

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 | |
|--|--------------------|-----------------------------|---------------------------|
| LOYCE BROUGHTON CAMPAIGN FUND DISTRICT 5 | 2014 Third Quarter | | |
| Start of Election Cycle: January 1, <u>2014</u> | | Total this Reporting Period | Total this Election Cycle |
| 4) Cash on Hand at Start | | \$ 72.13 | \$ 0.00 |
| RECEIPTS | | | |
| 5) Aggregated Contributions from Individuals (CRO-1205) | | \$ 185.00 | \$ 513.83 |
| 6) Contributions from Individuals (CRO-1210) | | \$ 405.00 | \$ 3,182.69 |
| 7) Contributions from Political Party Committees (CRO-1220) | | \$ 750.00 | \$ 750.00 |
| 8) Contributions from Other Political Committees (CRO-1230) | | \$ 0.00 | \$ 0.00 |
| 9) Loan Proceeds (CRO-1410) | | \$ 0.00 | \$ 925.29 |
| 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 | \$ 500.00 |
| 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) | | \$ 1,340.00 | \$ 5,871.81 |
| EXPENDITURES | | | |
| 13) Disbursements | | | |
| 13a) Operating Expenditures (CRO-1310) | | \$ 1,086.08 | \$ 4,663.56 |
| 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) | | \$ 8.18 | \$ 9.35 |
| 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 | \$ 881.03 |
| 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) | | \$ 1,094.26 | \$ 5,553.94 |
| 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) | | \$ 317.87 | \$ 317.87 |
| ADDITIONAL INFORMATION | | | |
| 20) Non-Monetary Gifts Given to Other Committees (CRO-1330) | | \$ 0.00 | |
| 21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430) | | \$ 546.12 | |
| 22) Debts and Obligations owed by the Committee (CRO-1610) | | \$ (2,731.77) | |
| 23) Debts and Obligations owed to the Committee (CRO-1620) | | \$ 0.00 | |
| 24) Account Transfers Within the Committee (CRO-1720) | | \$ 0.00 | |
| 25) Administrative Support (CRO-1710) | | \$ 0.00 | \$ 0.00 |
| 26) Forgiven Loans (CRO-1440) | | \$ 0.00 | \$ 0.00 |
| 27) 48-Hour Notice Reports Sum (CRO-2220) | | \$ 0.00 | \$ 0.00 |
| 28) Contributions to be Refunded (CRO-1215) | | \$ 0.00 | \$ 0.00 |

Aggregated Contributions from Individuals

Page 1 of 1

Amendment
 Yes No

Optional form used to report NC Contributions From Individuals of \$50 or less

| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
|---|-----------------|---------------------|------------------------|----------------------|---------------------|----------|
| LOYCE BROUGHTON CAMPAIGN FUND DISTRICT 5 | | | | | | |
| 3. Contributor Information | | | | | | |
| a. Amend | b. Account Code | c. Form of Payment | d. In-Kind Description | e. Date (mm/dd/yyyy) | f. Amount | |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | LB5 | Check | | 07/10/2014 | \$ | 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | LB5 | Check | | 09/04/2014 | \$ | 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | LB5 | Electric Funds Tran | | 10/03/2014 | \$ | 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | LB5 | Check | | 08/21/2014 | \$ | 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | LB5 | Electric Funds Tran | | 07/24/2014 | \$ | 50.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | LB5 | Check | | 09/14/2014 | \$ | 35.00 |
| 4. Total only this Page | | | | | \$ | \$185.00 |
| 5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i> | | | | | \$ | \$185.00 |

