Dis-1 D	7	5.		Amendment			
Disclosure Report (Yes No			
Use this form for general report		nation, must be s	igned and submitted alon	ig with other detailed forms.			
Do not use this form to update	e information.		445				
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ROBERT BULTMAN FOR WIN	NSTON-SALEM	201	1000000				
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2013	07/18/2013	07/25	12013 7/26/13 ROBERT	BULTMAN			
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☐ Candidate Campaign ☐ Pa	A CONTRACTOR	Organizational	Organizational	Organizational			
	gal Expense Fund	Thirty-five day	Quarterly	☐ Pre-referendum			
L Referencem	gai expense rent	Pre-primary	First	☐ Final			
☐ "Booster Fund"		Pre-election	Second	Supplemental Final			
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CANDIDATE COMMITTE	01			1 2 4 W			
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CERTIFICATION			建 的的表现在1000年1000年1000年				
I certify that the Committee	or Fund is in complian	ce with all applic	able provisions of Article	22A 210 & 220 22N of /			
Chapter 163 of the NC Gene	eral Statutes and that r	o funds are com	mingled with prohibited o	r other non-displosed			
funds. I further certify that	this report is complete	e, true and correc	t and that I have been tra	ined by the NC State Board			
		· ////	10 1				
KORFIT BULLI	17M	1600	- Dull-	07/25/2013			
Printed Name of	Signer	Signature	of Appointed Treasurer	Date			
FOR OFFICE USE ONLY		至, 15.1 在 16.1 读	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
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Date Data Entered:	TO THE PROPERTY OF THE PROPERT	Employee	<u> Santa Alexandra (n. 18</u> 11). 18 augustus (n. 1811).	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.

Detailed Summary

Amendment

Yes X 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 SALEM 2013 OREAN 12AT DIA JULTMAN WINSTON Total this Total this 2013 Start of Election Cycle: January 1, Reporting Period **Election Cycle** 4) Cash on Hand at Start \$ RECEIPTS 5) Aggregated Contributions from Individuals (CRO-1205) 6), Contributions from Individuals (CRO-1210) 200. \$ 200. 7) Contributions from Political Party Committees (CRO-1220) \$ 8) Contributions from Other Political Committees (CRO-1230) \$ 9) Loan Proceeds (CRO-1410) \$ 10) Refunds/Reimbursements to the Committee (CRO-1240) \$ 11) Other Receipt Sources 11a) Interest on Bank Accounts (CRO-1250) \$ 11b) Contributions from Not-For-Profit Organizations (CRO-1250) \$ 11c) Outside Sources of Income (CRO-1250) \$ 11d) Legal Expense Fund - Other Sources (CRO-1270) \$ \$ 11e) Exempt Purchase Price Sales (CRO-1265) 12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e) 205 205. EXPENDITURES 13) Disbursements 13a) Operating Expenditures (CRO-1310) \$ 13b) Contributions to Candidates/Political Committees (CRO-1310) \$ 13c) Coordinated Party Expenditures (CRO-1310) \$ \$ 14) Aggregated Non-Media Expenditures (CRO-1315) \$ \$ \$ 15) Loan Repayments (CRO-1420) \$ 100, 00 '00, ° 16) Refunds/Reimbursements from the Committee (CRO-1320) \$ 17) In-Kind Contributions (CRO-1510) \$ \$ 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) 105. 1051 100 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) 100 ADDITIONAL INFORMATION 20) Non-Monetary Gifts Given to Other Committees (CRO-1330) \$ 21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430) \$ 22) Debts and Obligations owed by the Committee (CRO-1610) \$ 23) Debts and Obligations owed to the Committee (CRO-1620) 24) Account Transfers Within the Committee (CRO-1720) \$ (CRO-1710) 25) Administrative Support \$ 26) Forgiven Loans (CRO-1440) 27) 48-Hour Notice Reports Sum (CRO-2220) \$ 28) Contributions to be Refunded (CRO-1215) \$

		rom inaiviau:		Pg			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. 1	D Number			
Ro	BENT Bul	IMAN FOR	MOTERIAL	- SALEM					
3. Con	tributor Inform	ation		Charles, as as the property of the second	move	ri. Nel			
a. Full Name, Mailing Address & Phone				b. Job Title/Profe	ession	d. Comments			
(include city, state, & zip)				111 0	141.00				
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(includ	le city, state, & zip)	· · · · · · · · · · · · · · · · · · ·		_					
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		of Detailed Summary Pa	ee CRO-1100)			4	√0 0 °		

