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	c. ID Number
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001
b. Mailing Address (include City, State and Zip Code)	**d. Date Filed**
P.O. BOX 1962 LELAND, NC 28451	07/21/2015
	e. Phone Number

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2015	01/01/2015	06/30/2015	GRETA WALKER

6. Type of Committee (Check One)

- ☒ Candidate Campaign
- ☐ Party
- ☐ Joint Fundraiser
- ☐ PAC
- ☐ Referendum
- ☐ Legal Expense Fund

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

- ☐ "Booster Fund"
- ☐ Building Fund
- ☐ Presidential Election Year Candidates Fund
- ☐ NC Public Campaign Financing Fund
- ☐ Other:

8. Number of Fundraisers this Report: 3

9. Type of Report *(check only one type of report from one category)*

Municipal	State/County	Referendum
☐ Organizational	☐ Organizational	☐ Organizational
☐ Thirty-five day	Quarterly	☐ Pre-referendum
☐ Pre-primary	☐ First	☐ Final
☐ Pre-election	☐ Second	☐ Supplemental Final
☐ Pre-runoff	☐ Third	☐ Annual
Semi-annual	☐ Fourth	☐ Special
☐ Mid Year	Semi-annual	
☐ Year End	☑ Mid Year	**10. Special Report Name**
☐ Final	☐ Year End	
☐ Special	☐ Final	
	☐ Special	

2. Account Information

a. Financial Institution Full Name		
BB&T		
b. Purpose	**c. Account Code**	
PRIMARY CHECKING	MAIN	
	d. Period Begin Balance	
	$ 3,950.98	

3. Account Information

a. Financial Institution Full Name	
PIRYX INC	
b. Purpose	**c. Account Code**
RECEIVE ONLINE CONTRIBUTIONS	ONLINE 12
	d. Period Begin Balance
	$ 0.00

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

Greta Walker — Printed Name of Signer

Greta Walker — Signature of Appointed Treasurer

07/21/2015 — Date

FOR OFFICE USE ONLY

RECEIVED JUL 28 2015 BRUNSWICK COUNTY BOARD OF ELECTIONS

Date Received: _____ Employee: GL

Date Postmarked: _____ Employee: _____

Date Scanned: _____ Employee: _____

Date Data Entered: _____ Employee: _____

Delivery Method
- ☐ Normal Mail
- ☐ Registered Mail
- ☑ Hand Delivered
- ☐ Electronically Filed

☐ 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
FRANK WILLIAMS COMMITTEE	2015 Mid Year Semi-Annual	BRU-988340-C-001

Start of Election Cycle: January 1, 2013		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$ 3,950.98	$ 2,112.13
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	$ 1,395.00	$ 3,115.54
6) Contributions from Individuals	(CRO-1210)	$ 8,276.90	$ 14,344.53
7) Contributions from Political Party Committees	(CRO-1220)	$ 0.00	$ 0.00
8) Contributions from Other Political Committees	(CRO-1230)	$ 200.00	$ 600.00
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)		$ 9,871.90	$ 18,060.07
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	$ 3,536.13	$ 8,077.80
13b) Contributions to Candidates/Political Committees	(CRO-1310)	$ 0.00	$ 1,790.00
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	$ 17.65
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		$ 3,536.13	$ 9,885.45
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		$ 10,286.75	$ 10,286.75
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)	$ 1,862.23	
25) Administrative Support	(CRO-1710)	$ 0.00	$ 0.00
26) Forgiven Loans	(CRO-1440)	$ 0.00	$ 0.00
27) 48-Hour Notice Reports Sum	(CRO-2220)	$ 0.00	$ 0.00
28) Contributions to be Refunded	(CRO-1215)	$ 0.00	$ 0.00