Contributions from Individuals

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 | |
| LOYCE BROUGHTON CAMPAIGN FUND DISTRICT 5 | | | | | | | |
| 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 | |
| HAROLD ARROWOOD 133 GRANDVIEW LANE RUTHERFORDTON, NC 28139 (828) 980-1813 | | | | RETIRED | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | | | e. Election Sum to Date | |
| | | | | | | \$ 195.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | | |
| <input type="checkbox"/> | LB5 | Check | | 07/10/2014 | \$ 50.00 | | |
| <input type="checkbox"/> | LB5 | Electric Funds Tran | | 09/02/2014 | \$ 25.00 | | |
| <input type="checkbox"/> | | | | | \$ | | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| GARY CLEM 1314 OLD TAYLOR TRAIL GOSHEN, KY 40026 | | | | | | | |
| | | | | 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"/> | LB5 | Electric Funds Tran | | 10/02/2014 | \$ 100.00 | | |
| <input type="checkbox"/> | | | | | \$ | | |
| <input type="checkbox"/> | | | | | \$ | | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| TAMMY GORDON-BROWN 186 AQUA DRIVE FOREST CITY, NC 28043 | | | | STAY AT HOME MOM | | | |
| | | | | 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"/> | LB5 | Check | | 07/22/2014 | \$ 100.00 | | |
| <input type="checkbox"/> | | | | | \$ | | |
| <input type="checkbox"/> | | | | | \$ | | |
| 4. Total only this Page | | | | | | \$ 275.00 | |
| 5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100) | | | | | | \$ 405.00 | |

Contributions from Individuals

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 | |
| LOYCE BROUGHTON CAMPAIGN FUND DISTRICT 5 | | | | | | |
| 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 | |
| FAYE MOORE 122 HUNTWOOD LANE RUTHERFORDTON, NC 28139 | | | | | | |
| | | | | | | |
| | | | | | 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"/> | LB5 | Check | | 09/05/2014 | \$ 100.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| TOM ROBERSON 132 RUTHERFORD STREET SPINDALE, NC 28160 | | | | | | |
| | | | | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 130.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | LB5 | Electric Funds Tran | | 09/02/2014 | \$ 30.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 130.00 | |
| 5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100) | | | | | \$ 405.00 | |

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 | |
| LOYCE BROUGHTON CAMPAIGN FUND DISTRICT 5 | | | | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | |
| a. Full Name, Mailing Address & Phone (Include city, state, & zip) | | | b. Comments | |
| RUTHERFORD COUNTY DEMOCRATIC EXECUTIVE COMMITTEE 175 N MAIN ST RUTHERFORDTON, NC 28139 | | | | |
| | | | c. Election Sum to Date | |
| | | | \$ 750.00 | |
| d. Account Code | e. Form of Payment | f. In-Kind Description | g. Date (mm/dd/yyyy) | h. Amount |
| LBS | Check | | 07/17/2014 | \$ 750.00 |
| | | | | \$ |
| | | | | \$ |
| 4. Total only this Page | | | \$ 750.00 | |
| 5. Total of ALL CRO-1220 Pages (This line must be on line 7 of Detailed Summary Page CRO-1100) | | | \$ 750.00 | |

Disbursements

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

| | | | | | | | |
|---|---------------------------|------------------------|-----------------------------|--|----------------------------|-------------------------------------|--|
| 1. Committee Full Name (and Fund if applicable) | | | | | | 2. ID Number | |
| LOYCE BROUGHTON CAMPAIGN FUND DISTRICT 5 | | | | | | | |
| 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 | |
| HOUSE OF AWARDS 280 W MAIN ST FOREST CITY, NC 28043-3025 (828) 245-5316 | | | | | | | |
| | | | | 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: | | \$ 10.68 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | |
| LB5 | Debit Card | B | 08/07/2014 | \$ 10.68 | NAME TAG | | |
| | | | | \$ | | | |
| 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 | |
| PAXTON MEDIA GROUP PO BOX 1200 PADUCAH, KY 42002-1200 (336) 888-3558 | | | | | | | |
| | | | | 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: | | \$ 522.00 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | |
| LB5 | Check | A | 10/07/2014 | \$ 522.00 | PRINT ADVERTISEMENT | | |
| | | | | \$ | | | |
| 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 | |
| RELAX BILINGUAL MAGAZINE 3870 US 64 HIGHWAY RUTHERFORDTON, NC 28139 (828) 429-7031 | | | | | | | |
| | | | | c. Level Registered (Specify) | | e. Election Sum to Date | |
| | | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | \$ 100.00 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | |
| LB5 | Check | A | 08/07/2014 | \$ 100.00 | ADVERTISEMENT | | |
| | | | | \$ | | | |
| 5. Total only this Page | | | | | | \$ 632.68 | |
| 6. Total of ALL CRO-1310 Pages | | | | | | \$ 1,086.08 | |
| <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

