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Type of Committee <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum</td> <td colspan="3">d. Comments</td> </tr> <tr> <td>Committee to Elect Jeff Collins P.O. Box 8078 ROCY MOUNT, NC 27803</td> <td>c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:</td> <td colspan="3">e. Election Sum to Date \$ 1500.00</td> </tr> </table>					a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Committee <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum	d. Comments			Committee to Elect Jeff Collins P.O. Box 8078 ROCY MOUNT, NC 27803	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Sum to Date \$ 1500.00		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Committee <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum	d. Comments												
Committee to Elect Jeff Collins P.O. Box 8078 ROCY MOUNT, NC 27803	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Sum to Date \$ 1500.00												
f. Account Code 1650	g. Form of Payment CHECK	h. In-Kind Description	i. Date (mm/dd/yyyy) 09/18/2012	j. Amount \$ 500.00										
1650	CHECK		10/11/2012	\$ 1500.00										
				\$										
4. Total only this Page \$ 5750.00														
5. Total of ALL CRO-1230 Pages \$ 14700 (This line must be on line 8 of Detailed Summary Page CRO-1100)														

11560

Contributions from Other Political Committees

Pg 4 of 5 Amendment Yes 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		
BRIAN BROWN FOR HOUSE		STA-Q956DK-C-001		
3. Contributor Information <input type="checkbox"/>		Add <input type="checkbox"/>	Remove <input type="checkbox"/>	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum		d. Comments
Moore Citizens for Boles 425 W. Pennsylvania Ave SOUTHERN PINES, NC 28387		c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ 250.00
f. Account Code	g. Form of Payment	h. In-Kind Description		i. Date (mm/dd/yyyy) j. Amount
1650	CHECK			09/12/2012 \$ 250.00
				\$
				\$
3. Contributor Information <input type="checkbox"/>		Add <input type="checkbox"/>	Remove <input type="checkbox"/>	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum		d. Comments
Hollo for House Campaign P.O Box 88 TAYLORSVILLE, NC 28681		c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ 500.00
f. Account Code	g. Form of Payment	h. In-Kind Description		i. Date (mm/dd/yyyy) j. Amount
1650	CHECK			09/13/2012 \$ 500.00
				\$
				\$
3. Contributor Information <input type="checkbox"/>		Add <input type="checkbox"/>	Remove <input type="checkbox"/>	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum		d. Comments
Edgar V. Starnes Campaign 6715 Lakeview Terr HICKORY, NC 286001		c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> 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
1650	CHECK			09/13/2012 \$ 100.00
				\$
				\$ <i>100</i>
4. Total only this Page \$ 250.00 <i>1850.00</i>				
5. Total of ALL CRO-1230 Pages \$ 14700				
(This line must be on line 8 of Detailed Summary Page CRO-1100)				

1230

Contributions from Other Political Committees

Pg 5

of 5 Yes No

Amendment

Use this form to report contributions from other candidate, referendum or PAC committees

1. Committee Full Name (and Fund if applicable)		2. ID Number		
BRIAN BROWN FOR HOUSE				
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) STAM FOR HOUSE P.O. Box 1600 Apex, NC 27502				
b. Type of Committee <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality: e. Election Sum to Date \$ 2000.00				
d. Comments				
f. Account Code	g. Form of Payment	b. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
1650	CHECK		09/11/2012	\$ 1000.00
1650	CHECK		10/15/2012	\$ 1000.00
				\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) Friends of Tim Moore 1417 Merrimont Dr. KINGS MOUNTAIN, NC 28086				
b. Type of Committee <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality: e. Election Sum to Date \$ 250.00				
d. Comments				
f. Account Code	g. Form of Payment	b. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
1650	CHECK		09/11/2012	\$ 250.00
				\$
				\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) NFIB-North Carolina 1201 F Street, NW Suite 200 WASHINGTON, DC 20004				
b. Type of Committee <input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum c. Level Registered (Specify) <input checked="" type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality: e. Election Sum to Date \$ 100.00				
d. Comments NOT SURE IF PAC				
f. Account Code	g. Form of Payment	b. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
1650	CHECK		09/12/2012	\$ 100.00
1650		MAILING	10/12/2012	\$ 14.08
				\$
4. Total only this Page \$ 2350.00				
5. Total of ALL CRO-1230 Pages \$ 14700				
(This line must be on line 8 of Detailed Summary Page CRO-1100)				

Contributions from Political Party Committees

Pg 1 of 1 Amendment Yes No

Use this form to report contributions from a political party

1. Committee Full Name (and Fund if applicable)			2. ID Number	
BRIAN BROWN FOR HOUSE			STA-Q956DK-C-001	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Comments	
NORTH CAROLINA REPUBLICAN PARTY PO BOX 12905 RALEIGH, NC 27605			<i>JCM</i>	
SBOE ID NUMBER: STA-C4184N-C-001				
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount
1650		RESEARCH EXPENSE	07/25/2012	\$ 6700.00
1650		RESEARCH EXPENSE	09/27/2012	\$ 4400.00
1650		DIRECT MAIL	10/04/2012	\$ -6600.00
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Comments	
NORTH CAROLINA REPUBLICAN PARTY PO BOX 12905 RALEIGH, NC 27605			<i>JCM</i>	
SBOE ID NUMBER: STA-C4184N-C-001				
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount
1650		RESEARCH	10/18/2012	\$ -1400.00
				\$
				\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Comments	
3rd Dist. Republican Party 115 APOLLO DR. CAPE CARTERET, NC 28584				
			c. Election Sum to Date	
			\$ 1000.00	
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount
1650	CHECK		09/12/2012	\$ 1000.00
				\$
				\$
4. Total only this Page			\$ 23106.41	
5. Total of ALL CRO-1220 Pages <i>(This line must be on line 7 of Detailed Summary Page CRO-1100)</i>			\$ 23106.41	

1000

Contributions from Individuals

Pg 1 of 27 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	
BRIAN BROWN FOR HOUSE				STA-Q956DK-C-001	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Hank Hinton 4528 Lagan Circle WINTERVILLE, NC 28590			b. Job Title/Profession	d. Comments	
			c. Employer's Name/Specific Field		
			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"/>	1650	CHECK		10/17/12	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Michael & Jo Wier 404 Shamrock Way GREENVILLE, NC 27834			b. Job Title/Profession	d. Comments	
			c. Employer's Name/Specific Field		
			e. Election Sum to Date	\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CHECK		10/18/2012	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Mary Ruth Sikes 1400 Addison Ct WINTERVILLE, NC 28590			b. Job Title/Profession	d. Comments	
			c. Employer's Name/Specific Field		
			e. Election Sum to Date	\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CHECK		10/18/2012	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page \$ 300.00					
5. Total of ALL CRO-1210 Pages \$ 36,024					
(This line must be on line 6 of Detailed Summary Page CRO-1100)					

300

Contributions from Individuals

Pg 2 of 27 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	
BRIAN BROWN FOR HOUSE				STA-Q956DK-C-001	
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	
Selma Cherry					
			c. Employer's Name/Specific Field		
				e. Election Sum to Date	
				\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CHECK		10/11/12	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments	
LA & DE Hudson 3940 Evans St Ext WINTERVILLE, NC 28590					
			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"/>	1650	CHECK		10/11/2012	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments	
DOUGLAS ROSTIC 607 Queen Annes Rd GREENVILLE, NC 278589					
			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"/>	1650	CHECK		10/11/2012	\$ 300.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page \$ 450.00					
5. Total of ALL CRO-1210 Pages \$ 36024					
(This line must be on line 6 of Detailed Summary Page CRO-1100)					

Contributions from Individuals

Pg 3 of 27 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		
BRIAN BROWN FOR HOUSE			STA-Q956DK-C-001		
3. Contributor Information <input checked="" type="checkbox"/>			<input type="checkbox"/> Add	<input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) David & Elizabeth Gurkin 1679 Shady Creek Rd AYDEN, NC 28513			b. Job Title/Profession	d. Comments	
			c. Employer's Name/Specific Field		
			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"/>	1650	CHECK		10/14/12	\$ 150.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input type="checkbox"/>			<input type="checkbox"/> Add	<input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Stanley Armstrong 917 Charlton Place GREENVILLE, NC 27858			b. Job Title/Profession	d. Comments	
			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"/>	1650	CHECK		10/15/2012	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input type="checkbox"/>			<input type="checkbox"/> Add	<input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Lawrence Watts 204-A Hickory St GREENVILLE, NC 27858			b. Job Title/Profession	d. Comments	
			c. Employer's Name/Specific Field		
			e. Election Sum to Date		
			\$ 4000.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CHECK		10/15/2012	\$ 1000.00
<input type="checkbox"/>	1650	CHECK		10/17/2012	\$ 3000.00
<input type="checkbox"/>					\$
4. Total only this Page \$ 4250.00					
5. Total of ALL CRO-1210 Pages \$ 36024					
(This line must be on line 6 of Detailed Summary Page CRO-1100)					

5080

Contributions from Individuals

Pg 4 of 27 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		
BRIAN BROWN FOR HOUSE			STA-Q956DK-C-001		
3. Contributor Information <input checked="" type="checkbox"/>			<input type="checkbox"/> Add	<input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) David & Celeste Harris 4504 Treetops Cr WINTERVILLE, NC 28590			b. Job Title/Profession	d. Comments	
			c. Employer's Name/Specific Field		
			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"/>	1650	CHECK		10/16/12	\$ 150.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input type="checkbox"/>			<input type="checkbox"/> Add	<input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) PARKER OVERTON 3933 Mobleys Bridge Rd GRIMESLAND, NC 27837			b. Job Title/Profession	d. Comments	
			c. Employer's Name/Specific Field		
			e. Election Sum to Date	\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CHECK		10/17/2012	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input type="checkbox"/>			<input type="checkbox"/> Add	<input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Justin & Kristen Miller 3935 Dunhagan Rd GREENVILLE, NC 27858			b. Job Title/Profession	d. Comments	
			c. Employer's Name/Specific Field		
			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"/>	1650	CHECK		10/17/2012	\$ 75.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page \$ 725.00					
5. Total of ALL CRO-1210 Pages \$ 36024					
(This line must be on line 6 of Detailed Summary Page CRO-1100)					

X 5125

Contributions from Individuals

Pg 5 of 27 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	
BRIAN BROWN FOR HOUSE				STA-Q956DK-C-001	
3. Contributor Information <input checked="" type="checkbox"/>			<input type="checkbox"/> Add	<input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Mike Bostic 718 Carrington Ln WINTERVILLE, NC 28590			b. Job Title/Profession		d. Comments
			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"/>	1650	CHECK		10/09/2012	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input type="checkbox"/>			<input type="checkbox"/> Add	<input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Julian & Martha Vainright 579 Lexington Dr GREENVILLE, NC 27834			b. Job Title/Profession		d. Comments
			c. Employer's Name/Specific Field		
					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"/>	1650	CHECK		10/09/2012	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input type="checkbox"/>			<input type="checkbox"/> Add	<input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Judson Whitehurst 802 Recycling Ln GREENVILLE, NC 27834			b. Job Title/Profession		d. Comments
			c. Employer's Name/Specific Field		
					e. Election Sum to Date \$ 4000.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CHECK		10/08/2012	\$ 4000.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page \$ 4350.00					
5. Total of ALL CRO-1210 Pages \$ 36024					

(This line must be on line 6 of Detailed Summary Page CRO-1100)

16075

Contributions from Individuals

Pg 6 of 27 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		
BRIAN BROWN FOR HOUSE			STA-Q956DK-C-001		
3. Contributor Information <input checked="" type="checkbox"/>			<input type="checkbox"/> Add	<input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Ferrell Blount P.O. Box 850 BETHEL, NC 27812			b. Job Title/Profession		d. Comments
			c. Employer's Name/Specific Field		
					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"/>	1650	CHECK		10/05/2012	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input type="checkbox"/>			<input type="checkbox"/> Add	<input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Nelson Crisp P.O. Drawer 7146 GREENVILLE, NC 27834			b. Job Title/Profession		d. Comments
			c. Employer's Name/Specific Field		
					e. Election Sum to Date \$ 50.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CHECK		10/07/2012	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input type="checkbox"/>			<input type="checkbox"/> Add	<input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Carlynn Warren 136 E Longmeadow Rd GREENVILLE, NC 27858			b. Job Title/Profession		d. Comments
			c. Employer's Name/Specific Field		
					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"/>	1650	CHECK		10/08/2012	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page \$ 500.00					
5. Total of ALL CRO-1210 Pages \$ 36024					
(This line must be on line 6 of Detailed Summary Page CRO-1100)					

