

**REPORT OF RECEIPTS AND DISBURSEMENTS  
FOR A COMMITTEE OR ORGANIZATION  
SUPPORTING A NOMINATING CONVENTION  
(Summary Page)**

1. (a) Name of Committee (in full) <b>COMMITTEE FOR CHARLOTTE/CHARLOTTE DNC HOST COMMITTEE</b>	2. FEC Identification Number C00493254
(b) Address (Number and Street) P.O. BOX 36481	3. Type of Committee/Organization: <input type="checkbox"/> Convention Committee <input checked="" type="checkbox"/> Host Committee <input type="checkbox"/> Other _____ (specify)
(c) City, State and ZIP Code CHARLOTTE NC 28236	

## 4. TYPE OF REPORT (Check appropriate box(es)):

(a)  POST CONVENTION REPORT QUARTERLY REPORT (check one)  April 15  July 15  October 15  January 31 FINAL REPORT(b) Is this an Amendment?  YES  NO**SUMMARY OF RECEIPTS AND DISBURSEMENTS**

5. Covering Period FROM: 01/01/2013 THROUGH: 03/31/2013

<b>SECTION A — CASH BALANCE SUMMARY</b>	Column A This Period	Column B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2013		840223.61
(b) Cash on Hand at Beginning of Reporting Period	840223.61	
(c) Total Receipts (From Line 20)	9529757.25	9529757.25
(d) Subtotal (Add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	10369980.86	10369980.86
7. Total Disbursements (From Line 25)	10340305.55	10340305.55
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d))	29675.31	29675.31
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C or Schedule D)	91606.38	
<b>SECTION B — SUMMARY OF EXPENDITURES SUBJECT TO LIMITATIONS</b>		
11. Convention Expenditures (From Line 21(c))	1326641.19	1326641.19
12. Refunds, Rebates, Returns of Deposits Relating to Convention Expenditures (From Line 17(c))	1008809.23	1008809.23
(a) Expenditures Subject to Limitation (Subtract Line 12 from Line 11)	317831.96	317831.96
(b) Expenditures from Prior Years Subject to Limitation	0.00	0.00
(c) Total Expenditures Subject to Limitation (Add Lines 12(a) and 12(b))		317831.96

*I certify that I have examined this report, and to the best of my knowledge and belief it is true, correct and complete.*

HARVEY GANTT

[Electronically Filed]

07/12/2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 437g.

For Further Federal Election Commission  
Information Toll Free 800/424-9530  
Contact: Local 202/694-1100

FE1AN056

FEC FORM 4 (Revised 1/2001)