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 | |
| LOYCE BROUGHTON CAMPAIGN FUND DISTRICT 5 | | | | | | | |
| 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 | |
| STAPLES NC | | | | | | | |
| | | | | c. Level Registered (Specify) | | e. Election Sum to Date | |
| | | | | <input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | S 88.87 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | | k. Required Remarks | |
| LBS | Debit Card | K | 07/28/2014 | S 24.54 | | PRINTER INK | |
| LBS | Debit Card | K | 08/20/2014 | S 10.98 | | CLEAR TAGS | |
| 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 | |
| THE PRINT SHOP 504 BOSS MOORE ROAD ELLENBORO, NC 28040 (828) 657-9347 | | | | | | | |
| | | | | 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: | | S 125.88 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | | k. Required Remarks | |
| LBS | Check | B | 08/21/2014 | S 125.88 | | T SHIRT | |
| | | | | S | | | |
| 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 | |
| VISUAL ARTS CENTER RUTHERFORDTON, NC 28139 | | | | | | | |
| | | | | 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: | | S 100.00 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | | k. Required Remarks | |
| LBS | Check | A | 09/02/2014 | S 100.00 | | ADVERTISEMENT PRINT | |
| | | | | S | | | |
| 5. Total only this Page | | | | | | S 261.40 | |
| 6. Total of ALL CRO-1310 Pages | | | | | | S 1,086.08 | |
| <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 <i>(List detailed expenditure code in (h.) above)</i> | | | | | | | |
| A* - Media | | B* - Printing | | C* - Fundraising | | D - To Another Candidate | |
| E - Salaries | | F* - Equipment | | G - Political Party | | H* - Holding Public Office Expenses | |
| I - Postage | | J - Penalties | | K* - Office Expenses | | Q* - Donation to Legal Expense Fund | |
| O* Other | | | | | | | |
| * Codes require detailed explanation in required remarks field (k) | | | | | | | |

Disbursements

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

| | | | | | |
|---|---------------------------|------------------------|--|---------------------|--------------------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | 2. ID Number | |
| LOYCE BROUGHTON CAMPAIGN FUND DISTRICT 5 | | | | | |
| 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 |
| WCAB RADIO PO BOX 511 RUTHERFORDTON, NC 28139 | | | | | |
| | | | 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: | | |
| | | | | | \$ 192.00 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| LB5 | Check | A | 10/08/2014 | \$ 192.00 | RADIO ADVERTISING |
| | | | | \$ | |
| 5. Total only this Page | | | | | \$ 192.00 |
| 6. Total of ALL CRO-1310 Pages | | | | | \$ 1,086.08 |
| <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 <i>(List detailed expenditure code in (h.) above)</i> | | | | | |
| A* - Media | B* - Printing | C* - Fundraising | D - To Another Candidate | | |
| E - Salaries | F* - Equipment | G - Political Party | H* - Holding Public Office Expenses | | |
| I - Postage | J - Penalties | K* - Office Expenses | Q* - Donation to Legal Expense Fund | | |
| O* Other | | | | | |
| * Codes require detailed explanation in required remarks field (k) | | | | | |