X 10575

Contributions from Individuals

Pg 7 of 27 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												
BRIAN BROWN FOR HOUSE				STA-Q956DK-C-001												
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td rowspan="4" style="vertical-align: top; width: 40%;">a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Job Title/Profession</td> <td>d. Comments</td> </tr> <tr><td></td><td></td></tr> <tr><td>David & Shirley Martin 311 Prince Rd GREENVILLE, NC 27858</td><td>c. Employer's Name/Specific Field</td></tr> <tr><td></td><td>e. Election Sum to Date</td></tr> <tr> <td></td> <td style="text-align: right;">\$ 100.00</td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments			David & Shirley Martin 311 Prince Rd GREENVILLE, NC 27858	c. Employer's Name/Specific Field		e. Election Sum to Date		\$ 100.00
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments														
	David & Shirley Martin 311 Prince Rd GREENVILLE, NC 27858	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"/>	1650	CHECK		10/02/2012	\$ 100.00											
<input type="checkbox"/>					\$											
<input type="checkbox"/>					\$											
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td rowspan="4" style="vertical-align: top; width: 40%;">a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Job Title/Profession</td> <td>d. Comments</td> </tr> <tr><td></td><td></td></tr> <tr><td>William Blount P.O. Box 7226 GREENVILLE, NC 27835</td><td>c. Employer's Name/Specific Field</td></tr> <tr><td></td><td>e. Election Sum to Date</td></tr> <tr> <td></td> <td style="text-align: right;">\$ 250.00</td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments			William Blount P.O. Box 7226 GREENVILLE, NC 27835	c. Employer's Name/Specific Field		e. Election Sum to Date		\$ 250.00
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments														
	William Blount P.O. Box 7226 GREENVILLE, NC 27835	c. Employer's Name/Specific Field														
		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"/>	1650	CHECK		10/04/2012	\$ 250.00											
<input type="checkbox"/>					\$											
<input type="checkbox"/>					\$											
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td rowspan="4" style="vertical-align: top; width: 40%;">a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Job Title/Profession</td> <td>d. Comments</td> </tr> <tr><td></td><td></td></tr> <tr><td>Glen Newman 120 Osceola Dr GREENVILLE, NC 27858</td><td>c. Employer's Name/Specific Field</td></tr> <tr><td></td><td>e. Election Sum to Date</td></tr> <tr> <td></td> <td style="text-align: right;">\$ 20.00</td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments			Glen Newman 120 Osceola Dr GREENVILLE, NC 27858	c. Employer's Name/Specific Field		e. Election Sum to Date		\$ 20.00
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments														
	Glen Newman 120 Osceola Dr GREENVILLE, NC 27858	c. Employer's Name/Specific Field														
		e. Election Sum to Date														
	\$ 20.00															
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount											
<input type="checkbox"/>	1650	CHECK		10/04/2012	\$ 20.00											
<input type="checkbox"/>					\$											
<input type="checkbox"/>					\$											
4. Total only this Page \$ 370.00																
5. Total of ALL CRO-1210 Pages \$ 36024																
(This line must be on line 6 of Detailed Summary Page CRO-1100)																

109455

Contributions from Individuals

Pg 8 of 27 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		
BRIAN BROWN FOR HOUSE			STA-Q956DK-C-001		
3. Contributor Information <input checked="" type="checkbox"/>			Add <input type="checkbox"/>	Remove <input type="checkbox"/>	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Julian Rawl P.O. Box 8068 GREENVILLE, NC 27835			b. Job Title/Profession	d. Comments	
			c. Employer's Name/Specific Field		
					e. Election Sum to Date
					\$ 500.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CHECK		09/30/2012	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input type="checkbox"/>			Add <input type="checkbox"/>	Remove <input type="checkbox"/>	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Thomas Brown 2602 Forest Glen Dr GREENVILLE, NC 27858			b. Job Title/Profession	d. Comments	
			c. Employer's Name/Specific Field		
					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"/>	1650	CHECK		10/01/2012	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input type="checkbox"/>			Add <input type="checkbox"/>	Remove <input type="checkbox"/>	
a. Full Name, Mailing Address & Phone (include city, state, & zip) John Faircloth P.O. Box 5972 HIGH POINT, NC 27262			b. Job Title/Profession	d. Comments	
			c. Employer's Name/Specific Field		
					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"/>	1650	CHECK		10/02/2012	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page \$ 950.00					
5. Total of ALL CRO-1210 Pages \$ 36024					

(This line must be on line 6 of Detailed Summary Page CRO-1100)

Contributions from Individuals

Pg 9 of 27 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		
BRIAN BROWN FOR HOUSE			STA-Q956DK-C-001		
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Tamara Chitwood 146 Longmeadow Rd GREENVILLE, NC 27858			b. Job Title/Profession	d. Comments	
			c. Employer's Name/Specific Field		
			e. Election Sum to Date	\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CHECK		09/20/2012	\$ 500.00
<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) Patricia Duke 425 W. Longmeadow Rd GREENVILLE, NC 27858			b. Job Title/Profession	d. Comments	
			c. Employer's Name/Specific Field		
			e. Election Sum to Date	\$ 1000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CHECK		09/25/2012	\$ 1000.00
<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) Charles McGrady 195 Fernbrook Way HENDERSONVILLE, NC 28791			b. Job Title/Profession	d. Comments	
			c. Employer's Name/Specific Field		
			e. Election Sum to Date	\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CHECK		09/24/2012	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page			\$ 2000.00		
5. Total of ALL CRO-1210 Pages			\$ 36024		
(This line must be on line 6 of Detailed Summary Page CRO-1100)					

13895

Contributions from Individuals

Pg 10 of 27 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		
BRIAN BROWN FOR HOUSE			STA-Q956DK-C-001		
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	
			c. Employer's Name/Specific Field		
Heidi DeSoto 2907 Major Smith Rd GREENVILLE, NC 27858					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"/>	1650	CHECK		09/20/2013	\$ 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	
			c. Employer's Name/Specific Field		
Amanda Tilley 3077 Dartmouth Dr. GREENVILLE, NC 27858					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"/>	1650	CHECK		09/23/2012	\$ 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	
			c. Employer's Name/Specific Field		
Selma Cherry 122 C Breezewood Dr GREENVILLE, NC 27858					e. Election Sum to Date
					\$ 24.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CHECK		09/24/2012	\$ 24.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 294.00 <i>650.00</i>
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 36024

14669

Contributions from Individuals

Pg 11 of 27 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	
BRIAN BROWN FOR HOUSE				STA-Q956DK-C-001	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) DAVID WILLIAMS 3200 Larkspur Ln GREENVILLE, NC 27834					
b. Job Title/Profession c. Employer's Name/Specific Field 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"/>	1650	CHECK		09/14/2012	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) NANCY COLVILLE P.O. Box 1205 GREENVILLE, NC 27834					
b. Job Title/Profession c. Employer's Name/Specific Field e. Election Sum to Date \$ 50.00					
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CHECK		09/15/2012	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) MAE STANCILL P.O. Box 488					
b. Job Title/Profession c. Employer's Name/Specific Field e. Election Sum to Date \$ 50.00					
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CHECK		09/15/2012	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page \$ 300.00					
5. Total of ALL CRO-1210 Pages \$ 36024					

(This line must be on line 6 of Detailed Summary Page CRO-1100)

144689

Contributions from Individuals

Pg 12 of 27 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	
BRIAN BROWN FOR HOUSE				STA-Q956DK-C-001	
3. Contributor Information <input checked="" type="checkbox"/>			Add <input type="checkbox"/>	Remove <input type="checkbox"/>	
a. Full Name, Mailing Address & Phone (include city, state, & zip) GEORGE CLEVELAND 224 Campbell Pl. GREENVILLE, NC 27858			b. Job Title/Profession		d. Comments
			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"/>	1650	CHECK		09/12/2012	\$ 300.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input type="checkbox"/>			Add <input type="checkbox"/>	Remove <input type="checkbox"/>	
a. Full Name, Mailing Address & Phone (include city, state, & zip) POLLY PILAND 3910 Fernwood LN GREENVILLE, NC 27834			b. Job Title/Profession		d. Comments
			e. Employer's Name/Specific Field		
					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"/>	1650	CHECK		09/13/2012	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input type="checkbox"/>			Add <input type="checkbox"/>	Remove <input type="checkbox"/>	
a. Full Name, Mailing Address & Phone (include city, state, & zip) TIM RANDALL GREENVILLE, NC 27858			b. Job Title/Profession		d. Comments
			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"/>	1650	CHECK		09/14/2012	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page \$ 650.00					
5. Total of ALL CRO-1210 Pages \$ 36024					

(This line must be on line 6 of Detailed Summary Page CRO-1100)

1519

Contributions from Individuals

Pg 13 of 27 Yes No
Amendment

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		
BRIAN BROWN FOR HOUSE			STA-Q956DK-C-001		
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) HENRY HINTON 3062 Dartmouth Dr. GREENVILLE, NC 27858			b. Job Title/Profession	d. Comments	
			c. Employer's Name/Specific Field		
			e. Election Sum to Date	\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CHECK		09/06/2012	\$ 500.00
<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) BOBBY and LAURA 4415 Corey Rd GREENVILLE, NC 27858			b. Job Title/Profession	d. Comments	
			c. Employer's Name/Specific Field		
			e. Election Sum to Date	\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CHECK		09/06/2012	\$ 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) BETTY JO SHEPHEARD P.O. Box 1 TARBORO, NC 27886			b. Job Title/Profession	d. Comments	
			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"/>	1650	CHECK		09/06/2012	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page			\$ 650.00		
5. Total of ALL CRO-1210 Pages			\$ 36024		
(This line must be on line 6 of Detailed Summary Page CRO-H100)					

15169

Contributions from Individuals

Pg 14 of 27 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		
BRIAN BROWN FOR HOUSE			STA-Q956DK-C-001		
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	
JEFFREY STALLINGS 603 Chesapeake Pl GREENVILLE, NC 27858					
c. Employer's Name/Specific Field					
				e. Election Sum to Date	
				\$ 1000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CHECK		09/04/2012	\$ 1000.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
WILLIAM BROWN 304 Kenilworth Rd GREENVILLE, NC 27858					
c. Employer's Name/Specific Field				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"/>	1650	CHECK		09/05/2012	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
SCOTT SHOOK 3800 Sheffield Ct GREENVILLE, NC 27834					
c. Employer's Name/Specific Field				e. Election Sum to Date	
				\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CHECK		09/06/2012	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page			\$ 1750.00		
5. Total of ALL CRO-1210 Pages			\$ 36 0 2 4		
(This line must be on line 6 of Detailed Summary Page CRO-1100)					

17519

Contributions from Individuals

Pg 15 of 27 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		
BRIAN BROWN FOR HOUSE			STA-Q956DK-C-001		
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	
BILLY R DUNN 3806 Sterling Trace Dr WINTERVILLE, NC 28590			e. Employer's Name/Specific Field	e. Election Sum to Date	
				\$ 4000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	IN-KIND	SIGNS	08/30/2012	\$ 2200.00
<input type="checkbox"/>	1650	IN-KIND	SIGNS	09/30/2012	\$ 1800.00
<input type="checkbox"/>					\$
3. Contributor Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments	
CHERYL THOMPSON 405 Brighton Park Dr. #12, GREENVILLE, NC 27834			e. Employer's Name/Specific Field	e. Election Sum to Date	
				\$ 25.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CASH		09/01/2012	\$ 25.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments	
K. CLARK STALLINGS 1024 W. Rock Springs Rd. GREENVILLE, NC 27858			e. Employer's Name/Specific Field	e. Election Sum to Date	
				\$ 1000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CHECK		08/28/2012	\$ 1000.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page			\$ 5025.00		
5. Total of ALL CRO-1210 Pages			\$ 36024		
(This line must be on line 6 of Detailed Summary Page CRO-1100)					

22544

Contributions from Individuals

Pg 16 of 27 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		
BRIAN BROWN FOR HOUSE			STA-Q956DK-C-001		
3. Contributor Information <input checked="" type="checkbox"/>			<input type="checkbox"/> Add	<input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) ELMER and MARIE BRITT 108 Lakeview Dr. GREENVILLE, NC 28858			b. Job Title/Profession		d. Comments
			c. Employer's Name/Specific Field		
					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"/>	1650	CHECK		08/30/2012	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input type="checkbox"/>			<input type="checkbox"/> Add	<input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) MARK DELLASEGNA 900 Daventry Dr. GREENVILLE, NC 28590			b. Job Title/Profession		d. Comments
			MD		
			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"/>	1650	CHECK		08/30/2012	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input type="checkbox"/>			<input type="checkbox"/> Add	<input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) CONNALLY BRANCH 236 Windsor Rd. GREENVILLE, NC 27858			b. Job Title/Profession		d. Comments
			c. Employer's Name/Specific Field		
					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"/>	1650	CHECK		08/28/2012	\$ 150.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page \$ 500.00					
5. Total of ALL CRO-1210 Pages \$ 36 02 L(
(This line must be on line 6 of Detailed Summary Page CRO-1100)					

2304W

Contributions from Individuals

Pg 17 of 27 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		
BRIAN BROWN FOR HOUSE			STA-Q956DK-C-001		
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) WILLIAM JENKINS 3617 Gosford Gate. GREENVILLE, NC 28858			b. Job Title/Profession	d. Comments	
			c. Employer's Name/Specific Field		
			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"/>	1650	CHECK		08/30/2012	\$ 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) WAYNE and SHERRY KOLLOMAN 303 Orton Dr GREENVILLE, NC 28590			b. Job Title/Profession	d. Comments	
			c. Employer's Name/Specific Field		
			e. Election Sum to Date	\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CHECK		08/2/2012	\$ 500.00
<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) RONALD and MARY NEWTON 1800 Bloomsbury Rd. GREENVILLE, NC 27858			b. Job Title/Profession	d. Comments	
			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"/>	1650	CHECK		08/28/2012	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page \$ 850.00					
5. Total of ALL CRO-1210 Pages \$ 36024					
(This line must be on line 6 of Detailed Summary Page CRO-1100)					