**DETAILED SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS  
(Page 2 of FEC Form 4)**

Name of Committee (in Full) COMMITTEE FOR CHARLOTTE/CHARLOTTE DNC HOST COMMITTEE	Report Covering the Period: FROM: 01/01/2013 TO: 03/31/2013	
RECEIPTS	Column A This Period	Column B Calendar Year-to-Date
	13. Federal Funds (Itemize all on Schedule A)	0.00
14. Contributions to Defray Convention Expenses:		
(a) Itemized (Use Schedule A)	8520948.02	
(b) Unitemized	0.00	
(c) Subtotal of Contributions to Defray Convention Expenses (Add Lines 14(a) and 14(b))	8520948.02	8520948.02
15. Transfers from Affiliated Committees	0.00	0.00
16. Loans and Loan Repayments Received (Add Lines 16(a) and 16(b))		
(a) Loans Received	0.00	
(b) Loan Repayments Received	0.00	
(c) Subtotal of Loans and Loan Repayments Received (Add Lines 14a and 14b)	0.00	0.00
17. Refunds, Rebates, Returns of Deposits Relating to Convention Expenditures:		
(a) Itemized (Use Schedule A)	1008809.23	
(b) Unitemized	0.00	
(c) Subtotal of Refunds, Rebates, Returns of Deposits Relating to Convention Expenditures (Add Lines 17(a) and 17(b))	1008809.23	1008809.23
18. Other Refunds, Rebates, Returns of Deposits:		
(a) Itemized Other Refunds, Rebates, Returns of Deposits	0.00	
(b) Unitemized Other Refunds, Rebates, Returns of Deposits	0.00	
(c) Subtotal of Other Refunds, Rebates, Returns of Deposits (Add Lines 18(a) and 18(b))	0.00	0.00
19. Other Income:		
(a) Itemized (Use Schedule A)	0.00	
(b) Unitemized	0.00	
(c) Subtotal of Other Income (Add Lines 19(a) and 19(b))	0.00	0.00
20. TOTAL RECEIPTS (Add Lines 13, 14(c), 15, 16(c), 17(c), 18(c) and 19(c))	9529757.25	9529757.25
<b>DISBURSEMENTS</b>		
21. Convention Expenditures:		
(a) Itemized (Use Schedule B)	1326437.37	
(b) Unitemized	203.82	
(c) Subtotal of Convention Expenditures (Add Lines 21(a) and 21(b))	1326641.19	1326641.19
22. Transfers to Affiliated Committees	13664.36	13664.36
23. Loans and Loan Repayments Made:		
(a) Loans Made	0.00	
(b) Loan Repayments Made	9000000.00	
(c) Subtotal of Loans and Loan Repayments Made (Add Lines 23(a) and 23(b))	9000000.00	9000000.00
24. Other Disbursements:		
(a) Itemized (Use Schedule B)	0.00	
(b) Unitemized	0.00	
(c) Subtotal of Other Disbursements (Add Lines 24(a) and 24(b))	0.00	0.00
25. TOTAL DISBURSEMENTS (Add Lines 21(c), 22, 23(c) and 24(c))	10340305.55	10340305.55

**SCHEDULE A (FEC Form 4)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 3 OF 23
<input type="checkbox"/> 13	<input type="checkbox"/> 14a	<input type="checkbox"/> 15	<input type="checkbox"/> 16a
<input type="checkbox"/> 16b	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 18a	<input type="checkbox"/> 19a

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**COMMITTEE FOR CHARLOTTE/CHARLOTTE DNC HOST COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Charlotte Regional Visitors Authority</b>		Date of Receipt 01 / 24 / 2013
Mailing Address 400 E Martin Luther King Jr Blvd		<b>Transaction ID : SA17A.4132</b>
City Charlotte	State NC	Zip Code 28202
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 428880.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 428880.00	

Full Name (Last, First, Middle Initial) <b>B. RK Corporate Productions, Inc.</b>		Date of Receipt 01 / 04 / 2013
Mailing Address 12400 Wilshire Blvd. Ste 1275		<b>Transaction ID : SA17A.4137</b>
City Los Angeles	State CA	Zip Code 90025
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 579929.23
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 579929.23	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1008809.23
<b>TOTAL</b> This Period (last page this line number only) .....	1008809.23

**SCHEDULE A (FEC Form 4)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 4 OF 23
<input type="checkbox"/> 13	<input checked="" type="checkbox"/> 14a	<input type="checkbox"/> 15	<input type="checkbox"/> 16a
<input type="checkbox"/> 16b	<input type="checkbox"/> 17a	<input type="checkbox"/> 18a	<input type="checkbox"/> 19a

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NAME OF COMMITTEE (In Full)  
**COMMITTEE FOR CHARLOTTE/CHARLOTTE DNC HOST COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Duke Energy Corporation</b>		Date of Receipt MM / DD / YYYY 02 / 28 / 2013
Mailing Address 526 S. College Street		<b>Transaction ID : SA14A.4139</b>
City Charlotte	State NC	Zip Code 28202
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 8500000.00	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 8500000.00	

Full Name (Last, First, Middle Initial) <b>B. Duke Energy Corporation</b>		Date of Receipt MM / DD / YYYY 03 / 06 / 2013
Mailing Address 526 S. College Street		<b>Transaction ID : SA14A.4220</b>
City Charlotte	State NC	Zip Code 28202
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 40948.02	
Name of Employer	Occupation	In-Kind - Interest Expense
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 8540948.02	