Aggregated Non-Media Expenditures

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

| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
|--|-----------------|---------------------|-----------------|--------------------------------------|---------------------|---------------------|
| LOYCE BROUGHTON CAMPAIGN FUND DISTRICT 5 | | | | | | |
| 3. Payee Information | | | | | | |
| a. Amend | b. Account Code | c. Form of Payment | d. Purpose Code | e. Date (mm/dd/yyyy) | f. Amount | g. Required Remarks |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | LB5 | Electric Funds Tran | O | 07/24/2014 | \$ 1.75 | PAYPAL FEE |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | LB5 | Electric Funds Tran | O | 09/02/2014 | \$ 1.03 | PAYPAL FEE |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | LB5 | Electric Funds Tran | O | 09/02/2014 | \$ 1.17 | PAYPAL FEE |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | LB5 | Electric Funds Tran | O | 10/02/2014 | \$ 3.20 | PAYPAL FEE |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | LB5 | Electric Funds Tran | O | 10/03/2014 | \$ 1.03 | PAYPAL FEE |
| 4. Total only this Page | | | | | \$ | 8.18 |
| 5. Total of ALL CRO-1315 Pages <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i> | | | | | \$ | 8.18 |
| 6. Purpose Codes (List detailed expenditure code in (d) above) | | | | | | |
| B* - Printing | | C* - Fundraising | | D - To Another Candidate | | |
| E - Salaries | | F* - Equipment | | G - Political Party | | |
| I - Postage | | J - Penalties | | K* - Office Expenses | | |
| O* - Other | | | | Q* - Donations to Legal Expense Fund | | |
| * Codes require detailed explanation in required remarks field (g) | | | | | | |

Debts and Obligations Owed By the Committee

Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card purchases.

| | | | |
|--|-----------------------------|---|-----------------------------|
| 1. Committee Full Name (and Fund if applicable) | | 2. ID Number | |
| LOYCE BROUGHTON CAMPAIGN FUND DISTRICT 5 | | | |
| 3. Creditor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor. | |
| STAPLES NC | | b. Description of Creditor BUSINESS CARDS | |
| c. Beginning Balance | d. Total Amount Paid | e. Total Amount Incurred | f. Remaining Balance |
| \$ 0.00 | \$ 24.54 | \$ 0.00 | \$ (24.54) |
| g. Incurred Debts (what the committee received this period) | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |

| 3. Creditor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
|---|----------------------|--|-------------------------------------|
| a. Full Name, Mailing Address & Phone (include city, state, & zip) RUTHERFORD COUNTY BOARD OF ELECTIONS NC | | Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor. | |
| | | b. Description of Creditor PAY FILING FEES | |
| c. Beginning Balance | d. Total Amount Paid | e. Total Amount Incurred | f. Remaining Balance |
| \$ (66.95) | \$ 0.00 | \$ 0.00 | \$ (66.95) |
| g. Incurred Debts (what the committee received this period) | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| 4. Total only this Page (This should be the sum of all items 'g3.' from this page) | | | \$ (91.49) |
| 5. Total of ALL CRO-1610 Pages (This line must be on line 22 of Detailed Summary Page CRO-1100) | | | \$ (2,731.77) |
| 6. Purpose Codes (List detailed expenditure code in (g4.)) | | | |
| 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 | O* - Other |
| * Codes require detailed explanation in required remarks field (g5.) | | | |

Debts and Obligations Owed By the Committee

Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card purchases.

| | | | |
|--|-----------------------------|--|-------------------------------------|
| 1. Committee Full Name (and Fund if applicable) | | 2. ID Number | |
| LOYCE BROUGHTON CAMPAIGN FUND DISTRICT 5 | | | |
| 3. Creditor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor. | |
| RUTHERFORD COUNTY BANK 351 BUTLER ROAD FOREST CITY, NC 28043 | | b. Description of Creditor CHECKING ACCOUNT FOR CAMPAIGN FUND | |
| c. Beginning Balance | d. Total Amount Paid | e. Total Amount Incurred | f. Remaining Balance |
| \$ (24.75) | \$ 0.00 | \$ 0.00 | \$ (24.75) |
| g. Incurred Debts (what the committee received this period) | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| 4. Total only this Page | | 5. Total of ALL CRO-1610 Pages | |
| (This should be the sum of all items 'g3.' from this page) | | (This line must be on line 22 of Detailed Summary Page CRO-1100) | |
| | | \$ (24.75) | |
| | | \$ (2,731.77) | |
| 6. Purpose Codes (List detailed expenditure code in (g4.)) | | | |
| 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 | O* - Other |
| * Codes require detailed explanation in required remarks field (g5.) | | | |

Debts and Obligations Owed By the Committee

Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card purchases.