23894

Contributions from Individuals

Pg 18 of 27 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																	
BRIAN BROWN FOR HOUSE			STA-Q956DK-C-001																	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Job Title/Profession</td> <td>d. Comments</td> </tr> <tr> <td colspan="2">KEITH WILLIAMS 1401 Trafalgar Dr. GREENVILLE, NC 28590</td> <td>ATTORNEY</td> </tr> <tr> <td colspan="2"></td> <td>c. Employer's Name/Specific Field</td> </tr> <tr> <td colspan="2"></td> <td>e. Election Sum to Date</td> </tr> <tr> <td colspan="2"></td> <td>\$ 100.00</td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments	KEITH WILLIAMS 1401 Trafalgar Dr. GREENVILLE, NC 28590		ATTORNEY			c. Employer's Name/Specific Field			e. Election Sum to Date			\$ 100.00
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments																		
KEITH WILLIAMS 1401 Trafalgar Dr. GREENVILLE, NC 28590		ATTORNEY																		
		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"/>	1650	CHECK		08/29/2012	\$ 100.00															
<input type="checkbox"/>					\$															
<input type="checkbox"/>					\$															
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Job Title/Profession</td> <td>d. Comments</td> </tr> <tr> <td colspan="2">JENNIFER RICKARD 2340 Vineyard Dr. Unit M-8 GREENVILLE, NC 28590</td> <td></td> </tr> <tr> <td colspan="2"></td> <td>c. Employer's Name/Specific Field</td> </tr> <tr> <td colspan="2"></td> <td>e. Election Sum to Date</td> </tr> <tr> <td colspan="2"></td> <td>\$ 100.00</td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments	JENNIFER RICKARD 2340 Vineyard Dr. Unit M-8 GREENVILLE, NC 28590					c. Employer's Name/Specific Field			e. Election Sum to Date			\$ 100.00
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments																		
JENNIFER RICKARD 2340 Vineyard Dr. Unit M-8 GREENVILLE, NC 28590																				
		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 Deserption	j. Date (mm/dd/yyyy)	k. Amount															
<input type="checkbox"/>	1650	CHECK		08/2/2012	\$ 100.00															
<input type="checkbox"/>					\$															
<input type="checkbox"/>					\$															
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Job Title/Profession</td> <td>d. Comments</td> </tr> <tr> <td colspan="2">JAMIE and TRICIA BRILEY 1306 Minuette Pl. GREENVILLE, NC 27858</td> <td></td> </tr> <tr> <td colspan="2"></td> <td>c. Employer's Name/Specific Field</td> </tr> <tr> <td colspan="2"></td> <td>e. Election Sum to Date</td> </tr> <tr> <td colspan="2"></td> <td>\$ 50.00</td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments	JAMIE and TRICIA BRILEY 1306 Minuette Pl. GREENVILLE, NC 27858					c. Employer's Name/Specific Field			e. Election Sum to Date			\$ 50.00
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments																		
JAMIE and TRICIA BRILEY 1306 Minuette Pl. GREENVILLE, NC 27858																				
		c. Employer's Name/Specific Field																		
		e. Election Sum to Date																		
		\$ 50.00																		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount															
<input type="checkbox"/>	1650	CHECK		08/28/2012	\$ 50.00															
<input type="checkbox"/>					\$															
<input type="checkbox"/>					\$															
4. Total only this Page \$ 250.00																				
5. Total of ALL CRO-1210 Pages \$ 36024																				
(This line must be on line 6 of Detailed Summary Page CRO-1100)																				

24/44

Contributions from Individuals

Pg 19 of 27 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		
BRIAN BROWN FOR HOUSE			STA-Q956DK-C-001		
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	
JULIE DODSON GREENVILLE, NC 27834			e. Employer's Name/Specific Field		
			e. Election Sum to Date		
			\$ 25.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CASH		08/28/2012	\$ 25.00
<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	
			ATTORNEY		
JEREMY KING 1510 Muirfield Dr GREENVILLE, NC 27858			e. Employer's Name/Specific Field		
			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"/>	1650	CHECK		08/28/2012	\$ 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	
DANNY NICHOLS 309 Williams St. GREENVILLE, NC 27858			c. Employer's Name/Specific Field		
			e. Election Sum to Date		
			\$ 1000.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CHECK		08/28/2012	\$ 1000.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page			\$ 1275.00		
5. Total of ALL CRO-1210 Pages			\$ 36024		
(This line must be on line 6 of Detailed Summary Page CRO-1100)					

25419

Contributions from Individuals

Pg 20 of 27 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		
BRIAN BROWN FOR HOUSE			STA-Q956DK-C-001		
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) KATHLEEN STASKELUNAS 3802 Saxon Ct GREENVILLE, NC 27834			b. Job Title/Profession	d. Comments	
			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"/>	1650	CHECK		08/27/2012	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) KENNETH SMITH P.O. Box 965t GREENVILLE, NC 27812			b. Job Title/Profession	d. Comments	
			c. Employer's Name/Specific Field		
			e. Election Sum to Date		
			\$ 500.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CHECK		08/28/2012	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) KENNETH FERGUSON 2743 Millbrooke Dr. GREENVILLE, NC 27858			b. Job Title/Profession	d. Comments	
			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"/>	1650	CHECK		08/28/2012	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page			\$ 700.00		
5. Total of ALL CRO-1210 Pages			\$ 36024		
(This line must be on line 6 of Detailed Summary Page CRO-1100)					

2019

Contributions from Individuals

Pg 21 of 27 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		
BRIAN BROWN FOR HOUSE			STA-Q956DK-C-001		
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone <small>(include city, state, & zip)</small> COUTNEY STERNR. 2818 Jefferson Dr S GREENVILLE, NC 27858					
b. Job Title/Profession c. Employer's Name/Specific Field			d. Comments		
e. Election Sum to Date \$ 135.00					
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CASH		08/17/2012	\$ 10.00
<input type="checkbox"/>	1650	CHECK		09/14/2012	\$ 125.00
<input type="checkbox"/>					\$
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone <small>(include city, state, & zip)</small> MARCUS ALBERNAZ 3800 Charleston Ct GREENVILLE, NC 27834					
b. Job Title/Profession c. Employer's Name/Specific Field			d. Comments		
e. Election Sum to Date \$ 500.00					
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CHECK		08/26/2012	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone <small>(include city, state, & zip)</small> ROBERT and ANN GRIFFIN 412 Forrest Park Rd. GREENVILLE, NC 27858					
b. Job Title/Profession c. Employer's Name/Specific Field			d. Comments		
e. Election Sum to Date \$ 50.00					
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CHECK		08/27/2012	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page \$ 685.00					
5. Total of ALL CRO-1210 Pages \$ 36024					
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>					

26804

Contributions from Individuals

Pg 22 of 27 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	
BRIAN BROWN FOR HOUSE				STA-Q956DK-C-001	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) MAX JOYNER P.O. Box 30868 GREENVILLE, NC 27883			b. Job Title/Profession	d. Comments	
			c. Employer's Name/Specific Field		
			e. Election Sum to Date	\$ 1000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CHECK		07/13/2012	\$ 500.00
<input type="checkbox"/>	1650	CHECH		8/22/2012	\$ 500.00
<input type="checkbox"/>					\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) EDWIN CLARK 426 W. Long Meadow Rd GREENVILLE, NC 27858			b. Job Title/Profession	d. Comments	
			c. Employer's Name/Specific Field		
			e. Election Sum to Date	\$ 1500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CHECK		07/13/2012	\$ 500.00
<input type="checkbox"/>	1650	CHECK		09/06/2012	\$ 1000.00
<input type="checkbox"/>					\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) ROYCE E. EVERETTE JR 118 Robin Rd GREENVILLE, NC 27858			b. Job Title/Profession	d. Comments	
			c. Employer's Name/Specific Field		
			e. Election Sum to Date	\$ 2250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CHECK		07/20/2012	\$ 1000.00
<input type="checkbox"/>	1650	CHECK		08/24/2012	\$ 1000.00
<input type="checkbox"/>	1650	CHECK		10/11/2012	\$ 250.00
4. Total only this Page \$ 4750.00					
5. Total of ALL CRO-1210 Pages \$ 36024					
(This line must be on line 6 of Detailed Summary Page CRO-1100)					

3155X

Contributions from Individuals

Pg 23 of 27 Amendment Yes No

1. Committee Full Name (and Fund if applicable)				2. ID Number																
BRIAN BROWN FOR HOUSE				STA-Q956DK-C-001																
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Job Title/Profession</td> <td>d. Comments</td> </tr> <tr> <td colspan="2">John Criscitiello 1410 Evergreen Dr. GREENVILLE, NC 27858</td> <td></td> </tr> <tr> <td colspan="2">c. Employer's Name/Specific Field</td> <td></td> </tr> <tr> <td colspan="2"></td> <td>e. Election Sum to Date</td> </tr> <tr> <td colspan="2"></td> <td>\$ 100.00</td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments	John Criscitiello 1410 Evergreen Dr. GREENVILLE, NC 27858			c. Employer's Name/Specific Field					e. Election Sum to Date			\$ 100.00
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments																		
John Criscitiello 1410 Evergreen Dr. GREENVILLE, NC 27858																				
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"/>	1650	CHECK		10/17/12	\$ 100.00															
<input type="checkbox"/>					\$															
<input type="checkbox"/>					\$															
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Job Title/Profession</td> <td>d. Comments</td> </tr> <tr> <td colspan="2">Elbert Kennard III 3106 Juniper Branch Dr. GRIMESLAND, NC 27837</td> <td></td> </tr> <tr> <td colspan="2">c. Employer's Name/Specific Field</td> <td></td> </tr> <tr> <td colspan="2"></td> <td>e. Election Sum to Date</td> </tr> <tr> <td colspan="2"></td> <td>\$ 100.00</td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments	Elbert Kennard III 3106 Juniper Branch Dr. GRIMESLAND, NC 27837			c. Employer's Name/Specific Field					e. Election Sum to Date			\$ 100.00
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments																		
Elbert Kennard III 3106 Juniper Branch Dr. GRIMESLAND, NC 27837																				
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"/>	1650	CHECK		10/18/2012	\$ 100.00															
<input type="checkbox"/>					\$															
<input type="checkbox"/>					\$															
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Job Title/Profession</td> <td>d. Comments</td> </tr> <tr> <td colspan="2">David & Charlotte Bakers 1912 Tybee Ct WINTERVILLE, NC 28590</td> <td></td> </tr> <tr> <td colspan="2">e. Employer's Name/Specific Field</td> <td></td> </tr> <tr> <td colspan="2"></td> <td>e. Election Sum to Date</td> </tr> <tr> <td colspan="2"></td> <td>\$ 150.00</td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments	David & Charlotte Bakers 1912 Tybee Ct WINTERVILLE, NC 28590			e. Employer's Name/Specific Field					e. Election Sum to Date			\$ 150.00
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments																		
David & Charlotte Bakers 1912 Tybee Ct WINTERVILLE, NC 28590																				
e. Employer's Name/Specific Field																				
		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"/>	1650	CHECK		10/18/2012	\$ 150.00															
<input type="checkbox"/>					\$															
<input type="checkbox"/>					\$															
4. Total only this Page \$ 350.00																				
5. Total of ALL CRO-1210 Pages \$ 36024																				
(This line must be on line 6 of Detailed Summary Page CRO-1100)																				

31904

Contributions from Individuals

Pg 24 of 27 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																	
BRIAN BROWN FOR HOUSE			STA-Q956DK-C-001																	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Job Title/Profession</td> <td>d. Comments</td> </tr> <tr> <td>GAIL BLANTON 3069 Dartmouth GREENVILLE, NC 27858</td> <td></td> <td></td> </tr> <tr> <td></td> <td>c. Employer's Name/Specific Field</td> <td></td> </tr> <tr> <td></td> <td></td> <td>e. Election Sum to Date</td> </tr> <tr> <td></td> <td></td> <td>\$ 1250.00</td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments	GAIL BLANTON 3069 Dartmouth GREENVILLE, NC 27858				c. Employer's Name/Specific Field				e. Election Sum to Date			\$ 1250.00
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments																		
GAIL BLANTON 3069 Dartmouth GREENVILLE, NC 27858																				
	c. Employer's Name/Specific Field																			
		e. Election Sum to Date																		
		\$ 1250.00																		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount															
<input type="checkbox"/>	1650	CHECK		07/20/2012	\$ 500.00															
<input type="checkbox"/>	1650	CHECK		8/30/2010	\$ 500.00															
<input type="checkbox"/>	1650	CHECK		10/09/2012	\$ 250.00															
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Job Title/Profession</td> <td>d. Comments</td> </tr> <tr> <td>J. BRYANT KITTELL III P.O. Box 403 GREENVILLE, NC 27858</td> <td></td> <td></td> </tr> <tr> <td></td> <td>c. Employer's Name/Specific Field</td> <td></td> </tr> <tr> <td></td> <td></td> <td>e. Election Sum to Date</td> </tr> <tr> <td></td> <td></td> <td>\$ 250.00</td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments	J. BRYANT KITTELL III P.O. Box 403 GREENVILLE, NC 27858				c. Employer's Name/Specific Field				e. Election Sum to Date			\$ 250.00
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments																		
J. BRYANT KITTELL III P.O. Box 403 GREENVILLE, NC 27858																				
	c. Employer's Name/Specific Field																			
		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"/>	1650	CHECK		07/24/2012	\$ 250.00															
<input type="checkbox"/>					\$															
<input type="checkbox"/>					\$															
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Job Title/Profession</td> <td>d. Comments</td> </tr> <tr> <td>MARTHA GEORGE 3023 Dartmout Dr GREENVILLE, NC 27858</td> <td></td> <td></td> </tr> <tr> <td></td> <td>c. Employer's Name/Specific Field</td> <td></td> </tr> <tr> <td></td> <td></td> <td>e. Election Sum to Date</td> </tr> <tr> <td></td> <td></td> <td>\$ 50.00</td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments	MARTHA GEORGE 3023 Dartmout Dr GREENVILLE, NC 27858				c. Employer's Name/Specific Field				e. Election Sum to Date			\$ 50.00
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments																		
MARTHA GEORGE 3023 Dartmout Dr GREENVILLE, NC 27858																				
	c. Employer's Name/Specific Field																			
		e. Election Sum to Date																		
		\$ 50.00																		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount															
<input type="checkbox"/>	1650	CHECK		07/25/2012	\$ 50.00															
<input type="checkbox"/>					\$															
<input type="checkbox"/>					\$															
4. Total only this Page \$ 1550.00																				
5. Total of ALL CRO-1210 Pages \$ 36024 <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>																				