Aggregated Contributions from Individuals

Amendment ☐ Yes ☒ 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
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove	ONLINE 12	Credit Card		06/04/2015	$ 50.00
☐ Add ☐ Remove	MAIN	Check		05/16/2015	$ 10.00
☐ Add ☐ Remove	MAIN	Cash		04/25/2015	$ 20.00
☐ Add ☐ Remove	MAIN	Cash		04/25/2015	$ 20.00
☐ Add ☐ Remove	ONLINE 12	Credit Card		06/30/2015	$ 25.00
☐ Add ☐ Remove	ONLINE 12	Credit Card		04/21/2015	$ 20.00
☐ Add ☐ Remove	MAIN	Check		06/09/2015	$ 35.00
☐ Add ☐ Remove	ONLINE 12	Credit Card		06/04/2015	$ 35.00
☐ Add ☐ Remove	MAIN	Check		04/25/2015	$ 40.00
☐ Add ☐ Remove	ONLINE 12	Credit Card		03/25/2015	$ 20.00
☐ Add ☐ Remove	ONLINE 12	Credit Card		03/26/2015	$ 20.00
☐ Add ☐ Remove	MAIN	Check		06/11/2015	$ 50.00
☐ Add ☐ Remove	ONLINE 12	Credit Card		06/30/2015	$ 50.00
☐ Add ☐ Remove	ONLINE 12	Cash		04/25/2015	$ 40.00
☐ Add ☐ Remove	MAIN	Check		05/16/2015	$ 50.00
☐ Add ☐ Remove	ONLINE 12	Credit Card		06/04/2015	$ 35.00
☐ Add ☐ Remove	MAIN	Check		03/25/2015	$ 25.00
☐ Add ☐ Remove	ONLINE 12	Cash		04/25/2015	$ 20.00
☐ Add ☐ Remove	MAIN	Check		04/30/2015	$ 40.00
☐ Add ☐ Remove	ONLINE 12	Cash		04/25/2015	$ 20.00
☐ Add ☐ Remove	ONLINE 12	Credit Card		04/10/2015	$ 20.00
☐ Add ☐ Remove	ONLINE 12	Credit Card		04/10/2015	$ 20.00
☐ Add ☐ Remove	MAIN	Check		05/16/2015	$ 25.00

4. Total only this Page	$ $690.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ $1,395.00

Aggregated Contributions from Individuals

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
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove	ONLINE 12	Credit Card		03/25/2015	$ 20.00
☐ Add ☐ Remove	ONLINE 12	Credit Card		03/25/2015	$ 20.00
☐ Add ☐ Remove	MAIN	Check		05/16/2015	$ 50.00
☐ Add ☐ Remove	ONLINE 12	Credit Card		04/22/2015	$ 40.00
☐ Add ☐ Remove	MAIN	Check		04/09/2015	$ 40.00
☐ Add ☐ Remove	MAIN	Check		04/16/2015	$ 40.00
☐ Add ☐ Remove	ONLINE 12	Cash		04/25/2015	$ 45.00
☐ Add ☐ Remove	ONLINE 12	Credit Card		04/21/2015	$ 20.00
☐ Add ☐ Remove	ONLINE 12	Credit Card		06/18/2015	$ 25.00
☐ Add ☐ Remove	ONLINE 12	Credit Card		04/22/2015	$ 20.00
☐ Add ☐ Remove	ONLINE 12	Credit Card		06/19/2015	$ 50.00
☐ Add ☐ Remove	MAIN	Cash		04/25/2015	$ 5.00
☐ Add ☐ Remove	ONLINE 12	Credit Card		04/22/2015	$ 20.00
☐ Add ☐ Remove	MAIN	Cash		06/09/2015	$ 40.00
☐ Add ☐ Remove	ONLINE 12	Credit Card		06/30/2015	$ 50.00
☐ Add ☐ Remove	MAIN	Check		05/16/2015	$ 25.00
☐ Add ☐ Remove	MAIN	Cash		04/25/2015	$ 20.00
☐ Add ☐ Remove	ONLINE 12	Credit Card		06/24/2015	$ 50.00
☐ Add ☐ Remove	ONLINE 12	Credit Card		03/27/2015	$ 20.00
☐ Add ☐ Remove	ONLINE 12	Credit Card		04/19/2015	$ 50.00
☐ Add ☐ Remove	MAIN	Cash		04/09/2015	$ 20.00
☐ Add ☐ Remove	ONLINE 12	Credit Card		06/04/2015	$ 35.00

4. Total only this Page	$	$705.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$	$1,395.00

Contributions from Individuals

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
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MIKE ALLEN 728 ALBEMARLE PLACE SE BELVILLE, NC 28451	LAW ENFORCEMENT	BRUNSWICK COUNTY SHERIFF'S OFFICE		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MAIN	Check		04/25/2015	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
DEVAN BARBOUR IV 204B S EASTWOOD DR BENSON, NC 27504	BENEFITS CONSULTANT	PIERCE GROUP BENEFITS		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MAIN	Check		03/21/2015	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
REBECCA D BASCOM 4524 HAMPTONSHIRE DR RALEIGH, NC 27613	ARCHITECT	MAURER ARCHITECTURE		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	ONLINE 12	Credit Card		06/05/2015	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 300.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 8,276.90