| | | | |
|---|-----------------------------|--|-------------------------------------|
| 1. Committee Full Name (and Fund if applicable) | | 2. ID Number | |
| LOYCE BROUGHTON CAMPAIGN FUND DISTRICT 5 | | | |
| 3. Creditor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor. | |
| RELAX BILINGUAL MAGAZINE 3870 US 64 HIGHWAY RUTHERFORDTON, NC 28139 (828) 429-7031 | | b. Description of Creditor ADVERTISEMENT | |
| c. Beginning Balance | d. Total Amount Paid | e. Total Amount Incurred | f. Remaining Balance |
| \$ 0.00 | \$ 100.00 | \$ 0.00 | \$ (100.00) |
| g. Incurred Debts (what the committee received this period) | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| 4. Total only this Page (This should be the sum of all items 'g3.' from this page) | | \$ (100.00) | |
| 5. Total of ALL CRO-1610 Pages (This line must be on line 22 of Detailed Summary Page CRO-1100) | | \$ (2,731.77) | |
| 6. Purpose Codes (List detailed expenditure code in (g4.)) | | | |
| 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 | O* - Other |
| * Codes require detailed explanation in required remarks field (g5.) | | | |

Debts and Obligations Owed By the Committee

Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card purchases.

| | |
|--|---------------------|
| 1. Committee Full Name (and Fund if applicable) LOYCE BROUGHTON CAMPAIGN FUND DISTRICT 5 | 2. ID Number |
|--|---------------------|

3. Creditor Information Add Remove

| | |
|--|--|
| a. Full Name, Mailing Address & Phone (include city, state, & zip) PAYPAL NC | Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor. |
| | b. Description of Creditor BANK FEES TO RECEIVE EFT PAYMENTS |
| c. Beginning Balance \$ (29.84) | d. Total Amount Paid \$ 0.00 |
| e. Total Amount Incurred \$ 0.00 | f. Remaining Balance \$ (29.84) |

g. Incurred Debts (what the committee received this period)

| | | |
|--|------------------------------|-----------------------------|
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | g2. Date (mm/dd/yyyy) | g3. Amount \$ |
| | g4. Purpose Code | g5. Required Remarks |
| | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | g2. Date (mm/dd/yyyy) | g3. Amount \$ |
| | g4. Purpose Code | g5. Required Remarks |
| | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | g2. Date (mm/dd/yyyy) | g3. Amount \$ |
| | g4. Purpose Code | g5. Required Remarks |
| | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | g2. Date (mm/dd/yyyy) | g3. Amount \$ |
| | g4. Purpose Code | g5. Required Remarks |
| | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | g2. Date (mm/dd/yyyy) | g3. Amount \$ |
| | g4. Purpose Code | g5. Required Remarks |
| | | |

| | |
|--|------------|
| 4. Total only this Page (This should be the sum of all items 'g3.' from this page) | \$ (29.84) |
|--|------------|

| | |
|---|---------------|
| 5. Total of ALL CRO-1610 Pages (This line must be on line 22 of Detailed Summary Page CRO-1100) | \$ (2,731.77) |
|---|---------------|

6. Purpose Codes (List detailed expenditure code in (g4.))

| | | | |
|--------------|----------------|----------------------|-------------------------------------|
| 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 | O* - Other |

* Codes require detailed explanation in required remarks field (g5.)

Debts and Obligations Owed By the Committee

Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card purchases.

| | | | |
|---|-----------------------------|---|-------------------------------------|
| 1. Committee Full Name (and Fund if applicable) | | 2. ID Number | |
| LOYCE BROUGHTON CAMPAIGN FUND DISTRICT 5 | | | |
| 3. Creditor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) FAXTON MEDIA GROUP PO BOX 1200 PADUCAH, KY 42002-1200 (336) 888-3558 | | Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor. | |
| | | b. Description of Creditor ADVERTISEMENT IN DAILY COURIER | |
| c. Beginning Balance | d. Total Amount Paid | e. Total Amount Incurred | f. Remaining Balance |
| \$ 0.00 | \$ 522.00 | \$ 0.00 | \$ (522.00) |
| g. Incurred Debts (what the committee received this period) | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| 4. Total only this Page (This should be the sum of all items 'g3.' from this page) | | \$ (522.00) | |
| 5. Total of ALL CRO-1610 Pages (This line must be on line 22 of Detailed Summary Page CRO-1100) | | \$ (2,731.77) | |
| 6. Purpose Codes (List detailed expenditure code in (g4.)) | | | |
| 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 | O* - Other |
| * Codes require detailed explanation in required remarks field (g5.) | | | |