33454

Contributions from Individuals

Pg 25 of 27 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		
BRIAN BROWN FOR HOUSE			STA-Q956DK-C-001		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) HOWARD MOYE JR P.O. Box 8305 GREENVILLE, NC 27858					
			b. Job Title/Profession	d. Comments	
			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"/>	1650	CHECK		07/25/2012	\$ 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) RANDY and BOBBY FUSSELLI 3800 Cantata Dr GREENVILLE, NC 27858					
			b. Job Title/Profession	d. Comments	
			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"/>	1650	CHECK		07/26/2012	\$ 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) JEFF BEAMAN 233 Orton Dr GREENVILLE, NC 27858					
			b. Job Title/Profession	d. Comments	
			c. Employer's Name/Specific Field		
			e. Election Sum to Date	\$ 2000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CHECK		07/27/2012	\$ 1000.00
<input type="checkbox"/>	1650	CHECK		08/30/2012	\$ 1000.00
<input type="checkbox"/>					\$
4. Total only this Page \$ 2200.00					
5. Total of ALL CRO-1210 Pages \$ 36024					
(This line must be on line 6 of Detailed Summary Page CRO-1100)					

25654

Contributions from Individuals

Pg 26 of 27 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
BRIAN BROWN FOR HOUSE	STA-Q956DK-C-001

3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip) KEITH WILLIAMS 1401 Trafalgar Dr. GREENVILLE, NC 28590	b. Job Title/Profession	d. Comments
	ATTORNEY	
	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"/>	1650	CHECK		08/29/2012	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip) JENNIFER RICKARD 2340 Vineyard Dr. Unit M-8 GREENVILLE, NC 28590	b. Job Title/Profession	d. Comments
	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"/>	1650	CHECK		08/2/2012	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip) JAMIE and TRICIA BRILEY 1306 Minuette Pl. GREENVILLE, NC 27858	b. Job Title/Profession	d. Comments
	c. Employer's Name/Specific Field	
		e. Election Sum to Date \$ 50.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	CHECK		08/28/2012	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page	\$ 250.00
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5. Total of ALL CRO-1210 Pages	\$ 36024
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

35100

Contributions from Individuals

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

27 JPM Pg 27 of 27 Amendment Yes No

1. Committee Full Name (and Fund if applicable)			2. ID Number																																
BRIAN BROWN FOR HOUSE			STA-Q956DK-C-001																																
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Job Title/Profession</td> <td colspan="4">d. Comments</td> </tr> <tr> <td colspan="2">Brian Vinson 4204 Treetops Cr WINTERVILLE, NC 28590</td> <td colspan="4"></td> </tr> <tr> <td colspan="2">c. Employer's Name/Specific Field</td> <td colspan="4"></td> </tr> <tr> <td colspan="2"></td> <td colspan="4"></td> </tr> <tr> <td colspan="2"></td> <td colspan="4">e. Election Sum to Date \$ 100.00</td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments				Brian Vinson 4204 Treetops Cr WINTERVILLE, NC 28590						c. Employer's Name/Specific Field														e. Election Sum to Date \$ 100.00			
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments																																	
Brian Vinson 4204 Treetops Cr WINTERVILLE, NC 28590																																			
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"/>	1650	CHECK		10/18/12	\$ 100.00																														
<input type="checkbox"/>					\$																														
<input type="checkbox"/>					\$																														
3. Contributor Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Job Title/Profession</td> <td colspan="4">d. Comments</td> </tr> <tr> <td colspan="2"></td> <td colspan="4"></td> </tr> <tr> <td colspan="2">c. Employer's Name/Specific Field</td> <td colspan="4"></td> </tr> <tr> <td colspan="2"></td> <td colspan="4">e. Election Sum to Date \$</td> </tr> </table>						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 \$									
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"/>					\$																														
3. Contributor Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Job Title/Profession</td> <td colspan="4">d. Comments</td> </tr> <tr> <td colspan="2"></td> <td colspan="4"></td> </tr> <tr> <td colspan="2">c. Employer's Name/Specific Field</td> <td colspan="4"></td> </tr> <tr> <td colspan="2"></td> <td colspan="4">e. Election Sum to Date \$</td> </tr> </table>						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 \$									
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 \$ 100.00																																			
5. Total of ALL CRO-1210 Pages \$ 36 024 <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>																																			

In-Kind Contributions

Pg 01 of 01 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	
BRIAN BROWN FOR HOUSE			STA-Q956DVC-C-401	
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	
NC REPUBLICAN PARTY PO BOX 12905 RALEIGH, NC 27605		<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input checked="" 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		
RESEARCH EXPENSE	07/25/2012	\$ 6700.00		
RESEARCH EXPENSE	09/27/2012	\$ 4400.00		
DIRECT MAIL	10/04/2012	\$ 6606.41		
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	
NC REPUBLICAN PARTY PO BOX 12905 RALEIGH, NC 27605		<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input checked="" 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		
RESEARCH	10/18/2012	\$ 4400.00		
		\$		
		\$		
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	
		<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 \$				
5. Total of ALL CRO-1510 Pages \$				
(This line must be on line 17 of Detailed Summary Page CRO-1100)				

Brooks

Disbursements

Pg 1 of 91 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
BRIAN BROWN FOR HOUSE					STA-Q956 DK-C-001
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 type="checkbox"/> Add	<input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Atavala 620 Red Banks Rd. Greenville, NC 27858					BUSINESS LUNCH
e. 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
1650	CHECK CASH	O	09/24/12	\$ 24.76	CAMPAIGN BUSINESS LUNCH
				\$	
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
The Met Deli 115 E. Red Banks Rd. Greenville, NC 27858					
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
1650	CHECK CRD	O	09/13/12	\$ 16.61	CAMPAIGN BUSINESS LUNCH
				\$	
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
W. Charles Store 9905 600SE. GREENVILLE BLVD GREENVILLE, NC 27858					
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
1650	CHECK CRD	K	09/12/2012	\$ 24.92	BUTTONS FOR CAMP.
				\$	
5. Total only this Page					
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)					
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

Pg 2 of 4 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	
BRIAN BROWN FOR HOUSE				STA-Q956DJK-C-101	
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					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Greenville MPO Greenville, NC 27834					
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
1650	CHECK CRD	<u>I</u>	08/20/2012	\$ 180.00	
				\$	
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	
GRU MPO Greenville, NC 27834					
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
1650	CHECK CRD	<u>I</u>	09/07/2012	\$ 45.00	
				\$	
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	
G-VILLE MPO Greenville, NC 27834					
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
1650	CHECK CRD	<u>T</u>	09/28/2012	\$ 90.00	
				\$	
5. Total only this Page \$ 315.00					
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) \$ 304.79					
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) 381.29					

Disbursements

Pg

3

of

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
ARIAN BROWN FOR HOUSE					STA-Q956 DK-C-101
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 (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
STAPLES 600 E. GREENVILLE BLVD GREENVILLE, NC 27834					
			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
1650	CHECK CRD	K	08/20/2012	\$ 24.01	STATIONARY
				\$	
4. Payee Information			<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
STAPLES 600 E. GVL BLVD GREENVILLE, NC 27834					
			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
1650	CHECK CRD	K	09/12/2012	\$ 54.86	PRINTER INK
				\$	
4. Payee Information			<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
STAPLES 600 E. GVL BLVD GREENVILLE, NC 27834					
			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
1650	CHECK CRD	K	09/28/2012	\$ 70.60	STATIONARY
				\$	
5. Total only this Page					
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)					
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)					

530 74

30479
~~1730681~~

Disbursements

Pg 4 of 91 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
BRIAN BROWN FOR HOUSE					STA - Q956DK-C - 101
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 type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name	d. Comments	
STAPLES 600 E GVL BLVD GREENVILLE, NC 27858					
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
1650	CHE CRD	K	10/11/2012	\$ 85.91	OFFICES SUPPLIES
				\$	
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 600 E. GVL BLVD GREENVILLE, NC 27858					
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
1650	CHE CRD	12		\$	
				\$	
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	
CITY OF RALEIGH MC LAURIN PARKING RALEIGH, NC					
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
1650	CASH	O	07/20/2012	\$ 7.00	PARKING FEE
				\$	
5. Total only this Page					\$ 92.91
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)					
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

Pg 5 of 41 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		
BRIAN BROWN FOR HOUSE			STA - Q956OK-C-101		
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input 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	
FEDEX 321 E.TENTH ST. GREENVILLE, NC 27858			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
1650	CHK CRD	E	08/20/2012	\$ 16.16	
				\$	
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	
RILEY OUTDOOR LLC P.O. BOX 1433 KINSTON, NC 28503			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
1650	CHK	A	10/03/2012	\$ 845.00	DIGITAL BILL BOARD SIGN
				\$	
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	
SIGNS NOW 118-B GVL BLVD SE. GREENVILLE, NC 27858			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
1650	CHK	A	10/12/2012	\$ 214.00	SIGN POST
				\$	
5. Total only this Page					
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)					
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)					

172583

Disbursements

Pg 6 of 911 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	
BRIAN BROWN FOR HOUSE			ST4 Q956 DK-C-101	
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 type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name	d. Comments	
REF EXPRESS PO BOX 8053 GVL, NC 27835		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
1650	CHK	C	09/06/2012 10/01/2012	\$ 382.79
1650	CHK	C	08/30/2012	\$ 158.90
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			k. Required Remarks	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name	d. Comments	
REF EXPRESS PO BOX 8053 GVL, NC 27835		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
1650	CHK	C	08/30/2012	\$ 127.60
1650	CHK	C	10/11/2012	\$ 380.90
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			k. Required Remarks	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name	d. Comments	
REF EXPRESS PO BOX 8053 GVL, NC 27835		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
1650	CK	C	10/21/2012	\$ 501.48
				\$ 1551.67
5. Total only this Page				
6. Total of ALL CRO-1310 Pages				
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) 30479				
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) 21304-8				
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)				
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

Pg 2 of 2111 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 SFA-Q9560K C-101
BRIAN DROWN FOR HOUSE					
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input 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	
CONQUEST COMMUNICATIONS 2812 EMERY PKWY STE. 103 RICHMOND VA 23294					
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
1650	CHK	A	09/25/2012	\$ 6489.15	ROBOCALLS
				\$	
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	
ENTERPRISE LEASE CO. 3525 S. MEMORIAL DR GVL, NC 27834					
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
1650	CHK CRD	O	09/19/2012	\$ 106.16	RENTAL CAR
				\$	
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	
WTIB 201 GENERAL GREENVILLE, NC 27858					
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
1650	CHK CRD	A	09/25/2012	\$ 1250	
				\$	
5. Total only this Page					\$ 7845.31
6. Total of ALL CRO-1310 Pages					\$ 21307.81
(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)					30479
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

Pg

of *8*

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		
<i>BRIAN BLONN FOR HOUSE</i>			STA-095601R-C-101		
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 type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>SIGNS NOW 118-B GVL BLVD GREENVILLE, NC 27858</i>			b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		d. Comments 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
					g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks
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 c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		d. Comments 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
					g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks
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 c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		d. Comments 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
					g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks
5. Total only this Page			\$ <i>214.00</i>		
6. Total of ALL CRO-1310 Pages			\$ <i>30479</i>		
<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>			\$ <i>2130081</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

Pg 89 of 81 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		
<u>BRIAN BROWN FOR HOUSE</u>			<u>STA-Q95G DK-C-101</u>		
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input type="checkbox"/> Operating Expenses			<input checked="" 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	
<u>REPUBLICAN HOUSE CAUCUS RALEIGH, NC</u>					
c. Level Registered (Specify)				e. Election Sum to Date	
<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:				\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1650	CHK	G	10/11/2012	\$ 10000	
				\$	
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	
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:				\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				\$	
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	
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:				\$	
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			\$ 10000		
6. Total of ALL CRO-1310 Pages			\$ 30479		
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)			2430781		
(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)					
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

Pg 10 of 11 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
BRIAN BRAUN FOR HOUSE					STA-C956 DK-C-101
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 type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name	d. Comments	
Malia M. Zoytown PO BOX 30952 RALEIGH, NC 27615					
			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
1650	CHK#1008	C	08/01/2012	\$ 500.00	SERVING SPKR
				\$	
4. Payee Information: <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name	d. Comments	
CREATIVE DIRECT LLC 25 E. MAIN ST. RICHMOND, VA 23219					
			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
1650	CHK	A	08/13/2012	\$ 5157.00	
				\$	
4. Payee Information: <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name	d. Comments	
REPUBLICAN WOMEN OF PITT CO GREENVILLE, NC 27838					
			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
1650	CHK	C	09/20/12	\$ 13.00	LUNCH
				\$	
5. Total only this Page					
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 (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

Pg 11 of 11 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
BRIAN BROWN FOR House					STA - Q956 DK - C - 101
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 type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name	d. Comments	
Coastal Political Strategies 1629 1C STREET NW WASHINGTON, DC 20006					
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:			\$		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1650	CK	O	08/30/2012	\$ 3500.00	CONSULTING
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name	d. Comments	
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:			\$		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name	d. Comments	
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:			\$		
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					\$ 3500.00
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)					
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)					

30532.01

EXHIBIT C

Reports 10/21/2012 - 12/31/2012

Disclosure Report Cover

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

Amendment

Yes

No

I. Committee Information

a. Full Name BRIAN BROWN FOR HOUSE	c. ID Number STA-Q956DK-C-001
b. Mailing Address (include City, State and Zip Code) PO BOX 8053 GREENVILLE, NC 27858	d. Date Filed 01/09/2013
Received JAN 14 2013 Campaign Finance	
e. Phone Number 242-414-77865	

2. Report Year 2012	3. Period Start Date (mandatory) 10/21/2012	4. Period End Date (mandatory) 12/31/2012	5. Treasurer Full Name JAMES EDWARD MOONEY II
------------------------	--	---	--

6. Type of Committee (Check One)	7. Type of Fund (If applicable, check one)	8. Number of Fundraisers this Report 0	9. Type of Report (check only one type of report from one category)	10. Special Report Name	
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund	<input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser		<input type="checkbox"/> Municipal <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	<input type="checkbox"/> State/County <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input checked="" 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	<input type="checkbox"/> Referendum <input type="checkbox"/> Organization <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special

11. Account Information	12. Account Information
a. Financial Institution Full Name TRUST ATLANTIC BANK	a. Financial Institution Full Name
b. Purpose CAMPAIGN FUND MANAGEMENT	c. Account Code 1650
d. Period Begin Balance \$ 11260.19	e. Account Code
	f. Purpose
	g. Account Code
	d. Period Begin Balance
	\$

CERTIFICATION

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.