Contributions from Individuals

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
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JOHN E BRANCH III 5109 CARTER STREET RALEIGH, NC 27612	ATTORNEY	SHANAHAN LAW GROUP PLLC		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MAIN	Check		06/09/2015	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
NANCY J BRICE 14536 WAGON WHEEL LANE BOWLING GREEN, VA 22427-2102	REAL ESTATE APPRAISER	SELF		$ 60.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☒	MAIN	Check		05/16/2013	$ 20.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
NANCY J BRICE 14536 WAGON WHEEL LANE BOWLING GREEN, VA 22427-2102	REAL ESTATE APPRAISER	SELF		$ 60.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☒	MAIN	Check		04/05/2014	$ 20.00
☐	MAIN	Check		04/25/2015	$ 20.00
☐					$

4. Total only this Page	$ 120.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 8,276.90

Contributions from Individuals

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
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
BRAD BROYLES 7004 EDGEVIEW COURT RALEIGH, NC 27613	SYSTEMS ANALYST	BB&T		$ 600.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	ONLINE 12	Credit Card		05/22/2015	$ 500.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MATT BRUBAKER 4840 WINTERWOOD DRIVE RALEIGH, NC 27613	LAND ACQUISITION MANAGER	DR HORTON INC		$ 150.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☒	ONLINE 12	Credit Card		03/16/2014	$ 50.00
☐	ONLINE 12	Credit Card		04/27/2015	$ 100.00
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
CHRISTIE CHADWICK 1513 EAST GANTRY COURT LELAND, NC 28451	OWNER	CLC HEALING THERAPIES		$ 80.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☒	MAIN	Check		02/20/2014	$ 40.00
☐	MAIN	Check		04/10/2015	$ 20.00
☐	MAIN	Check		04/21/2015	$ 20.00

4. Total only this Page	$ 640.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 8,276.90

Contributions from Individuals

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
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MEREDITH DOUTHIT CRAWFORD 1320 WYNNCREST COURT RALEIGH, NC 27603	REAL ESTATE	SELF		$ 60.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☒	MAIN	Check		02/05/2014	$ 25.00
☐	MAIN	Check		06/13/2015	$ 35.00
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
PERRY G DAVIS JR PO BOX 544 WILMINGTON, NC 28402	ENGINEERING	CAPE FEAR ENGINEERING		$ 300.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☒	MAIN	Check		06/27/2013	$ 50.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
PERRY G DAVIS JR PO BOX 544 WILMINGTON, NC 28402	ENGINEERING	CAPE FEAR ENGINEERING		$ 300.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MAIN	Check		04/23/2015	$ 250.00
☐					$
☐					$

4. Total only this Page	$ 285.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 8,276.90

Contributions from Individuals

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
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JASON DISBROW 5149 FERNWOOD DRIVE SOUTHPORT, NC 28461	ATTORNEY	STILLER & DISBROW, P.C.		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MAIN	Check		04/09/2015	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JOHN DISMUKES 4166 BREEZEWOOD #204 WILMINGTON, NC 28401	SMALL BUSINESS OWNER	ALLABOUTWILMINGTON.COM		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☒	ONLINE 12	Credit Card		06/10/2013	$ 50.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JOHN DISMUKES 4166 BREEZEWOOD #204 WILMINGTON, NC 28401	SMALL BUSINESS OWNER	ALLABOUTWILMINGTON.COM		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	ONLINE 12	Credit Card		03/27/2015	$ 50.00
☐					$
☐					$

4. Total only this Page	$ 150.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 8,276.90

Contributions from Individuals

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
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
HANK ESTEP 3213 SNOWBERRY CT WILMINGTON, NC 28409	INSURANCE AGENT	GRIFFIN ESTEP		$ 256.90

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MAIN	Check		04/09/2015	$ 256.90
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JONATHAN D FELTS 303 MULBERRY STREET RALEIGH, NC 27604	CONSULTANT	THE RESULTS COMPANY		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	ONLINE 12	Credit Card		06/09/2015	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MIKE FORTE 1271 WASHINGTON ROAD BSL SOUTHPORT, NC 28461	TOWN COMMISSIONER	BOILING SPRING LAKES		$ 65.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☒	MAIN	Cash		06/15/2013	$ 20.00
☐					$
☐					$

4. Total only this Page	$ 356.90
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 8,276.90

Contributions from Individuals

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
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MIKE FORTE 1271 WASHINGTON ROAD BSL SOUTHPORT, NC 28461	TOWN COMMISSIONER	BOILING SPRING LAKES		$ 65.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☒	MAIN	Cash		04/05/2014	$ 20.00
☐	MAIN	Cash		04/25/2015	$ 25.00
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
CHARLES F. FULLER 1916 TORREY PINES PLACE RALEIGH, NC 27615	PRESIDENT	THE RESULTS COMPANY, INC		$ 500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MAIN	Check		06/09/2015	$ 250.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
M LANEY FUNDERBURK 103-1 GENOES POINT RD SW SUPPLY, NC 28462	RETIRED	DUKE UNIVERSITY		$ 170.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	ONLINE 12	Credit Card		04/18/2015	$ 50.00
☐					$
☐					$