Debts and Obligations Owed By the Committee

Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card purchases.

| | | | |
|--|-----------------------------|---|-------------------------------------|
| 1. Committee Full Name (and Fund if applicable) | | 2. ID Number | |
| LOYCE BROUGHTON CAMPAIGN FUND DISTRICT 5 | | | |
| 3. Creditor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor. | |
| HOUSE OF AWARDS 280 W MAIN ST FOREST CITY, NC 28043-3025 (828) 245-5316 | | b. Description of Creditor NAMETAG | |
| c. Beginning Balance | d. Total Amount Paid | e. Total Amount Incurred | f. Remaining Balance |
| \$ 0.00 | \$ 10.68 | \$ 0.00 | \$ (10.68) |
| g. Incurred Debts (what the committee received this period) | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| 4. Total only this Page | | \$ (10.68) | |
| <i>(This should be the sum of all items 'g3.' from this page)</i> | | | |
| 5. Total of ALL CRO-1610 Pages | | \$ (2,731.77) | |
| <i>(This line must be on line 22 of Detailed Summary Page CRO-1100)</i> | | | |
| 6. Purpose Codes (List detailed expenditure code in (g4.)) | | | |
| 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 | O* - Other |
| * Codes require detailed explanation in required remarks field (g5.) | | | |

Debts and Obligations Owed By the Committee

Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card purchases.

| | | | |
|--|-----------------------------|---|-------------------------------------|
| 1. Committee Full Name (and Fund if applicable) | | 2. ID Number | |
| LOYCE BROUGHTON CAMPAIGN FUND DISTRICT 5 | | | |
| 3. Creditor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor. | |
| FOREST CITY OWLS BASEBALL CLUB PO BOX 1062 FOREST CITY, NC 28043 | | b. Description of Creditor TO PURCHASE AN AD IN THE FOREST CITY OWLS PROGRAM | |
| c. Beginning Balance | d. Total Amount Paid | e. Total Amount Incurred | f. Remaining Balance |
| \$ (500.00) | \$ 0.00 | \$ 0.00 | \$ (500.00) |
| g. Incurred Debts (what the committee received this period) | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| 4. Total only this Page | | (This should be the sum of all items 'g3.' from this page) | |
| | | \$ (500.00) | |
| 5. Total of ALL CRO-1610 Pages | | (This line must be on line 22 of Detailed Summary Page CRO-1100) | |
| | | \$ (2,731.77) | |
| 6. Purpose Codes (List detailed expenditure code in (g4).) | | | |
| 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 | O* - Other |
| * Codes require detailed explanation in required remarks field (g5.) | | | |

Debts and Obligations Owed By the Committee

Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card purchases.

| | | | |
|--|-----------------------------|---|-------------------------------------|
| 1. Committee Full Name (and Fund if applicable) | | 2. ID Number | |
| LOYCE BROUGHTON CAMPAIGN FUND DISTRICT 5 | | | |
| 3. Creditor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor. | |
| AWS MEDIA 116 N MITCHELL ST RUTHERFORDTON, NC 28139 (828) 447-0611 | | b. Description of Creditor WEBSITE AND EMAIL SETUP | |
| c. Beginning Balance | d. Total Amount Paid | e. Total Amount Incurred | f. Remaining Balance |
| \$ (60.00) | \$ 0.00 | \$ 0.00 | \$ (60.00) |
| g. Incurred Debts (what the committee received this period) | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| 4. Total only this Page | | \$ (60.00) | |
| (This should be the sum of all items 'g3.' from this page) | | | |
| 5. Total of ALL CRO-1610 Pages | | \$ (2,731.77) | |
| (This line must be on line 22 of Detailed Summary Page CRO-1100) | | | |
| 6. Purpose Codes (List detailed expenditure code in (g4.)) | | | |
| 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 | O* - Other |
| * Codes require detailed explanation in required remarks field (g5.) | | | |