JAMES EDWARD MOONEY

Printed Name of Signer

James E Mooney
Signature of Appointed Treasurer

01/09/2013

Date

FOR OFFICE USE ONLY

Date Received: 1/14/13	Employee: 	Delivery Method <input checked="" type="checkbox"/> Normal Mail
Date Postmarked: 1/10/13	Employee: 	<input type="checkbox"/> Registered Mail
Date Scanned: 1/14/13	Employee: 	<input type="checkbox"/> Hand Delivered
Date Data Entered:	Employee:	<input type="checkbox"/> Electronically Filed
		<input type="checkbox"/> Signer has not received mandatory training

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

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

Incorrect?

Amendment
 Yes No

Detailed Summary

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
BRIAN BROWN FOR HOUSE	4 TH QTR	STA-Q956DK-C-001
Start of Election Cycle: January 1, 2012	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	\$ 11260.00	\$ 108999.49
RECEIPTS		
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 0.00	\$ 295.00
6) Contributions from Individuals (CRO-1210)	\$ 1015.00	\$ 53781.28
7) Contributions from Political Party Committees (CRO-1220)	\$ 0.00	\$ 22106.41
8) Contributions from Other Political Committees (CRO-1230)	\$ 3500.00	\$ 18770.80
9) Loan Proceeds (CRO-1410)	\$ 2770	\$ 2770
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)	\$ 200	\$ 0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$ 1854	\$ 108999.49
EXPENDITURES		
13) Disbursements 13a) Operating Expenditures (CRO-1310)	\$ 22695.58	\$ 53175.39
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$ 0.00	\$ 10000.00
13c) Coordinated Party Expenditures (CRO-1310)	\$ 0.00	\$ 0.00
14) Aggregated Non-Media Expenditures (CRO-1315)	\$ 411.09	\$ 461.05
15) Loan Repayments (CRO-1420)	\$ 2758.70	\$ 2758.70
16) Refunds/Reimbursements From the Committee (CRO-1320)	\$ 0.00	\$ 0.00
17) In-Kind Contributions (CRO-1510)	\$ 0.00	\$ 24536.21
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 25865.37	\$ 90931.35
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 3939.63	\$
LIABILITIES AND NET ASSETS		
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-2200)	\$	\$
28) Contributions to be Refunded (CRO-1215)	\$	\$

Should be #107

* NOT CORRECT
(Add #4)

NOT CORRECT

Contributions from Individuals

Pg 1 of 3 Yes No

Amendment
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		
BRIAN BROWN FOR HOUSE			STA-Q956DK-C-001		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Ronald & Ginny Cooper 2617 Church St Winterville, NC 28590			b. Job Title/Profession	d. Comments	
			c. Employer's Name/Specific Field		
			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"/>	1650	Check		10/19/12	\$ 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) Martin L. Welch Mary L. Welch JT WRC 2537 BROOK CANG Winterville, NC 28590			b. Job Title/Profession	d. Comments	
			c. Employer's Name/Specific Field		
			e. Election Sum to Date		
			\$ 30.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	Check		11/6/2012	\$ 30.00
<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) Gordon D Fulp Pell P Fulp 109 Asbury Rd Greenville, NC			b. Job Title/Profession	d. Comments	
			c. Employer's Name/Specific Field		
			e. Election Sum to Date		
			\$ 25.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	Check		10/19/12	\$ 25.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page \$ 305.00					
5. Total of ALL CRO-1210 Pages \$ 1045					
(This line must be on line 6 of Detailed Summary Page CRO-1100)					

Contributions from Individuals

Pg 1 of 5 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	
BRIAN BROWN FOR HOUSE					STA-Q956DK-C-001	
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	
			c. Employer's Name/Specific Field			
C. Joe Sturz 116 Oxford Rd Greenville, NC					e. Election Sum to Date \$ 10.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1650	CHK		10/18/12	\$ 10.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
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	
			c. Employer's Name/Specific Field			
Alice G. Horne Stephen F. HORNE 559 Cedar Ridge Dr Winterville, NC 27590					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"/>	1650	CHK			\$ 300.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
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	
			c. Employer's Name/Specific Field			
Paul A. RICE 161 Vernon White Rd Winterville, NC 28590					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"/>	1650	CHK		10/24/12	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page \$ 410.00						
5. Total of ALL CRO-1210 Pages \$ 1015						
(This line must be on line 6 of Detailed Summary Page CRO-1200)						

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
BRIAN BROWN FOR HOUSE				STA-Q956DK-C-001	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>E. Bradley Evans 181 Hilly Hills Rd Greenville, NC 27858</i>					
b. Job Title/Profession c. Employer's Name/Specific Field		d. Comments			
e. Election Sum to Date \$ <u>100.00</u>					
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	<u>1650</u>	CHEK		<u>10/18/12</u>	\$ <u>100.00</u>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Chris Taylor Carolyn P. Taylor 603 Kensington Dr Greenville, NC 27858</i>					
b. Job Title/Profession c. Employer's Name/Specific Field		d. Comments			
e. Election Sum to Date \$ <u>200.00</u>					
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	<u>1650</u>	CHEK			\$ <u>200.00</u>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) Ed Mooney 453 Stone Gate Dr Greenville NC					
b. Job Title/Profession c. Employer's Name/Specific Field		d. Comments			
e. Election Sum to Date \$					
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	<u>1650</u>	CHEK			\$
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page \$ <u>300.00</u>					
5. Total of ALL CRO-1210 Pages \$ <u>1015</u> <small>(This line must be on line 6 of Detailed Summary Page CRO-1160)</small>					

Contributions from Other Political Committees

Pg 1 of 2

Amendment
 Yes 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		
BRIAN BROWN FOR HOUSE		STA - Q956DK-C-01		
3. Contributor Information: <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum		d. Comments
John Bell Committee 501 Holland Hill Dr Goldsboro, NC 27530		c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
				e. Election Sum to Date \$ 500.00 2500
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
1650	CK		11/1/12	\$ 500.00
				\$
				\$
3. Contributor Information: <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum		d. Comments
STAM FOR HOUSE PO Box 1000 APEX, NC 27502		c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
				e. Election Sum to Date \$ 2500
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
1650	CHK		11/1/12	\$ 500.00
				\$
				\$
3. Contributor Information: <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum		d. Comments
John Blust Campaign Committee		c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
				e. Election Sum to Date \$ 500.00
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
1650	CHK			\$ 500.00
				\$
				\$
4. Total only this Page \$ 1500.00				
5. Total of ALL CRO-1230 Pages \$ 3500.00 <small>(This line must be on line 8 of Detailed Summary Page CRO-1100)</small>				

Contributions from Other Political Committees

Pg

2

of

2

Amendment

 Yes No

Use this form to report contributions from other candidate, referendum or PAC committees

1. Committee Full Name (and Pard if applicable)		2. ID Number		
BRIAN BROWN FOR HOUSE		STA-Q956 DK-C-001		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) HORN FOR NC HOUSE 5909 BLUEGRASS HALL LN Weddington, NC 28104				
		b. Type of Committee	d. Comments	
		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum		
		c. Level Registered (Specify)		
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
			e. Election Sum to Date \$ 500.00	
f. Account Code	g. Form of Payment	b. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
1650	CHK		10/31/12	\$ 500.00
				\$
				\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) Dean ARP FOR NC HOUSE PO BOX 1571 MONROE, NC 28111-1501				
		b. Type of Committee	d. Comments	
		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum		
		c. Level Registered (Specify)		
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
			e. Election Sum to Date \$ 500.00	
f. Account Code	g. Form of Payment	b. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
1650	CHK			\$ 500.00
				\$
				\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) Edgar Starnes Campaign 6715 Lakeview Terrace Hickory, NC 28601				
		b. Type of Committee	d. Comments	
		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum		
		c. Level Registered (Specify)		
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
			e. Election Sum to Date \$ 1000.00	
f. Account Code	g. Form of Payment	b. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
1650	CHK		10/24/12	\$ 1000.00
				\$
				\$
4. Total only this Page \$ 2000.00				
5. Total of ALL CRO-1230 Pages \$ 3500.00				
(This line must be on line 8 of Detailed Summary Page CRO-1160)				

Aggregated Non-Media Expenditures

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

Amendment
 Yes No

Page 1 of _____

1. Committee Full Name (and Fund if applicable)				2. ID Number		
BRIAN BROWN FOR HOUSE				STA-Q956DK-C-001		
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 checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1650	Deb/Crd	K	10/25/2012	\$ 5.89	Paper, ink, etc
<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	1650	Deb/Crd	K	10/29/2012	\$ 35.57	Paper supplies
<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	1650	"	K	10/30/2012	\$ 15.78	Business lunch
<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	1650	"	I	10/30/2012	\$ 18.90	USPS
<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	1650	"	K	10/30/2012	\$ 30.00	Gas
<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	1650	"	O	11/13/2012	\$ 25.18	Car rental
<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	1650	"	O	11/16/2012	\$ 37.00	Car rental
<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	1650	"	O	11/23/2012	\$ 30.00	Non Sufficient Funds Fee
<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	1650	"	O	11/29/2012	\$ 37.00	Rental Car
<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	1650	"	K	12/7/2012	\$ 29.95	Paper Supplies
<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	1650	"	K	12/12/2012	\$ 23.97	Business Lunch
<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	1650	"	K	12/17/2012	\$ 4.15	Business Lunch
<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	1650	"	K	12/17/2012	\$ 45.75	GAS
<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	1650	"	E	12/24/2012	\$ 50.00	
<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	1650	"	K	12/28/2012	\$ 17.95	Business Lunch
<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove					\$	
<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove					\$	
<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove					\$	
<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove					\$	
4. Total only this Page				\$	411.09 411.09	
5. Total of ALL CRO-1315 Pages <small>(This line must be on line 14 of Detailed Summary Page CRO-1100)</small>				\$	411.09 411.09	
6. Purpose Codes (I = detailed expenditure code in (d) above)						
E - Salaries I - Postage O* - Other	B* - Printing F* - Equipment J - Penalties	C* - Fundraising G - Political Party K* - Office Expenses	D - To Another Candidate H* - Holding Public Office Expenses Q* - Donations to Legal Expense Fund			
* Codes require detailed explanation in required remarks field (g)						

Disbursements

Pg 1 of 68 Amendment

Yes

N

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	
BRIAN BROWN FOR HOUSE				STA-Q956DK-C-001	
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
SIGNS NOW GREENVILLE, NC					
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	\$ 3162.00
					\$ 428.00 (RM)
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1650	Debit	B	10/24/2012	\$ 214.00	Signs
				\$	
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
PIP PRINTING Greenville, NC					
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	\$ 1421.23
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1650	Debit	B	10/26/2012	\$ 1084.18	Flyers
				\$	
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
OO Shirts California					
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	\$ 273.13
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1650	Debit	K	10/29/2013	\$ 273.13	Staff Shirts
				\$	
5. Total only this Page					
\$ 1571.31					
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)					
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

Pg 2 of 8 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 local office name)			2. ID Number		
BRIAN BROWN FOR HOUSE			STA-Q956DK-C-001		
3. 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					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality		d. Comments e. Election Sum to Date \$ 8971.55
Congest Communications Virginia, Richmond 23264 2812 Emery Pkwy					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1650	Debit	A	10/29/2012	\$ 2482.40	Advertisement
				\$	
4. Payee Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality		d. Comments e. Election Sum to Date \$ 1653.15
USPS Greenville, NC					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1650	Debit	I	10/30/2012	\$ 180.00	
				\$	
4. Payee Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality		d. Comments e. Election Sum to Date \$ 3553.15
FedEx Express Greenville, NC					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1650	CHK#6000	O	10/22/12	\$ 501.48	Lunch
1650	CHK	H	12/10/12	\$ 500.00	Swearing In Ceremony
5. Total only this Page			\$ 4663.88		
6. Total of ALL CRO-1310 Pages			\$ 17915.01		
<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>					
7. Purpose Codes (List detailed explanation in required remarks page 13c)					
A* - Media		B* - Printing		C* - Fundraising	
E - Salaries		F* - Equipment		G - Political Party	
I - Postage		J - Penalties		K* - Office Expenses	
O* - Other				D - To Another Candidate	
				H* - Holding Public Office Expenses	
				Q* - Donation to Legal Expense Fund	
<small>* Codes require detailed explanation in required remarks page 13c</small>					

Disbursements

Pg 3 of 8

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	
BRIAN BROWN FOR HOUSE				STA-Q956DK-C-001	
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 type="checkbox"/> Add	<input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Atton Goodwin			b. Coordinated Committee Name c. Level Registered (Specify)		d. Comments
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ 3250.00
f. Account Code	g. Form of Payment	b. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1650	CHK	0	10/27/12	\$ 1250.00	Training
1650	CHK	0	10/17/12	\$ 725.00	Missed check from 17th Training
4. Payee Information			<input type="checkbox"/> Add	<input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) East Coast Wings Greenville, NC			b. Coordinated Committee Name c. Level Registered (Specify)		d. Comments
			<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	b. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1650	Debit + Sche	0	11/05/2012	\$ 66.88	Team Staff lunch
				\$	
4. Payee Information			<input type="checkbox"/> Add	<input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) #156 Food Lion Greenville NC			b. Coordinated Committee Name c. Level Registered (Specify)		d. Comments
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ 204.43
f. Account Code	g. Form of Payment	b. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1650	Debit	0	11/6/2012	\$ 204.43	Office worker lunch
				\$	
5. Total only this Page					
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: (List detailed expenditure code in (b.) 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