4. Total only this Page	$ 325.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 8,276.90

Contributions from Individuals

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
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ROBIN D HAMILTON 4797 GENERAL HOWE HIGHWAY RIEGELWOOD, NC 28456	ADMINISTRATOR	HOLMES CONSTRUCTION		$ 1,000.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MAIN	Check		03/09/2015	$ 1,000.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
D JEFFREY HARVELL 1415 S SECOND ST #104 WILMINGTON, NC 28401	SALES	CAROLINA STREETSCAPES		$ 60.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☒	MAIN	Cash		04/05/2014	$ 40.00
☐	ONLINE 12	Credit Card		03/29/2015	$ 20.00
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
CHRIS HERNDON 2410 STAFFORD AVE RALEIGH, NC 27607	SOFTWARE DEVELOPER	XS INC		$ 120.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	ONLINE 12	Credit Card		04/15/2015	$ 20.00
☐	ONLINE 12	Credit Card		06/03/2015	$ 100.00
☐					$

4. Total only this Page	$ 1,140.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 8,276.90

Contributions from Individuals

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
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
C THEODORE HICKS II 5 WARE CREEK COURT DURHAM, NC 27713	CFP PRACTITIONER	HICKS & ASSOCIATES		$ 150.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MAIN	Check		05/30/2015	$ 150.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
HANS HUANG 200 S. DAWSON STREET #101 RALEIGH, NC 27601	ATTORNEY	HH CHEN		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	ONLINE 12	Credit Card		06/30/2015	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
PHILLIP J KIRK JR 3017 OLD ORCHARD RD RALEIGH, NC 27607	DIRECTOR OF BUSINESS & LEADERSHIP DEV.	BRADY		$ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MAIN	Check		06/09/2015	$ 250.00
☐					$
☐					$

4. Total only this Page	$ 500.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 8,276.90

Contributions from Individuals

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
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
CRAIG W KORNEGAY 7700 HILBURN DRIVE RALEIGH, NC 27613	BUSINESS ANALYST	DUKE ENERGY		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MAIN	Check		05/16/2015	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
BOBBY R LEWIS 1019 COWPER DRIVE RALEIGH, NC 27608	REAL ESTATE	SELF		$ 350.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MAIN	Check		06/11/2015	$ 250.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ROBERT L LUDDY 4641 PARAGON PARK RD RALEIGH, NC 27616	PRESIDENT	CAPTIVE AIRE SYSTEMS		$ 1,000.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MAIN	Check		05/20/2015	$ 1,000.00
☐					$
☐					$

4. Total only this Page	$ 1,350.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 8,276.90

Contributions from Individuals

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
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
C DANIEL LYNES 2132 ARNOLD PALMER DRIVE SHALLOTTE, NC 28470	RETIRED	IBM		$ 450.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MAIN	Check		04/07/2015	$ 100.00
☐	MAIN	Check		04/11/2015	$ 100.00
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JAMES MACCALLUM 107 AUTUMN BREEZE LN BOLIVIA, NC 28422	CLERK OF COURT	BRUNSWICK COUNTY		$ 120.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☒	MAIN	Cash		06/15/2013	$ 20.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JAMES MACCALLUM 107 AUTUMN BREEZE LN BOLIVIA, NC 28422	CLERK OF COURT	BRUNSWICK COUNTY		$ 120.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MAIN	Cash		01/10/2015	$ 50.00
☐	MAIN	Cash		03/21/2015	$ 50.00
☐					$

4. Total only this Page	$ 300.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 8,276.90

Contributions from Individuals

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
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
DUANE R MAXIE 110 GARDEN SIDE WAY APEX, NC 27502	IT MANAGER	NC COMMUNITY COLLEGE SYSTEM		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	ONLINE 12	Credit Card		06/30/2015	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MICHAEL D MCKNIGHT 101 GREAT POINT PLACE CARY, NC 27513	ATTORNEY	OGLETREE DEAKINS		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	ONLINE 12	Credit Card		06/09/2015	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
NORMAN MEARES 124 SHRIMP ST HOLDEN BEACH, NC 28462	FORMER MAYOR OF HOLDEN BEACH	RETIRED		$ 90.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☒	MAIN	Check		06/15/2013	$ 40.00
☐					$
☐					$