Full Name (Last, First, Middle Initial) <b>C. Education Reform Now</b>		Date of Receipt MM / DD / YYYY 01 / 03 / 2013
Mailing Address 928 Broadway #505		<b>Transaction ID : SA14A.4143</b>
City New York	State NY	Zip Code 10010
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period -25000.00	
Name of Employer	Occupation	Insufficient Funds
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ -25000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	8515948.02
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 4) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5 OF 23
<input type="checkbox"/> 13	<input checked="" type="checkbox"/> 14a	<input type="checkbox"/> 15	<input type="checkbox"/> 16a
<input type="checkbox"/> 16b	<input type="checkbox"/> 17a	<input type="checkbox"/> 18a	<input type="checkbox"/> 19a

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NAME OF COMMITTEE (In Full)  
**COMMITTEE FOR CHARLOTTE/CHARLOTTE DNC HOST COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. OBAMA FOR AMERICA</b>		Date of Receipt MM / DD / YYYY 02 / 04 / 2013
Mailing Address PO BOX 8102		Transaction ID : SA14A.4145
City CHICAGO	State IL	
FEC ID number of contributing federal political committee. <b>C</b> C00431445		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	8520948.02

**SCHEDULE B (FEC Form 4)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

21a  22  23a  23b  24a

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NAME OF COMMITTEE (In Full)

**COMMITTEE FOR CHARLOTTE/CHARLOTTE DNC HOST COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. NEW AMERICAN CITY INC**

Mailing Address P.O. BOX 36481

City State Zip Code  
CHARLOTTE NC 28236

Purpose of Disbursement  
Transfer

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 24 / 2013

Amount of Each Disbursement this Period

11628.00

Transaction ID : SB22.4148

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. NEW AMERICAN CITY INC**

Mailing Address P.O. BOX 36481

City State Zip Code  
CHARLOTTE NC 28236

Purpose of Disbursement  
Transfer

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 08 / 2013

Amount of Each Disbursement this Period

378.00

Transaction ID : SB22.4151

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. NEW AMERICAN CITY INC**

Mailing Address P.O. BOX 36481

City State Zip Code  
CHARLOTTE NC 28236

Purpose of Disbursement  
Transfer

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 14 / 2013

Amount of Each Disbursement this Period

658.36

Transaction ID : SB22.4150

Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

12664.36

# SCHEDULE B (FEC Form 4) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

21a  22  23a  23b  24a

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NAME OF COMMITTEE (In Full)

## COMMITTEE FOR CHARLOTTE/CHARLOTTE DNC HOST COMMITTEE

Full Name (Last, First, Middle Initial)

### A. NEW AMERICAN CITY INC

Mailing Address P.O. BOX 36481

City CHARLOTTE State NC Zip Code 28236

Purpose of Disbursement Transfer

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 16 / 2013

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB22.4149

Category/Type

### B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Category/Type

### C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional) ..... ▶

TOTAL This Period (last page this line number only) ..... ▶

1000.00

13664.36

**SCHEDULE B (FEC Form 4)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

21a  22  23a  23b  24a

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NAME OF COMMITTEE (In Full)

**COMMITTEE FOR CHARLOTTE/CHARLOTTE DNC HOST COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address PO Box 53852

City State Zip Code  
Phoenix AZ 85072

Purpose of Disbursement  
Lodging, Supplies

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 27 / 2013

Amount of Each Disbursement this Period

61078.71

Transaction ID : SB21A.4152

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. AT&T Mobility**

Mailing Address 5565 Glenridge Connector

City State Zip Code  
Atlanta GA 31132

Purpose of Disbursement  
Telecommunications

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 07 / 2013

Amount of Each Disbursement this Period

13820.15

Transaction ID : SB21A.4155

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. BANK OF AMERICA**

Mailing Address 400 S TRYON STREET

City State Zip Code  
CHARLOTTE NC 28285

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 27 / 2013

Amount of Each Disbursement this Period

25.00

Transaction ID : SB21A.4157

Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

74923.86



**SCHEDULE B (FEC Form 4)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

21a  22  23a  23b  24a

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NAME OF COMMITTEE (In Full)