Pg 4 of 8 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		
BRIAN BROWN FOR HOUSE			STA-Q956DK-C-001		
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input 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 (include city, state, & zip)			b. Coordinated Committee Name	d. Comments	
Cooke News Paper Greenville					
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
1650	Debit	A	11/07/12	\$ 12.00	Ad
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name	d. Comments	
Enterprise Rental Greenville, NC					
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		
			\$ 205.84		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1650	Debit	O	11/13/12	\$ 55.86	Rental Car
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name	d. Comments	
Conquest Communications					
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		
			\$ 9034.84		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1650	Debit	A	11/13/12	\$ 2000.00	Robo-calls
1650	Debit	A	11/16/12	\$ 545.69	Robo-calls
5. Total only this Page					
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)					
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

Pg 5 of 8

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		
BRIAN BROWN FOR HOUSE			STA-Q956DK-C-001		
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 type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Inner Banks Media			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
1650	CHK	A	10/31/2012	\$ 400	Radio Ads
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Ashton Goodwin			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	
			\$ 5250.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1650	CHK	O	11/7/2012	\$ 1500	Training
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Coastal Political Strategies			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	
			\$ 11950		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1650	CHK	O	10/27/2012	\$ 1500.00	Political Cons.
500	CHK	O	11/19/2012	\$ 500	
5. Total only this Page			\$ 3900		
6. Total of ALL CRO-1310 Pages			\$ 11950 22645.58		
(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)					
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

Pg

6

of

90

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
BRIAN BROWN FOR HOUSE				STA-Q956DK-C-001
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 (include city, state, & zip)		b. Coordinated Committee Name	d. Comments	
Rop Express Catering Greenville, NC				
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		
		\$ 3051.67		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount
1650	CHK	H	12/10/2012	\$ 1500.00
1650	CHK	H	12/28/2012	\$ 1500.00
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name	d. Comments	
USPS GREENVILLE, NC				
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		
		\$ 125.65.19		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount
1650	CHK	I	12/17/2012	\$ 135.00
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	
Buffalo Wild Wings Greenville				
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		
		\$ 79.96		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount
1650	CHK	O	12/24/2012	\$ 79.96
5. Total only this Page				
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>				
\$ 3214.96				
\$ 22695.58				
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	
* Codes require detailed explanation in required remarks field (k)				

DUPLICATE

Disbursements

Pg

of

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		
BRIAN BROWN FOR HOUSE			STA-Q956DK-C-001		
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					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		d. Comments
GOOGLE - KIMBALL					e. Election Sum to Date \$ 285.12
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1650	Debit	A	10/25/2012	\$ 285.12	Google
				\$	
4. Payee Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		d. Comments
Staples Greenville, NC					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
1650	Debit	R	11/20/2012	\$ 94.33	Paper Supplies
				\$	
4. Payee Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		d. Comments
Conquest Comm					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
1650	Debit	A	11/26/2012	\$ 545.69	Robo Call
				\$	
5. Total only this Page					
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>					
\$ 2269558					
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

Pg 8 of

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	
BRIAN BROWN FOR HOUSE				STA-Q956DK-C-001	
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					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name	d. Comments	
EVOLVE INC Greenville, NC					
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	
				\$ 3560.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1650	CK	A	10/31/2012	\$ 3560.43	
				\$	
4. Payee Information					
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					
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					
\$ 3560.43					
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)					
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)					

Loan Proceeds

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

Pg 1 of 1 Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)		2. ID Number		
BRIAN BROWN FOR HOUSE		STA-Q956DK-L-001		
3. Lender 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	
Brian Brown PO Box 8053 Greenville, NC 27858			Self Loan	
		e. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)	
			10/15/2012	
		f. End Date (mm/dd/yyyy)	12/24/2012	
g. Rate	h. Security Pledged	i. Account Code	j. Form of Payment	k. Amount
0.0%	0,0	1650	CHE	\$ 2770
l. Full Name of Lending Institution			m. Loan Number	
4. Endorsers/Makers (The people who guarantee the loan.)				
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field		
BRIAN BROWN PO BOX 8053 GREENVILLE, NC 27858				
d. Percentage	e. Amount			
100.00 %	\$ 2770			
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field		
d. Percentage	e. Amount			
%	\$			
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field		
d. Percentage	e. Amount			
%	\$			
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				
(This line must be on line 9 of Detailed Summary Page CRO-1410)				
\$ 2770.00				

#10 Reimbursements to
Constituee

Loan Repayments

Use this form to report payments on an existing loan.

Pg 1 of 1 Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)				2. ID Number
BRIAN BROWN FOR HOUSE				5m-Q9560K-C-01
3. Lender Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments
Brian Brown				
				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
\$ 2000.00	1650	CHK	11/8/2012	\$ 2000.00
\$ 770.00	1650	CHK	12/24/2012	\$ 758.70
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
\$				\$
\$				\$
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 \$ 2758.70				
5. Total of ALL CRO-1420 Pages \$ 2758.70				
(This Line must be on Line 15 of Detailed Summary Page CRO-1400)				

Forgiven Loans

Use this form to report any loan which has been forgiven by the lender.
A Forgiven loan statement (CRO-6200) must accompany each forgiven loan.

Pg 1 of 1 Amendment Yes No

1. Committee Full Name (and Fund if applicable)	2. ID Number
BRIAN BROWN FOR HOUSE	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) BRIAN BROWN P O BOX 8053 GREENVILLE, NC 27858	
b. Comments <hr/>	
c. Original Loan Date (mm/dd/yyyy) <input type="text" value="10/15/2013"/> f. Election Sum to Date <input type="text" value="\$ 2770"/> d. Original Loan Amount <input type="text" value="\$ 2770.00"/> g. Date (mm/dd/yyyy) <input type="text" value="12/24/2012"/> e. Remaining Loan Balance <input type="text" value="\$ 11.30"/> h. Forgiven Amount <input type="text" value="\$ 11.30"/>	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) <hr/>	
b. Comments <hr/>	
c. Original Loan Date (mm/dd/yyyy) <input type="text" value=""/> f. Election Sum to Date <input type="text" value="\$"/> d. Original Loan Amount <input type="text" value="\$"/> g. Date (mm/dd/yyyy) <input type="text" value=""/> e. Remaining Loan Balance <input type="text" value="\$"/> h. Forgiven Amount <input type="text" value="\$"/>	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) <hr/>	
b. Comments <hr/>	
c. Original Loan Date (mm/dd/yyyy) <input type="text" value=""/> f. Election Sum to Date <input type="text" value="\$"/> d. Original Loan Amount <input type="text" value="\$"/> g. Date (mm/dd/yyyy) <input type="text" value=""/> e. Remaining Loan Balance <input type="text" value="\$"/> h. Forgiven Amount <input type="text" value="\$"/>	
4. Total only this Page <input type="text" value="\$ 11.30"/>	
5. Total of ALL CRO-1440 Pages <input type="text" value="\$ 11.30"/> <small>(This line must be on line 26 of Detailed Summary Page CRO-1160)</small> <small>The lender information should contain the same information as supplied on the original loan proceed statement.</small>	

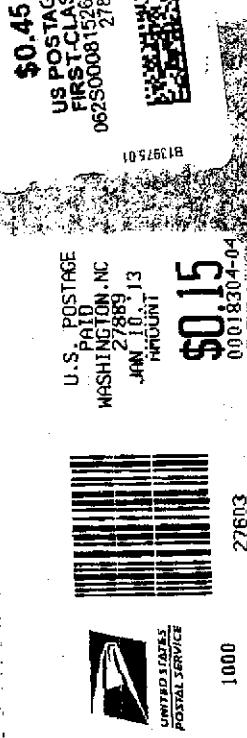
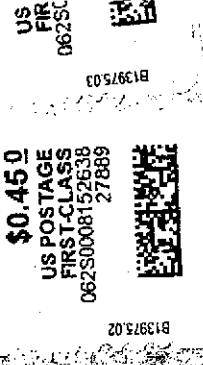


EXHIBIT D

Reports 1/01/2013 – 6/30/2013

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

a. Full Name BRIAN BROWN FOR HOUSE	c. ID Number STA-Q956DK-C-001
b. Mailing Address (include City, State and Zip Code) P.O. BOX 8053 GREENVILLE, NC 27858	d. Date Filed 07/25/2013
RECEIVED JUL 29 2013 N.C. BOARD OF ELECTIONS	

2013 01/01/13 06/30/13 James E. Mooney II

<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:	<input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser <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	<input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input checked="" type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<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
---	---	--	--

a. Financial Institution Full Name TRUST ATLANTIC BANK	a. Financial Institution Full Name
b. Purpose CAMPAGN FUND MGMT.	c. Account Code 1650
d. Period Begin Balance \$ 55.29	b. Purpose <i>Not Correct</i>
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.

JAMES EDWARD MOONEY II

Printed Name of Signer

Signature of Appointed Treasurer

07/24/2013

Date

FOR OFFICE USE ONLY			
Date Received: 7/29/13	Employee: 700	Delivery Method	
Date Postmarked: 7/26/13	Employee: 700	<input checked="" type="checkbox"/>	Normal Mail
Date Scanned: 7/29/13	Employee: 700	<input type="checkbox"/>	Registered Mail
Date Data Entered:	Employee:	<input type="checkbox"/>	Hand Delivered
		<input type="checkbox"/>	Electronically Filed
		<input type="checkbox"/>	Signer has not received mandatory training

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

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

Detailed Summary

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

Not correct

Amendment

Yes

No

BRIAN BROWN FOR HOUSE		MID YEAR	STA-Q956DK-C-001
Start of Election Cycle:	January 1, 2012	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	<i>✓ 10000</i>	\$ 55,29	\$ -
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 0	\$ 0
6) Contributions from Individuals	(CRO-1210)	\$ 6000	\$ 6000
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0000	\$ 0000
8) Contributions from Other Political Committees	(CRO-1230)	\$ 4000	\$ 4000
9) Loan Proceeds	(CRO-1410)	\$ 0	\$ 0
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$ 0	\$ 0
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0	\$ 0
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	\$ 0	\$ 0
11c) Outside Sources of Income	(CRO-1250)	\$ 0	\$ 0
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$ 0	\$ 0
11e) Exempt Purchase Price Sales	(CRO-1265)	\$ 0	\$ 0
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 10000	\$ 10000
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 497.75	\$ 497.75
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 0	\$ 0
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0	\$ 0
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 0	\$ 0
15) Loan Repayments	(CRO-1420)	\$ 0	\$ 0
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$ 0	\$ 0
17) In-Kind Contributions	(CRO-1510)	\$ 0	\$ 0
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 497.75	\$ 497.75
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 9557.54	\$ 9557.54
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 0	
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$ 0	
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$ 0	
24) Account Transfers Within the Committee	(CRO-1720)	\$ 0	
25) Administrative Support	(CRO-1710)	\$ 0	\$ 0
26) Forgiven Loans	(CRO-1440)	\$ 0	\$ 0
27) 48-Hour Notice Reports Sum	(CRO-2200)	\$ 0	\$ 0
28) Contributions to be Refunded	(CRO-1215)	\$ 0	\$ 0

*Not
Correct*

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.

BRIAN BROWN FOR HOUSE				STA-Q956 DK-Cool	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Royce Everett Jr. 118 Robin Rd Greenville, NC 27858					
c. Employer's Name/Specific Field					
				e. Election Sum to Date	
				\$ 4000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1b50	Check		06/15/13	\$ 4000.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Marcus Albernaz 3800 Charleston Ct. Greenville, NC 27834					
c. Employer's Name/Specific Field				e. Election Sum to Date	
				\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1b50	check		06/13/13	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Leigh Jeffreys Fanning Greenville, NC 27858					
c. Employer's Name/Specific Field				e. Election Sum to Date	
				\$ 1000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1b50	Check		06/20/13	\$ 1000.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
				\$ 5500.00	
				\$ 6000.00	

Contributions from Individuals

Pg 2 of 2

Yes No

Amendment

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

BRIAN BROWN FOR HOUSE				STA -Q956 DK-QEDU	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
BRIAN BROWN GREENVILLE, NC		c. Employer's Name/Specific Field			
				e. Election Sum to Date \$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	Check		01/29/2013	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
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"/>					\$
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"/>					\$
				\$ 500.00	
				\$ 6000.00	

Contributions from Other Political Committees

Pg 1 of 1

Amendment

Yes No

Use this form to report contributions from other candidate, referendum or PAC committees

1. Contribution Information			2. Contribution Information	
<input type="checkbox"/> Add <input type="checkbox"/> Remove BRIAN BROWN FOR HAST			<input type="checkbox"/> Add <input type="checkbox"/> Remove XA-Q956DK-C-001	
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Type of Committee <input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum	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 \$ 4000.00	
f. Account Code 1650 Check	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy) 6/29/13	j. Amount \$ 4000.00
				\$
				\$
3. Contribution Information			4. Contribution Information	
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Type of Committee <input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum	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. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
				\$
				\$
				\$
5. Total Contributions			6. Total Contributions	
Total of all CRO-1230 Pages <i>Note: This must be one page of detailed summary for CRO-1230</i>			\$ 4000.00 \$ 4000.00	

Disbursements

Pg 1 of 2

Amendment
 Yes No

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

BRIAN BROWN FOR HOUSE						STA-Q956DKC-00
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	d. Comments e. Election Sum to Date \$ 241.93		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1650	Check/Debit	K	02/01/2013	\$ 241.93	Paper Supplies	
				\$		
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	d. Comments e. Election Sum to Date \$ 33.60		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1650	Check/Debit	O		\$ 24.77	BUSINESS LUNCH	
1650	Check/Debit	O.		\$ 8.83	BUSINESS MTG.	
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	d. Comments e. Election Sum to Date \$ 64.60		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1650	CHECK/DEBIT	O	02/07/2013	\$ 64.60	FUEL	
				\$		
(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)						\$ NA7.75

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			

Disbursements

Pg 2 of 2 Amendment
 Yes No

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

BRIAN BROWN FOR HOUSE

STA-Q9560K-C-001

<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
FOOD LION #165 GREENVILLE, NC					
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	
				\$ 126.37	
e. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1650	CHECK/DEBIT	0	02/07/2013	\$ 126.37	STAFF LUNCH
				\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
ROCK SPRINGS GREEN VILE, NC					
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	
				\$ 26.25	
e. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1650	CHECK/DEBIT	0	02/02/2013	\$ 26.25	BUSINESS LUNCH
				\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
TRUST ATLANTIC BANK GREEN VILE, NC					
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	
				\$ 5.00	
e. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1650	DEBIT	0	02/28/2013	\$ 5.00	SERVICE CHARGE
				\$	
				\$ 157.62	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)				\$ 157.62	
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)				\$ 497.75	
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)					

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			

**BRIAN BROWN, HOUSE of REPRESENTATIVES
DISTRICT 9**

**Greg M. Fornshell
Treasurer**

EXHIBIT E

Reports 7/01/2013 ----- 12/31/2013

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.

a. Full Name BRIAN BROWN FOR HOUSE	RECEIVED	e. ID Number STA-Q956DK-C-001
b. Mailing Address (include City, State and Zip Code) PO BOX 8053 GREENVILLE, NC 27858	JAN 30 2014	d. Date Filed 01/30/2014
	N.C. BOARD OF ELECTIONS	e. Phone Number _____

2013	07/01/2013	12/31/2013	GREG M FORNSHELL
------	------------	------------	------------------

<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidate Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other: _____	Municipal <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	State/County <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input checked="" type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	Referendum <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
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a. Financial Institution Full Name TRUST ATLANTIC BANK	b. Financial Institution Full Name
c. Purpose CAMPAIGN FUND MANAGEMENT	d. Account Code 1650
4. Period Begin Balance	5. Period End Balance
\$ 3	\$ 9,557.54

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

GREG M. FORNSHELL

Printed Name of Signer

GREG M. FORNSHELL

Signature of Appointed Treasurer

01/30/2014

Date

FOR OFFICE USE ONLY

Date Received: <u>30 Jan '14</u>	Employee: <u>JSB</u>	Delivery Method: <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" 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.