4. Total only this Page	$ 200.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 8,276.90

Contributions from Individuals

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
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
NORMAN MEARES 124 SHRIMP ST HOLDEN BEACH, NC 28462	FORMER MAYOR OF HOLDEN BEACH	RETIRED		$ 90.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MAIN	Check		04/24/2015	$ 50.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
SAMUEL G MORSE 4513 CONNELL DRIVE RALEIGH, NC 27612	BRANCH MANAGER	CITY ELECTRIC SUPPLY		$ 130.52

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	ONLINE 12	Credit Card		04/24/2015	$ 50.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
GEORGE MURRAY 1008 TIMBERGRASS LANE LELAND, NC 28451	OWNER	MURRAY ART & FRAME		$ 140.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MAIN	Cash		04/25/2015	$ 40.00
☐	MAIN	Check		04/25/2015	$ 100.00
☐					$

4. Total only this Page	$ 240.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 8,276.90

Contributions from Individuals

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
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
VINCE MUSILLI 1367 PARKLAND WAY LELAND, NC 28451	MANUFACTURERS AGENT	SELF		$ 110.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MAIN	Check		03/09/2015	$ 40.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
PHIL NORRIS 1424 ASH-LITTLE RIVER ROAD ASH, NC 28420	CIVIL ENGINEER	NORRIS & TUNSTALL CONSULTING ENGINEERS		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MAIN	Check		04/25/2015	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
GAYE P PELTON 6619 SIDBURY LANE OCEAN ISLE BEACH, NC 28469	RETIRED	RETIRED		$ 190.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MAIN	Check		03/28/2015	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 240.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 8,276.90

Contributions from Individuals

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
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
S. DOUGLAS ROSS 2711 BLUEBIRD LANE SW SUPPLY, NC 28462	FIRE SUPPLIES	SELF / RETIRED		$ 500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MAIN	Check		04/16/2015	$ 250.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
FRANKLIN ROUSE JR 1107 NEW POINTE BLVD #5 LELAND, NC 28451	INSURANCE AGENT	STATE FARM		$ 500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MAIN	Check		06/30/2015	$ 200.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
KIERAN J SHANAHAN 128 E HARGETT STREET RALEIGH, NC 27601	ATTORNEY	SHANAHAN LAW GROUP PLLC		$ 1,000.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MAIN	Check		06/09/2015	$ 1,000.00
☐					$
☐					$

4. Total only this Page	$ 1,450.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 8,276.90

Contributions from Individuals

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
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
BILLIE W SHELTON 6817 ROBERTA ROAD OCEAN ISLE BEACH, NC 28469	HOMEMAKER	HOMEMAKER		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MAIN	Check		04/11/2015	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JOHN D SOLOMON 216 STONEBROOK DR CLAYTON, NC 27520	ENGINEER	CH2M HILL		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MAIN	Check		06/09/2015	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MARY E STILWELL 350 BOILING SPRINGS ROAD BSL SOUTHPORT, NC 28461	RETIRED	RETIRED		$ 167.11

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MAIN	Check		04/25/2015	$ 50.00
☐					$
☐					$

4. Total only this Page	$ 250.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 8,276.90

Contributions from Individuals

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
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
NANCY SULLIVAN 109 SHRIMP STREET HOLDEN BEACH, NC 28462	PART-TIME - TAX OFFICE	BRUNSWICK COUNTY		$ 70.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☒	ONLINE 12	Credit Card		06/09/2013	$ 50.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
NANCY SULLIVAN 109 SHRIMP STREET HOLDEN BEACH, NC 28462	PART-TIME - TAX OFFICE	BRUNSWICK COUNTY		$ 70.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	ONLINE 12	Credit Card		04/22/2015	$ 20.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
WILBERT WAYNE THOMPSON P.O. BOX 121 DUBLIN, NC 28332	RETIRED	DUPONT		$ 120.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MAIN	Cash		04/25/2015	$ 40.00
☐					$
☐					$

4. Total only this Page	$ 60.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 8,276.90

Contributions from Individuals

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
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
DERL WALKER 317 NORWOOD EZZELL ROAD MOUNT OLIVE, NC 28365	RETIRED	RETIRED		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	MAIN	Check		04/21/2015	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ROBBIE WALKER 2227 TALMAGE DRIVE LELAND, NC 28451	IT DIRECTOR	ATLANTIC CORPORATION OF WILMINGTON INC		$ 350.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	ONLINE 12	Credit Card		04/22/2015	$ 250.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ISAAC I WILLIAMS JR 4982 NORTHWEST ROAD NE LELAND, NC 28451	RETIRED	-		$ 60.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☒	MAIN	Cash		06/01/2013	$ 20.00
☐					$
☐					$