**COMMITTEE FOR CHARLOTTE/CHARLOTTE DNC HOST COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. BANK OF AMERICA**

Mailing Address 400 S TRYON STREET

City State Zip Code  
CHARLOTTE NC 28285

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2013

Amount of Each Disbursement this Period

1268.66

Transaction ID : SB21A.4158

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. BANK OF AMERICA**

Mailing Address 400 S TRYON STREET

City State Zip Code  
CHARLOTTE NC 28285

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2013

Amount of Each Disbursement this Period

4.25

Transaction ID : SB21A.4159

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Duke Energy Business Services, LLC**

Mailing Address PO Box 1007 ST30C

City State Zip Code  
Charlotte NC 28201

Purpose of Disbursement  
Facility Maintenance

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2013

Amount of Each Disbursement this Period

1102.00

Transaction ID : SB21A.4164

Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

2374.91

**SCHEDULE B (FEC Form 4)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

21a  22  23a  23b  24a

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NAME OF COMMITTEE (In Full)

**COMMITTEE FOR CHARLOTTE/CHARLOTTE DNC HOST COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Duke Energy Corporation**

Mailing Address 526 S. College Street

City State Zip Code  
Charlotte NC 28202

Purpose of Disbursement  
In-Kind Received

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2013

Amount of Each Disbursement this Period

85000000.00

Transaction ID : SB21A.4166

[MEMO ITEM]

Category/Type

**B. Duke Energy Corporation**

Mailing Address 526 S. College Street

City State Zip Code  
Charlotte NC 28202

Purpose of Disbursement  
In-Kind - Interest Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 06 / 2013

Amount of Each Disbursement this Period

40948.02

Transaction ID : SB21A.4221

Category/Type

**C. Financial Innovations**

Mailing Address One Weingeroff Rd

City State Zip Code  
Cranston RI 02910

Purpose of Disbursement  
Printing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2013

Amount of Each Disbursement this Period

11610.32

Transaction ID : SB21A.4167

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

52558.34

**SCHEDULE B (FEC Form 4)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

21a  22  23a  23b  24a

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NAME OF COMMITTEE (In Full)

**COMMITTEE FOR CHARLOTTE/CHARLOTTE DNC HOST COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Hargrove, Inc.**

Mailing Address attn: Seth Henderson One Hargrove

City Lanham State MD Zip Code 20706

Purpose of Disbursement Construction

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 02 / 2013

Amount of Each Disbursement this Period

985654.12

Transaction ID : SB21A.4169

Category/Type

**B. Level 3 Communnications, LLC**

Mailing Address PO Box 910182

City Denver State CO Zip Code 80291

Purpose of Disbursement Technology Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2013

Amount of Each Disbursement this Period

40066.92

Transaction ID : SB21A.4170

Category/Type

**C. Mechanical and Farmers Bank**

Mailing Address 100 Beatties Ford Rd

City Charlotte State NC Zip Code 28216

Purpose of Disbursement Interest Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2013

Amount of Each Disbursement this Period

5750.00

Transaction ID : SB21A.4172

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

1031471.04

# SCHEDULE B (FEC Form 4) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

21a  22  23a  23b  24a

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NAME OF COMMITTEE (In Full)

## COMMITTEE FOR CHARLOTTE/CHARLOTTE DNC HOST COMMITTEE

Full Name (Last, First, Middle Initial)

### A. Mechanical and Farmers Bank

Mailing Address 100 Beatties Ford Rd

City State Zip Code  
Charlotte NC 28216

Purpose of Disbursement  
Interest Expense

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 22 / 2013

Amount of Each Disbursement this Period

3172.50

Transaction ID : SB21A.4174

Category/  
Type

### B. Office Depot

Mailing Address PO Box 630813

City State Zip Code  
Cincinnati OH 45263

Purpose of Disbursement  
Office Supplies

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2013

Amount of Each Disbursement this Period

290.59

Transaction ID : SB21A.4175

Category/  
Type

### C. Purchase Power

Mailing Address PO Box 371874

City State Zip Code  
Pittsburgh PA 15250

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2013

Amount of Each Disbursement this Period

893.31

Transaction ID : SB21A.4179

Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

4356.40

**SCHEDULE B (FEC Form 4)  
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:  
(check only one)

21a  22  23a  23b  24a

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NAME OF COMMITTEE (In Full)