*Not
Correct*

Detailed Summary

Amendment
 Yes No

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

1. Committee Full Name (and Filing If applicable)	2. Type of Report	3. ID Number
BRIAN BROWN FOR HOUSE	2013 Year End Semi-Annual	STA-Q956DK-C-001
Start of Election Cycle: January 1, 2013		Total this Reporting Period
4) Cash on Hand at Start	\$ 9,557.54	\$ 55.29
RECEIPTS		
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 0.00	\$ 0.00
6) Contributions from Individuals (CRO-1210)	\$ 14,250.00	\$ 20,250.00
7) Contributions from Political Party Committees (CRO-1220)	\$ 0.00	\$ 0.00
8) Contributions from Other Political Committees (CRO-1230)	\$ 3,750.00	\$ 7,750.00
9) Loan Proceeds (CRO-1410)	\$ 0.00	\$ 0.00
10) Refunds/Reimbursements to the Committee (CRO-1240)	\$ 5,000.00	\$ 5,000.00
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)	\$ 0.70	\$ 0.70
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)	\$ 23,000.70	\$ 33,000.70
EXPENDITURES		
13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$ 8,326.17	\$ 8,823.92
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$ 8,300.00	\$ 8,300.00
13c) Coordinated Party Expenditures (CRO-1310)	\$ 0.00	\$ 0.00
14) Aggregated Non-Media Expenditures (CRO-1315)	\$ 55.76	\$ 55.76
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)	\$ 0.00	\$ 0.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 16,681.93	\$ 17,179.68
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 15,876.31	\$ 15,876.31
ADDITIONAL INFORMATION		
20) Non-Monetary Gifts Given to Other Committees (CRO-1350)	\$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$ 0.00	
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

Not
Correct

2471.17

Not
Correct

Contributions from Individuals

Pg 1 of 4

Amendment
 Yes No

Use this form to report individual contributions over \$30 or contributions under \$30 if form CRO 1205 is not used.

BRIAN BROWN FOR HOUSE		STA-Q956DK-C-001
a. Full Name, Mailing Address & Phone (Include city, state, & zip)	b. Job Title/Profession DOCTOR	c. Contribution EASTERN CAROLINA ENT

d. Election Sum to Date
\$ 1,000.00

E Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	Check		12/31/2013	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

a. Full Name, Mailing Address & Phone (Include city, state, & zip)	b. Job Title/Profession CEO	c. Contribution TIME INVESTMENT CORPORATION
GAIL N BLANTON 3069 DARTMOUTH DRIVE GREENVILLE, NC 27858		d. Election Sum to Date \$ 2,000.00

d. Election Sum to Date
\$ 2,000.00

E Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	Check		12/31/2013	\$ 2,000.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

a. Full Name, Mailing Address & Phone (Include city, state, & zip)	b. Job Title/Profession OWNER	c. Contribution FUTURE FINANCIAL SERVICES
L ELMER BRITT 108 LAKEVIEW DRIVE GREENVILLE, NC 27858		d. Election Sum to Date \$ 500.00

d. Election Sum to Date
\$ 500.00

E Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	Check		12/31/2013	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

\$ 3,000.00

\$ 14,250.00

Contributions from Individuals

Pg 2 of 4

Amendment
 Yes No

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

BRIAN BROWN FOR HOUSE					STA-Q956DK-C-001
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession EXECUTIVE	d. Commitments		
JOHN D BRYAN PO BOX 1929 LAKE OSWEGO, OR 97035-0019		c. Employer's Name/Specific Field RETIRIED	e. Election Seats to Date \$ 4,000.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	Check		10/11/2013	\$ 4,000.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession INSURANCE AGENT	d. Commitments		
WILLIAM L BYRD JR PO BOX 3725 GREENVILLE, NC 27836		c. Employer's Name/Specific Field NATIONWIDE	e. Election Seats 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"/>	1650	Check		12/31/2013	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession EXECUTIVE VICE PRESIDENT	d. Commitments		
EDWIN L CLARK JR 426 WEST LONGMEADOW ROAD GREENVILLE, NC 27838		c. Employer's Name/Specific Field WILCOHESS LLC	e. Election Seats to Date \$ 1,000.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	Check		12/31/2013	\$ 1,000.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
					\$ 5,250.00
					\$ 14,250.00

CRO-1210

NC State Board of Elections

April 2007

Contributions from Individuals

Pg. 3 of 4 Amendment Yes No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1201 is not used.

BRIAN BROWN FOR HOUSE				STA-Q956DK-C-001	
a. Full Name, Mailing Address & Phone (Include city, state, & zip)		b. Job Title/Profession BUSINESS OWNER	d. Comments		
LEIGH J FANNING 3606 WYNESTON ROAD GREENVILLE, NC 27858		c. Employer's Name/Specific Field SELF	e. Election/Sem to Date \$ 2,000.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	Check		10/28/2013	\$ 1,000.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
a. Full Name, Mailing Address & Phone (Include city, state, & zip)		b. Job Title/Profession PRESIDENT	d. Comments		
HENRY W HINTON JR 3062 DARTMOUTH DRIVE GREENVILLE, NC 27858		c. Employer's Name/Specific Field INNER BANKS MEDIA	e. Election/Sem to Date \$ 1,000.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	Check		12/31/2013	\$ 1,000.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
a. Full Name, Mailing Address & Phone (Include city, state, & zip)		b. Job Title/Profession BUSINESS OWNER	d. Comments		
ROBERT A JEFFREYS 3102 CASHWELL DRIVE UNIT 52 GOLDSBORO, NC 27534		c. Employer's Name/Specific Field SELF	e. Election/Sem to Date \$ 1,000.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1650	Check		10/28/2013	\$ 1,000.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
					\$ 3,000.00
					\$ 14,250.00

Contributions from Individuals

Pg 4 of 4

 Amendment
 Yes No

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

BRIAN BROWN FOR HOUSE	STA-Q956DK-C-001
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a. Full Name, Mailing Address & Phone (Include city, state, & zip)	b. Job Title/Profession BUSINESS OWNER	c. Contribution Type
ROBERT L LUDDY 4641 PARAGON PARK ROAD RALEIGH, NC 27616	e. Employer's Name/Specific Field CAPTIVEAIRE SYSTEMS	f. Election Sum to Date \$ 2,000.00

d. Prior	e. Account Code	f. Form of Payment	g. In-Kind Description	h. Date (mm/dd/yyyy)	i. Amount
<input type="checkbox"/>	1650	Check		12/31/2013	\$ 2,000.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

a. Full Name, Mailing Address & Phone (Include city, state, & zip)	b. Job Title/Profession BUSINESS OWNER	c. Contribution Type
WALTER L WILLIAMS 207 CROWN POINT ROAD GREENVILLE, NC 27834	e. Employer's Name/Specific Field TRADE MART	f. Election Sum to Date \$ 1,000.00

d. Prior	e. Account Code	f. Form of Payment	g. In-Kind Description	h. Date (mm/dd/yyyy)	i. Amount
<input type="checkbox"/>	1650	Check		12/31/2013	\$ 1,000.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
					\$ 3,000.00
					\$ 14,250.00

CRO-1210

NC State Board of Elections

April 2007

Contributions from Other Political Committees Pg 1 of 3

Amendment
 Yes No

Use this form to report contributions from other candidate, referendum or PAC committees

BRIAN BROWN FOR HOUSE			STA-Q956DK-C-001
a. Full Name, Mailing Address & Phone (Include city, state, & zip) CENTURYLINK INC EMPLOYEES PAC 1099 NEW YORK AVENUE NW SUITE 250 WASHINGTON, DC 20001		b. Type of Committee <input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum	d. Comments <small>NOTE:FED-SR5796-C-001</small>
		c. Level Registered (Specify) <input checked="" type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Status to Date <small>\$ 500.00</small>
E Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy) j. Amount
1650	Check		10/11/2013 \$ 500.00
			\$
			\$
			\$
a. Full Name, Mailing Address & Phone (Include city, state, & zip) CSX TRANSPORTATION PAC/GOOD GOVT FUND 1331 PENNSYLVANIA AVENUE NW SUITE 560, NATIONAL PLACE WASHINGTON, DC 20004		b. Type of Committee <input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum	d. Comments <small>NOTE:FED-C4740N-C-001</small>
		c. Level Registered (Specify) <input checked="" type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Status to Date <small>\$ 250.00</small>
E Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy) j. Amount
1650	Check		12/31/2013 \$ 250.00
			\$
			\$
a. Full Name, Mailing Address & Phone (Include city, state, & zip) FRIENDS OF CCA-NC PAC PO BOX 3725 GREENVILLE, NC 27836		b. Type of Committee <input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum	d. Comments <small>NOTE:STA-R9B152-C-001</small>
		c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Status to Date <small>\$ 500.00</small>
E Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy) j. Amount
1650	Check		12/31/2013 \$ 500.00
			\$
			\$
			\$ 1,250.00
			\$ 3,750.00

Contributions from Other Political Committees Pg 2 of 3

Amendment
 Yes No

Use this form to report contributions from other candidate, referendum or PAC committees.

BRIAN BROWN FOR HOUSE		STA-Q956DK-C-001
a. Full Name, Mailing Address & Phone (Include city, state, & zip) HARRY J WARREN FOR NC 77 PO BOX 2521 SALISBURY, NC 28145		b. Type of Committee <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality: d. Contribution NOTE: STA-D7D0AW-C-001 \$ 250.00
e. Account Code	f. Form of Payment	g. In-Kind Description
1650	Check	12/31/2013 \$ 250.00
		\$
		\$
a. Full Name, Mailing Address & Phone (Include city, state, & zip) NC BEER & WINE WHOLESALERS ASSN PAC 210 NORTH PERSON STREET RALEIGH, NC 27601		b. Type of Committee <input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality: d. Contribution NOTE: STA-C3409N-C-001 \$ 750.00
e. Account Code	f. Form of Payment	g. In-Kind Description
1650	Check	10/28/2013 \$ 750.00
		\$
		\$
a. Full Name, Mailing Address & Phone (Include city, state, & zip) NC HOSPITAL ASSN PAC PO BOX 4449 CARY, NC 27519		b. Type of Committee <input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality: d. Contribution NOTE: STA-CJ234N-C-001 \$ 1,000.00
e. Account Code	f. Form of Payment	g. In-Kind Description
1650	Check	12/31/2013 \$ 1,000.00
		\$
		\$
		\$ 2,000.00
		\$ 3,750.00

CRO-1239

NC State Board of Elections

April 2007

Contributions from Other Political Committees Pg 3 of 3Amendment
 Yes No

Use this form to report contributions from other candidate, referendum or PAC committees

BRIAN BROWN FOR HOUSE

STA-Q956DK-C-001

a. Full Name, Mailing Address & Phone
(Include city, state, & zip)NORTH CAROLINA BANK PAC
PO BOX 19999
RALEIGH, NC 27619

b. Type of Committee

 Candidate PAC Referendum

c. Level Registered (Specify)

 Federal County: State Municipality:

d. Committee

NOTE: PBD-C4582N-C-001

e. Election Status to Date

\$ 500.00

f. Account Code	g. Form of Payment	h. In-Mind Description	i. Date (mm/dd/yyyy)	j. Amount
1650	Check		12/31/2013	\$ 500.00
				\$
				\$
				\$ \$500.00
				\$ \$3,750.00

CRO-1230

NC State Board of Elections

April 2007

Refunds/Reimbursements To the CommitteePg 1 of 1
 Amendment
 Yes No

Use this form to report refunds received by the committee or reimbursements for a previous expenditure.

BRIAN BROWN FOR HOUSE		STA-Q956DK-C-001
a. Full Name, Mailing Address & Phone (include city, state, & zip) NORTH CAROLINA REPUBLICAN PARTY PO BOX 12905 RALEIGH, NC 27605 (919) 828-6423		d. Type of Committee <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input checked="" type="checkbox"/> Party e. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality
		f. Comments NOTE: STA-C4184N-C-001
		g. Original Expenditure Date 07/08/2013
		i. Original Expenditure Amt \$ 5,000.00
b. Job Title/Profession	c. Employer's Name/Specific Field	d. Purpose REFUND OF CONTRIBUTION
		j. Election Stmt to Date \$ 0.00
k. Account Code	l. Form of Payment	m. In-Kind Description n. Date (mm/dd/yyyy) o. Amount
1650	Check	12/31/2013 \$ 5,000.00 \$ 5,000.00 \$ 5,000.00

CRO-1240

NC State Board of Elections

December 2007

Other Receipt SourcesPg 1 of 1
Amendment
 Yes No

Use this form to report income not reported on another form. i.e. interest income, not-for-profit contributions etc.