4. Total only this Page	$ 350.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 8,276.90

Contributions from Individuals

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
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ISAAC F WILLIAMS JR 4982 NORTHWEST ROAD NE LELAND, NC 28451	RETIRED	-		$ 60.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☒	MAIN	Cash		03/31/2014	$ 20.00
☐	MAIN	Cash		03/21/2015	$ 20.00
☐					$

4. Total only this Page	$ 20.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 8,276.90

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. Committee Full Name (and Fund if applicable)	2. ID Number
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Committee	d. Comments
JOHN BELL COMMITTEE 501 HOLLAND MILL DRIVE GOLDSBORO, NC 27530	☒ Candidate ☐ PAC ☐ Referendum **c. Level Registered (Specify)** ☐ Federal ☐ County: ☒ State ☐ 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
MAIN	Check		04/25/2015	$ 200.00
				$
				$

4. Total only this Page	$ $200.00
5. Total of ALL CRO-1230 Pages *(This line must be on line 8 of Detailed Summary Page CRO-1100)*	$ $200.00

Disbursements

Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
ALPHAGRAPHICS 3538-1 S COLLEGE ROAD WILMINGTON, NC 28412		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 1,119.64

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
MAIN	Check	H	02/20/2015	$ 119.15	BUSINESS CARDS
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
BLUEHOST 1958 S 950 EAST PROVO, UT 84606		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 190.44

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
MAIN	Debit Card	H	05/19/2015	$ 190.44	CONSTITUENT WEBSITE HOSTING
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
BRUNSWICK COUNTY REPUBLICAN PARTY 971 OLD OCEAN HIGHWAY BOLIVIA, NC 28422		☐ Federal ☐ County: ☒ State ☐ Municipality:		$ 925.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
MAIN	Check	G	04/10/2015	$ 100.00	
				$	

5. Total only this Page $ 409.59

6. Total of ALL CRO-1310 Pages $ 3,536.13

(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

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
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
BRUNSWICK COUNTY REPUBLICAN WOMEN 206 E NASH ST #10434 SOUTHPORT, NC 28461		☐ Federal ☐ County: ☒ State ☐ Municipality:		$ 135.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
MAIN	Check	G	01/09/2015	$ 20.00	
MAIN	Check	GO	04/10/2015	$ 100.00	JACKIE ILER MEMORIAL SCHOLARSHIP

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
BRUNSWICK SHERIFF'S CHARITABLE FOUNDATION PO BOX 10820 SOUTHPORT, NC 28461		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 310.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
MAIN	Check	O	02/20/2015	$ 80.00	CHARITABLE GALA TICKET
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
CAFFE LUNA 136 E HARGETT STREET RALEIGH, NC 27601		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 1,277.50

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
MAIN	Check	C	04/27/2015	$ 200.00	CATERING / EVENT DEPOSIT
MAIN	Debit Card	C	06/09/2015	$ 1,077.50	EVENT VENUE & FOOD

5. Total only this Page	$ 1,477.50
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)*	$ 3,536.13

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 ☐ 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
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
ENVATO - THEMEFOREST 121 KING STREET, MELBOURNE VICTORIA 3000 AUSTRALIA		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 45.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
MAIN	Debit Card	H	05/19/2015	$ 45.00	CONSTITUENT SITE WORDPRESS THEME
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
GODADDY, INC. 14455 N. HAYDEN RD. SUITE 226 SCOTTSDALE, AZ 85260		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 517.78

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
MAIN	Debit Card	H	05/19/2015	$ 96.38	DOMAINS FOR CONSTITUENT WEBSITE
MAIN	Debit Card	O	05/28/2015	$ 4.99	WEBSITE EXPENSE

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
GODADDY, INC. 14455 N. HAYDEN RD. SUITE 226 SCOTTSDALE, AZ 85260		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 517.78

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
MAIN	Debit Card	O	06/09/2015	$ 27.17	DOMAIN NAME REGISTRATIONS
				$	

5. Total only this Page	$ 173.54
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)*	$ 3,536.13

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 ☐ 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
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
JEROME WALKER / JEROME'S STEAK & SEAFOOD 4909 MAIN STREET SHALLOTTE, NC 28470		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 1,540.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
MAIN	Check	C	04/25/2015	$ 520.00	CATERING FOR BBQ
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
PHIL NORRIS 1424 ASH-LITTLE RIVER ROAD ASH, NC 28420		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 500.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
MAIN	Check	C	04/25/2015	$ 500.00	BAND FOR BBQ
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
OFFICE DEPOT 150 SHALLOTTE CROSSING PKWY SUITE #2 SHALLOTTE, NC 28470		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 92.18

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
MAIN	Debit Card	CO	05/21/2015	$ 77.25	STATIONERY FOR INVITATION
				$	