Amendment

Refunds/Reimbursements From the Committee Pg of Yes No									
Use this form to report refunds/reimbursements, including contributions returned to the contributor.									
1. Committee Full Name (and Fund if applicable) [2. ID Number									
KABEAT BULLIMAN FOR WINSTEN DALEM 3. Payee Information Add Remove									
a. Full Name, Mailing	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Phone	d. Type of Comm	Not the third problem in the control of the control of	h. Original Receipt Date				
(include city, state, &		Candidate	☐ PAC	Toriginal Receipt Date					
			Referendum	Party	7/23/13				
KOBELT KULTMAN			e. Level Registere		i. O	i. Original Receipt Amount			
ROBELT BULFMAN 203 MONTPELIER DR. WINSTON-SALEM, NC			Federal State	County:	\$ 100.00				
200			f. Purpose Code			j. Election Sum to Date			
WINSTON-	- 312	em, NC	1		\$ 100.00				
27103			<u> </u>		* 100.				
b. Job Title/Profession	WET	c. Employer's Name/Specific Field	g. Comments		k. A	k. Account Code			
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I. Form of Payment	'''	red Remarks		n. Date (mm/dd/yy					
COMMITTEE CK.	#	<u> </u>		7/26/13		\$ /00 >0			
3. Payee Informati	on		Add 🔲 Rei	move	anen s				
a. Full Name, Mailing A		Phone	d. Type of Commi	·· <u> </u>	h. Original Receipt Date				
(include city, state, &	zip)		Candidate	PAC					
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The Total Control of the State			g. Comments			k. Account Code			
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	i Respirations	MARINE WINDOWS STATES CONTROL OF THE	Manual Company		100115000	\$			
3. Payee Information		Add Remove							
a. Full Name, Mailing Address & Phone			d. Type of Committee Candidate PAC			h. Original Receipt Date			
(include city, state, &	zip)		Referendum Party			i. Original Receipt Amount			
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4. Total only this P	age ·				\$	700			
5. Total of ALL CR		Pages				· · · · · · · · · · · · · · · · · · ·			
(This line must be on l	ine 16 of 1	Detailed Summary Page CRO-1100)			\$	100			
6. Purpose Codes (List detailed disbursement code in (f) above)									
L - Returned to Co			Service	N - Excee	ded	Contribution Limit			
P* - Reimbursem			nggaray rogades costos	Salegge george saleemens	114029				
* Codes require detailed explanation in required remarks field (m)									

						Isinem	I I I I I I I I I I I I I I I I I I I		
In-Kind Contributions		$\mathbf{P}_{\mathbf{g}}$	l	_ of	1	□ Ye		No	
Use this form to report non-monetary contributions, donation Use CRO-1215 if In-Kind Contributions were or will be re-					to the co	mmittee o	r fund.		
900 0310									
ROBERT BULTMAN FOR WINSTON-SALEM	Remark.		Charles			***************************************	THE STATE OF THE S	***************************************	
z. Fall Name, Mailing Address & Phone 3.		Type of Con	tribut	or ,	e e Co	mments			
(include city, state, & zip)	X	Individual							
Aggregated Individual Contribution	I=	Candidate							
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FILING FEES FOR WINSTON-SALEM SOUTHWEST WARD			07/18/2013			\$		5.00	
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NC State Board of Elections

CRO-1510

\$

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December 2007