BRIAN BROWN FOR HOUSE		STA-Q956DK-C-001		
<input type="checkbox"/> Interest <input type="checkbox"/> Contributions from Not-for-Profit Organizations <input checked="" type="checkbox"/> Outside Sources of Income				
a. Full Name, Mailing Address & Phone (Include city, state, & zip)		b. Not-for-Profit Federal ID #		
TRUST ATLANTIC BANK 1310 WEST ARLINGTON BOULEVARD GREENVILLE, NC 27834		c. Comments NOTE: BANK ERROR		
		d. Outside Source Explanation		
		e. Election Date or Date		
		\$ 0.70		
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
1650	Electric Funds Tran		12/31/2013	\$ 0.70
				\$
				\$ 0.70
				\$ 0.70

CRO-1250

NC State Board of Elections

December 2007

Disbursements

Amendment
 Yes No

Pg. 1 of 1

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

BRIAN BROWN FOR HOUSE

STA-Q956DK-C-001

<input type="checkbox"/> Operating Expenses	<input checked="" type="checkbox"/> Contributions to Candidates/Political Committees	<input type="checkbox"/> Coordinated Party Expenditures																						
<table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone (Include city, state, & zip)</td> <td>b. Coordinated Committee Name</td> <td>c. Comments</td> </tr> <tr> <td colspan="2">NORTH CAROLINA REPUBLICAN PARTY PO BOX 12905 RALEIGH, NC 27605 (919) 828-6423</td> <td>NOTE: STA-C4184N-C-001</td> </tr> <tr> <td colspan="3"> <table border="1"> <tr> <td colspan="2">c. Level Registered (Specify)</td> </tr> <tr> <td><input type="checkbox"/> Federal</td> <td><input type="checkbox"/> County</td> </tr> <tr> <td><input checked="" type="checkbox"/> State</td> <td><input type="checkbox"/> Municipality</td> </tr> </table> </td> </tr> <tr> <td colspan="3"> <table border="1"> <tr> <td colspan="2">d. Election Sum to Date</td> </tr> <tr> <td colspan="2">\$ 0.00</td> </tr> </table> </td> </tr> </table>			a. Full Name, Mailing Address & Phone (Include city, state, & zip)	b. Coordinated Committee Name	c. Comments	NORTH CAROLINA REPUBLICAN PARTY PO BOX 12905 RALEIGH, NC 27605 (919) 828-6423		NOTE: STA-C4184N-C-001	<table border="1"> <tr> <td colspan="2">c. Level Registered (Specify)</td> </tr> <tr> <td><input type="checkbox"/> Federal</td> <td><input type="checkbox"/> County</td> </tr> <tr> <td><input checked="" type="checkbox"/> State</td> <td><input type="checkbox"/> Municipality</td> </tr> </table>			c. Level Registered (Specify)		<input type="checkbox"/> Federal	<input type="checkbox"/> County	<input checked="" type="checkbox"/> State	<input type="checkbox"/> Municipality	<table border="1"> <tr> <td colspan="2">d. Election Sum to Date</td> </tr> <tr> <td colspan="2">\$ 0.00</td> </tr> </table>			d. Election Sum to Date		\$ 0.00	
a. Full Name, Mailing Address & Phone (Include city, state, & zip)	b. Coordinated Committee Name	c. Comments																						
NORTH CAROLINA REPUBLICAN PARTY PO BOX 12905 RALEIGH, NC 27605 (919) 828-6423		NOTE: STA-C4184N-C-001																						
<table border="1"> <tr> <td colspan="2">c. Level Registered (Specify)</td> </tr> <tr> <td><input type="checkbox"/> Federal</td> <td><input type="checkbox"/> County</td> </tr> <tr> <td><input checked="" type="checkbox"/> State</td> <td><input type="checkbox"/> Municipality</td> </tr> </table>			c. Level Registered (Specify)		<input type="checkbox"/> Federal	<input type="checkbox"/> County	<input checked="" type="checkbox"/> State	<input type="checkbox"/> Municipality																
c. Level Registered (Specify)																								
<input type="checkbox"/> Federal	<input type="checkbox"/> County																							
<input checked="" type="checkbox"/> State	<input type="checkbox"/> Municipality																							
<table border="1"> <tr> <td colspan="2">d. Election Sum to Date</td> </tr> <tr> <td colspan="2">\$ 0.00</td> </tr> </table>			d. Election Sum to Date		\$ 0.00																			
d. Election Sum to Date																								
\$ 0.00																								

e. Account Code	f. Form of Payment	g. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks																																																																																																											
1650	Check	G	07/08/2013	\$ 5,000.00																																																																																																												
				\$																																																																																																												
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e. Account Code	f. Form of Payment	g. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks																																																																																																											
1650	Check	G	08/22/2013	\$ 2,300.00																																																																																																												
				\$																																																																																																												
											--	---------------------------------------	------------------------	-------------------------------	--	---	---------------------------------	--------------------------------	---------------------------------------		a. Full Name, Mailing Address & Phone (Include city, state, & zip)	b. Coordinated Committee Name	c. Comments								THE THOM TILLIS COMMITTEE PO BOX 2489 CORNELIUS, NC 28031		NOTE: FED-5L363L-C-001								<table border="1"> <tr> <td colspan="2">c. Level Registered (Specify)</td> </tr> <tr> <td><input checked="" type="checkbox"/> Federal</td> <td><input type="checkbox"/> County</td> </tr> <tr> <td><input type="checkbox"/> State</td> <td><input type="checkbox"/> Municipality</td> </tr> </table>			c. Level Registered (Specify)		<input checked="" type="checkbox"/> Federal	<input type="checkbox"/> County	<input type="checkbox"/> State	<input type="checkbox"/> Municipality		c. Level Registered (Specify)										<input checked="" type="checkbox"/> Federal	<input type="checkbox"/> County									<input type="checkbox"/> State	<input type="checkbox"/> Municipality									<table border="1"> <tr> <td colspan="2">d. Election Sum to Date</td> </tr> <tr> <td colspan="2">\$ 1,000.00</td> </tr> </table>			d. Election Sum to Date		\$ 1,000.00					d. Election Sum to Date										\$ 1,000.00											
e. Account Code	f. Form of Payment	g. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks																																																																																																											
1650	Check	D	10/28/2013	\$ 1,000.00																																																																																																												
				\$																																																																																																												
				\$	8,300.00																																																																																																											
(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)				\$	8,300.00																																																																																																											
						--------------	----------------	----------------------	-------------------------------------		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																																																																																						

CRO-1310

NC State Board of Elections

December 2009

Disbursements

Pg 1 of 3 Amendment
 Yes No

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

BRIAN BROWN FOR HOUSE		STA-Q956DK-C-001	
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures			
a. Full Name, Mailing Address & Phone <small>(Include city, state, & zip)</small> FLIXPRESS 4849 ALPHA ROAD DALLAS, TX 75244		b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: d. Election Status to Date \$ 50.00	
e. Account Code	f. Form of Payment	g. Purpose Code	i. Date (mm/dd/yyyy)
1650	Electric Funds Tran	A	11/05/2013
			\$ 50.00
			VIDEO DEVELOPMENT
a. Full Name, Mailing Address & Phone <small>(Include city, state, & zip)</small> HD HAT VIDEOS 339 RIDGEWAY DRIVE BRIDGEPORT, WV 26330 (317) 896-4376		b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: d. Election Status to Date \$ 649.80	
e. Account Code	f. Form of Payment	g. Purpose Code	i. Date (mm/dd/yyyy)
1650	Debit Card	A	11/12/2013
			\$ 649.80
			VIDEO EQUIPMENT
a. Full Name, Mailing Address & Phone <small>(Include city, state, & zip)</small> OLLIE'S BARGAIN OUTLET 3105 E 10TH STREET GREENVILLE, NC 27858 (252) 695-9075		b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: d. Election Status to Date \$ 51.25	
e. Account Code	f. Form of Payment	g. Purpose Code	i. Date (mm/dd/yyyy)
1650	Debit Card	K	11/12/2013
			\$ 51.25
			OFFICE SUPPLIES
			\$ 751.05
<small>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expense)</small> <small>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</small> <small>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditure)</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			

Disbursements

Pg 2 of 3 Yes No Amendment

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

BRIAN BROWN FOR HOUSE		STA-Q956DK-C-001	
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures			
a. Full Name, Mailing Address & Phone (include city, state, & zip) RED ROOF INN 1813 S SAUNDERS STREET RALEIGH, NC 27603 (919) 833-6005		b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: d. Election Sum to Date \$ 54.58	
e. Account Code	f. Form of Payment	g. Purpose Code	h. Date (mm/dd/yyyy)
1650	Debit Card	O	09/05/2013
			\$ 54.58
			HOTEL ROOM
i. Amount	j. Required Remarks		
	\$		
a. Full Name, Mailing Address & Phone (include city, state, & zip) REP EXPRESS CATERING 805 RED BANKS ROAD GREENVILLE, NC 27858		b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: d. Election Sum to Date \$ 6,332.39	
e. Account Code	f. Form of Payment	g. Purpose Code	h. Date (mm/dd/yyyy)
1650	Check	O	07/02/2013
			\$ 2,141.46
			FOOD-TOWN HALL MTG
			\$
a. Full Name, Mailing Address & Phone (include city, state, & zip) REP EXPRESS CATERING 805 RED BANKS ROAD GREENVILLE, NC 27858		b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: d. Election Sum to Date \$ 6,332.39	
e. Account Code	f. Form of Payment	g. Purpose Code	h. Date (mm/dd/yyyy)
1650	Debit Card	O	11/06/2013
			\$ 115.93
			FOOD FOR MEETING
			\$
<small>(This line goes in line 13a of Detailed Summary Page CRO-1106 if Operating Expenses)</small> <small>(This line goes in line 13b of Detailed Summary Page CRO-1106 if Contributions to Candidates/Political Committees)</small> <small>(This line goes in line 13c of Detailed Summary Page CRO-1106 if Coordinated Party Expenditures)</small>		\$ 8,326.17	
<small>A* - Media B* - Printing C* - Fundraising D - To Another Candidate</small> <small>E - Salaries F* - Equipment G - Political Party H* - Holding Public Office Expenses</small> <small>I - Postage J - Penalties K* - Office Expenses Q* - Donation to Legal Expense Fund</small> <small>O* Other</small>			

CRO-1310

NC State Board of Elections

December 2009

— Needs
Verifying
w/ Number
per event -

Can not
"Overcharge"

75 MAX people in Building

Disbursements

Pg 3 of 3 Yes No

Amendment

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

BRIAN BROWN FOR HOUSE				STA-Q956DK-C-001	
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
a. Full Name, Mailing Address & Phone (include city, state, & zip) JENNIFER M RICKARD 2340 VINEYARD DRIVE #M-8 WINTERVILLE, NC 28590		b. Coordinated Committee Name <input type="checkbox"/>		d. Comments e. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality	
					f. Election Stmt to Date \$ 500.00
g. Account Code	h. Form of Payment	i. Purpose Code	j. Date (mm/dd/yyyy)	k. Amount l. Required Remarks	
1650	Check	O	11/06/2013	\$ 500.00 RESEARCH/PHONE	
				\$ CALLS	
a. Full Name, Mailing Address & Phone (include city, state, & zip) STAPLES 600 GREENVILLE BLVD SE GREENVILLE, NC 27858 (252) 355-4093		b. Coordinated Committee Name <input type="checkbox"/>		d. Comments e. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality	
					f. Election Stmt to Date \$ 731.66
g. Account Code	h. Form of Payment	i. Purpose Code	j. Date (mm/dd/yyyy)	k. Amount l. Required Remarks	
1650	Debit Card	K	11/08/2013	\$ 156.18 OFFICE SUPPLIES	
1650	Debit Card	K	11/28/2013	\$ 333.55 OFFICE SUPPLIES	
a. Full Name, Mailing Address & Phone (include city, state, & zip) TRIPPS RESTAURANT 420 RED BANKS ROAD GREENVILLE, NC 27858 (252) 329-0400		b. Coordinated Committee Name <input type="checkbox"/>		d. Comments e. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality	
					f. Election Stmt to Date \$ 198.42
g. Account Code	h. Form of Payment	i. Purpose Code	j. Date (mm/dd/yyyy)	k. Amount l. Required Remarks	
1650	Debit Card	O	11/12/2013	\$ 198.42 FOOD FOR MEETING	
				\$ 1,188.15	
<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 Candidate/Political Comm)</i> <i>(This line goes in Line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditure)</i>				\$ 8,326.17	
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					

Aggregated Non-Media ExpendituresPage 1 of 1
Amendment
 Yes No

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

BRIAN BROWN FOR HOUSE				STA-Q956DK-C-001		
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1650	Debit Card	K	11/08/2013	\$ 16.04	OFFICE SUPPLIES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1650	Draft	O	09/30/2013	\$ 5.00	SERVICE CHARGE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1650	Draft	O	10/31/2013	\$ 5.00	SERVICE CHARGE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1650	Draft	O	12/31/2013	\$ 5.00	SERVICE CHARGE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1650	Debit Card	O	11/05/2013	\$ 2.72	FOOD & DRINK
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1650	Debit Card	O	11/05/2013	\$ 22.00	FUEL
					\$ 55.76	
					\$ 55.76	
B* - Printing		D - To Another Candidate				
E - Salaries	J - Penalties	G - Political Party				
O* - Other				Q* - Donations to Legal Expense Fund		
* Codes require detailed explanation in required remarks field (g)						

CRO-1315

NC State Board of Elections

December 2009