5. Total only this Page	$ 1,097.25
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)*	$ 3,536.13

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 ☐ 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
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
PAYPAL
2211 NORTH FIRST STREET
SAN JOSE, CA 95131

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 1.35

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
MAIN	Debit Card	O	05/19/2015	$ 1.35	INTERNATIONAL TRANSACTION FEE -
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
PIRYX
144 2nd St. 1st Floor
SAN FRANCISCO, CA 94105

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 189.74

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
ONLINE 12	Draft	O	03/25/2015	$ 1.80	CREDIT CARD FEE
ONLINE 12	Draft	O	03/26/2015	$ 1.80	CREDIT CARD FEE

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
PIRYX
144 2nd St. 1st Floor
SAN FRANCISCO, CA 94105

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 189.74

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
ONLINE 12	Draft	O	03/27/2015	$ 3.15	CREDIT CARD FEE
ONLINE 12	Draft	O	03/29/2015	$ 0.90	CREDIT CARD FEE

5. Total only this Page $ 9.00

6. Total of ALL CRO-1310 Pages $ 3,536.13

(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

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
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
PIRYX
144 2nd St. 1st Floor
SAN FRANCISCO, CA 94105

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 189.74

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
ONLINE 12	Draft	O	04/10/2015	$ 1.80	CREDIT CARD FEE
ONLINE 12	Draft	O	04/15/2015	$ 0.90	CREDIT CARD FEE

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
PIRYX
144 2nd St. 1st Floor
SAN FRANCISCO, CA 94105

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 189.74

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
ONLINE 12	Draft	O	04/18/2015	$ 2.25	CREDIT CARD FEE
ONLINE 12	Draft	O	04/19/2015	$ 2.25	CREDIT CARD FEE

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
PIRYX
144 2nd St. 1st Floor
SAN FRANCISCO, CA 94105

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 189.74

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
ONLINE 12	Draft	O	04/21/2015	$ 0.90	CREDIT CARD FEE
ONLINE 12	Draft	O	04/21/2015	$ 0.90	CREDIT CARD FEE

5. Total only this Page $ 9.00

6. Total of ALL CRO-1310 Pages $ 3,536.13

(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

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
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
PIRYX
144 2nd St. 1st Floor
SAN FRANCISCO, CA 94105

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 189.74

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
ONLINE 12	Draft	O	04/22/2015	$ 0.90	CREDIT CARD FEE
ONLINE 12	Draft	O	04/22/2015	$ 0.90	CREDIT CARD FEE

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
PIRYX
144 2nd St. 1st Floor
SAN FRANCISCO, CA 94105

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 189.74

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
ONLINE 12	Draft	O	04/22/2015	$ 0.90	CREDIT CARD FEE
ONLINE 12	Draft	O	04/22/2015	$ 1.80	CREDIT CARD FEE

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
PIRYX
144 2nd St. 1st Floor
SAN FRANCISCO, CA 94105

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 189.74

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
ONLINE 12	Draft	O	04/22/2015	$ 11.25	CREDIT CARD FEE
ONLINE 12	Draft	O	04/24/2015	$ 2.25	CREDIT CARD FEE

5. Total only this Page	$ 18.00
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)*	$ 3,536.13

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 ☐ 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
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): PIRYX, 144 2nd St. 1st Floor, SAN FRANCISCO, CA 94105

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 189.74

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
ONLINE 12	Draft	O	04/27/2015	$ 4.50	CREDIT CARD FEE
ONLINE 12	Draft	CO	05/22/2015	$ 22.50	CREDIT CARD FEE

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): PIRYX, 144 2nd St. 1st Floor, SAN FRANCISCO, CA 94105

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 189.74

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
ONLINE 12	Draft	O	05/30/2015	$ 4.50	CREDIT CARD FEE
ONLINE 12	Draft	O	06/01/2015	$ 1.58	CREDIT CARD FEE

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): PIRYX, 144 2nd St. 1st Floor, SAN FRANCISCO, CA 94105

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 189.74

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
ONLINE 12	Draft	O	06/04/2015	$ 1.58	CREDIT CARD FEE
ONLINE 12	Draft	O	06/04/2015	$ 1.58	CREDIT CARD FEE

5. Total only this Page $ 36.24

6. Total of ALL CRO-1310 Pages $ 3,536.13

(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

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
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
PIRYX 144 2nd St. 1st Floor SAN FRANCISCO, CA 94105		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 189.74

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
ONLINE 12	Draft	O	06/04/2015	$ 2.25	CREDIT CARD FEE
ONLINE 12	Draft	O	06/05/2015	$ 4.50	CREDIT CARD FEE

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
PIRYX 144 2nd St. 1st Floor SAN FRANCISCO, CA 94105		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 189.74