Debts and Obligations Owed By the Committee

Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card purchases.

| | | | |
|--|-----------------------------|--|-------------------------------------|
| 1. Committee Full Name (and Fund if applicable) | | 2. ID Number | |
| LOYCE BROUGHTON CAMPAIGN FUND DISTRICT 5 | | | |
| 3. Creditor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor. | |
| WCAB RADIO PO BOX 511 RUTHERFORDTON, NC 28139 | | b. Description of Creditor ADVERTISEMENT ON WCAB RADIO | |
| c. Beginning Balance | d. Total Amount Paid | e. Total Amount Incurred | f. Remaining Balance |
| \$ 0.00 | \$ 192.00 | \$ 0.00 | \$ (192.00) |
| g. Incurred Debts (what the committee received this period) | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| 4. Total only this Page (This should be the sum of all items 'g3.' from this page) | | \$ (192.00) | |
| 5. Total of ALL CRO-1610 Pages (This line must be on line 22 of Detailed Summary Page CRO-1100) | | \$ (2,731.77) | |
| 6. Purpose Codes (List detailed expenditure code in (g4.)) | | | |
| 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 | O* - Other |
| * Codes require detailed explanation in required remarks field (g5.) | | | |

Debts and Obligations Owed By the Committee

Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card purchases.

| | | | |
|---|-----------------------------|--|-------------------------------------|
| 1. Committee Full Name (and Fund if applicable) | | 2. ID Number | |
| LOYCE BROUGHTON CAMPAIGN FUND DISTRICT 5 | | | |
| 3. Creditor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor. | |
| VISUAL ARTS CENTER RUTHERFORDTON, NC 28139 | | b. Description of Creditor | |
| | | ADVERTISEMENT | |
| c. Beginning Balance | d. Total Amount Paid | e. Total Amount Incurred | f. Remaining Balance |
| \$ 0.00 | \$ 100.00 | \$ 0.00 | \$ (100.00) |
| g. Incurred Debts (what the committee received this period) | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| 4. Total only this Page (This should be the sum of all items 'g3.' from this page) | | | \$ (100.00) |
| 5. Total of ALL CRO-1610 Pages (This line must be on line 22 of Detailed Summary Page CRO-1100) | | | \$ (2,731.77) |
| 6. Purpose Codes (List detailed expenditure code in (g4.)) | | | |
| 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 | O* - Other |
| * Codes require detailed explanation in required remarks field (g5.) | | | |

Debts and Obligations Owed By the Committee

Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card purchases.

| | | | |
|---|-----------------------------|---|-------------------------------------|
| 1. Committee Full Name (and Fund if applicable) | | 2. ID Number | |
| LOYCE BROUGHTON CAMPAIGN FUND DISTRICT 5 | | | |
| 3. Creditor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor. | |
| THE PRINT SHOP 504 BOSS MOORE ROAD ELLENBORO, NC 28040 (828) 657-9347 | | b. Description of Creditor TSHIRTS | |
| c. Beginning Balance | d. Total Amount Paid | e. Total Amount Incurred | f. Remaining Balance |
| \$ 0.00 | \$ 125.88 | \$ 0.00 | \$ (125.88) |
| g. Incurred Debts (what the committee received this period) | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| 4. Total only this Page (This should be the sum of all items 'g3.' from this page) | | | \$ (125.88) |
| 5. Total of ALL CRO-1610 Pages (This line must be on line 22 of Detailed Summary Page CRO-1100) | | | \$ (2,731.77) |
| 6. Purpose Codes (List detailed expenditure code in (g4.)) | | | |
| 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 | O* - Other |
| * Codes require detailed explanation in required remarks field (g5.) | | | |

Debts and Obligations Owed By the Committee

Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card purchases.