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
ONLINE 12	Draft	O	06/09/2015	$ 4.50	CREDIT CARD FEE
ONLINE 12	Draft	O	06/09/2015	$ 4.50	CREDIT CARD FEE

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
PIRYX 144 2nd St. 1st Floor SAN FRANCISCO, CA 94105		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 189.74

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
ONLINE 12	Draft	C	06/18/2015	$ 1.13	CREDIT CARD FEE
ONLINE 12	Draft	C	06/19/2015	$ 2.25	CREDIT CARD FEE

5. Total only this Page	$ 19.13
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)*	$ 3,536.13

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 ☐ 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
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
PIRYX
144 2nd St. 1st Floor
SAN FRANCISCO, CA 94105

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 189.74

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
ONLINE 12	Draft	C	06/24/2015	$ 2.25	CREDIT CARD FEE
ONLINE 12	Draft	C	06/30/2015	$ 1.13	CREDIT CARD FEE

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
PIRYX
144 2nd St. 1st Floor
SAN FRANCISCO, CA 94105

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 189.74

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
ONLINE 12	Draft	C	06/30/2015	$ 2.25	CREDIT CARD FEE
ONLINE 12	Draft	C	06/30/2015	$ 2.25	CREDIT CARD FEE

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
PIRYX
144 2nd St. 1st Floor
SAN FRANCISCO, CA 94105

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 189.74

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
ONLINE 12	Draft	C	06/30/2015	$ 4.50	CREDIT CARD FEE
ONLINE 12	Draft	C	06/30/2015	$ 4.50	CREDIT CARD FEE

5. Total only this Page $ 16.88

6. Total of ALL CRO-1310 Pages $ 3,536.13

(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

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
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
U.S. POSTAL SERVICE VILLAGE ROAD LELAND, NC 28451		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 521.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
MAIN	Check	I	05/11/2015	$ 98.00	
MAIN	Debit Card	I	06/01/2015	$ 147.00	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
UNITY GROUP OF NORTH BRUNSWICK PO BOX 249 LELAND, NC 28451		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 50.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
MAIN	Check	O	02/20/2015	$ 25.00	AD IN PARADE PROGRAM
				$	

5. Total only this Page	$ 270.00
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)*	$ 3,536.13

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)

Account Transfers Within the Committee

Page 1 of 1

Amendment ☐ Yes ☒ No

Use this form to transfer money between multiple bank, depository or credit accounts.

1. Committee Full Name (and Fund if applicable)	2. ID Number
FRANK WILLIAMS COMMITTEE	BRU-988340-C-001

3. Transfer Information

a. Amend	b. Account Code Transferred From	c. Account Code Transferred To	d. Date (mm/dd/yyyy)	e. Amount
☐ Add ☐ Remove	ONLINE 12	MAIN	04/06/2015	$ 38.20
☐ Add ☐ Remove	ONLINE 12	MAIN	04/07/2015	$ 38.20
☐ Add ☐ Remove	ONLINE 12	MAIN	04/08/2015	$ 85.95
☐ Add ☐ Remove	ONLINE 12	MAIN	04/21/2015	$ 38.20
☐ Add ☐ Remove	ONLINE 12	MAIN	04/27/2015	$ 19.10
☐ Add ☐ Remove	ONLINE 12	MAIN	04/29/2015	$ 95.50
☐ Add ☐ Remove	ONLINE 12	MAIN	05/01/2015	$ 38.20
☐ Add ☐ Remove	ONLINE 12	MAIN	05/04/2015	$ 334.25
☐ Add ☐ Remove	ONLINE 12	MAIN	05/06/2015	$ 47.75
☐ Add ☐ Remove	ONLINE 12	MAIN	05/07/2015	$ 95.50
☐ Add ☐ Remove	ONLINE 12	MAIN	06/04/2015	$ 477.50
☐ Add ☐ Remove	ONLINE 12	MAIN	06/05/2015	$ 95.50
☐ Add ☐ Remove	ONLINE 12	MAIN	06/08/2015	$ 33.42
☐ Add ☐ Remove	ONLINE 12	MAIN	06/11/2015	$ 114.59
☐ Add ☐ Remove	ONLINE 12	MAIN	06/12/2015	$ 95.50
☐ Add ☐ Remove	ONLINE 12	MAIN	06/16/2015	$ 191.00
☐ Add ☐ Remove	ONLINE 12	MAIN	06/25/2015	$ 23.87
4. Total only this Page				$ 1,862.23
5. Total of ALL CRO-1720 Pages *(This line must be on line 24 of Detailed Summary Page CRO-1100)*				$ 1,862.23