| | | | |
|---|-----------------------------|---|-------------------------------------|
| 1. Committee Full Name (and Fund if applicable) LOYCE BROUGHTON CAMPAIGN FUND DISTRICT 5 | | 2. ID Number | |
| 3. Creditor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| a. Full Name, Mailing Address & Phone (Include city, state, & zip) SUPER CHEAP SIGNS NC | | Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor. | |
| | | b. Description of Creditor YARD SALES AND CAR MAGNETS | |
| c. Beginning Balance | d. Total Amount Paid | e. Total Amount Incurred | f. Remaining Balance |
| \$ (964.15) | \$ 0.00 | \$ 0.00 | \$ (964.15) |
| g. Incurred Debts (what the committee received this period) | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| 4. Total only this Page (This should be the sum of all items 'g3.' from this page) | | | \$ (964.15) |
| 5. Total of ALL CRO-1610 Pages (This line must be on line 22 of Detailed Summary Page CRO-11.00) | | | \$ (2,731.77) |
| 6. Purpose Codes (List detailed expenditure code in (g4.)) | | | |
| 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 | O* - Other |
| * Codes require detailed explanation in required remarks field (g5.) | | | |

Debts and Obligations Owed by the Committee

Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card purchases.

| | | | |
|---|-----------------------------|---|-------------------------------------|
| 1. Committee Full Name (and Fund if applicable) | | 2. ID Number | |
| LOYCE BROUGHTON CAMPAIGN FUND DISTRICT 5 | | | |
| 3. Creditor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor. | |
| STAPLES NC | | b. Description of Creditor INK FOR PRINTER | |
| c. Beginning Balance | d. Total Amount Paid | e. Total Amount Incurred | f. Remaining Balance |
| \$ 0.00 | \$ 10.98 | \$ 0.00 | \$ (10.98) |
| g. Incurred Debts (what the committee received this period) | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| 4. Total only this Page (This should be the sum of all items 'g3.' from this page) | | \$ (10.98) | |
| 5. Total of ALL CRO-1610 Pages (This line must be on line 22 of Detailed Summary Page CRO-1100) | | \$ (2,731.77) | |
| 6. Purpose Codes (List detailed expenditure code in (g4.)) | | | |
| 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 | O* - Other |
| * Codes require detailed explanation in required remarks field (g5.) | | | |

Outstanding Loans

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

| | | | | |
|--|----------------------------|--|----------------------------------|-----------------------------------|
| 1. Committee Full Name (and Fund if applicable) | | | 2. ID Number | |
| LOYCE BROUGHTON CAMPAIGN FUND DISTRICT 5 | | | | |
| 3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | b. Job Title/Profession | | d. Comments |
| LOYCE BROUGHTON 1407 FROG CREEK ROAD UNION MILLS, NC 28167 | | | | e. Start Date (mm/dd/yyyy) |
| | | | | 02/20/2014 |
| | | c. Employer's Name/Specific Field | | f. End Date (mm/dd/yyyy) |
| | | | | |
| g. Rate | h. Security Pledged | i. Original Loan Amount | j. Remaining Loan Balance | |
| % | | \$ 166.95 | \$ 166.95 | |
| k. Full Name of Lending Institution | | | | l. Loan Number |
| | | | | |
| 3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | b. Job Title/Profession | | d. Comments |
| LOYCE BROUGHTON 1407 FROG CREEK ROAD UNION MILLS, NC 28167 | | | | e. Start Date (mm/dd/yyyy) |
| | | | | 04/15/2014 |
| | | c. Employer's Name/Specific Field | | f. End Date (mm/dd/yyyy) |
| | | | | |
| g. Rate | h. Security Pledged | i. Original Loan Amount | j. Remaining Loan Balance | |
| % | | \$ 379.17 | \$ 379.17 | |
| k. Full Name of Lending Institution | | | | l. Loan Number |
| | | | | |
| 4. Total only this Page | | | \$ 546.12 | |
| 5. Total of ALL CRO-1430 Pages <i>(This line must be on line 21 of Detailed Summary Page CRO-1100)</i> | | | \$ 546.12 | |