**COMMITTEE FOR CHARLOTTE/CHARLOTTE DNC HOST COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Purchase Power**

Mailing Address PO Box 371874

City State Zip Code  
Pittsburgh PA 15250

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 22 / 2013

Amount of Each Disbursement this Period

294.80

Transaction ID : SB21A.4177

Category/  
Type

**B. Rush Computer Rentals**

Mailing Address 6018 Solutions Center

City State Zip Code  
Chicago IL 60677

Purpose of Disbursement  
Equipment Rental

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 16 / 2013

Amount of Each Disbursement this Period

791.30

Transaction ID : SB21A.4180

Category/  
Type

**C. Smart Source Rentals**

Mailing Address PO Box 289

City State Zip Code  
Laurel NY 11948

Purpose of Disbursement  
Equipment Rental

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2013

Amount of Each Disbursement this Period

45267.62

Transaction ID : SB21A.4182

Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

46353.72

**SCHEDULE B (FEC Form 4)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

21a  22  23a  23b  24a

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NAME OF COMMITTEE (In Full)

**COMMITTEE FOR CHARLOTTE/CHARLOTTE DNC HOST COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Tisbury Tours, Inc.**

Mailing Address 360 Hamilton Ave

City State Zip Code  
White Plains NY 10601

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 28 2013

Amount of Each Disbursement this Period

99889.10

Transaction ID : SB21A.4184

Category/  
Type

**B. Tuxedo Touring, LLC**

Mailing Address 535 Stonebriar Way

City State Zip Code  
Atlanta GA 30331

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 07 2013

Amount of Each Disbursement this Period

7255.00

Transaction ID : SB21A.4187

Category/  
Type

**C. Tuxedo Touring, LLC**

Mailing Address 535 Stonebriar Way

City State Zip Code  
Atlanta GA 30331

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 28 2013

Amount of Each Disbursement this Period

7255.00

Transaction ID : SB21A.4186

Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

114399.10

1326437.37

**SCHEDULE B (FEC Form 4)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

21a  22  23a  23b  24a

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NAME OF COMMITTEE (In Full)

**COMMITTEE FOR CHARLOTTE/CHARLOTTE DNC HOST COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. BANK OF AMERICA**

Mailing Address 400 S TRYON STREET

City State Zip Code  
CHARLOTTE NC 28285

Purpose of Disbursement  
Loan Repayment

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 31 / 2013

Amount of Each Disbursement this Period

500000.00

Transaction ID : SB23B.4192

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. BANK OF AMERICA**

Mailing Address 400 S TRYON STREET

City State Zip Code  
CHARLOTTE NC 28285

Purpose of Disbursement  
In-Kind Loan Repayment

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2013

Amount of Each Disbursement this Period

3900000.00

Transaction ID : SB23B.4188

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. BANK OF AMERICA**

Mailing Address 400 S TRYON STREET

City State Zip Code  
CHARLOTTE NC 28285

Purpose of Disbursement  
In-Kind Loan Repayment

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2013

Amount of Each Disbursement this Period

500000.00

Transaction ID : SB23B.4189

Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

4900000.00

# SCHEDULE B (FEC Form 4) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

21a  22  23a  23b  24a

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NAME OF COMMITTEE (In Full)

## COMMITTEE FOR CHARLOTTE/CHARLOTTE DNC HOST COMMITTEE

Full Name (Last, First, Middle Initial)

### A. BANK OF AMERICA

Mailing Address 400 S TRYON STREET

City State Zip Code  
CHARLOTTE NC 28285

Purpose of Disbursement  
In-Kind Loan Repayment

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 28 2013

Amount of Each Disbursement this Period

2100000.00

Transaction ID : SB23B.4190

Category/  
Type

Full Name (Last, First, Middle Initial)

### B. BANK OF AMERICA

Mailing Address 400 S TRYON STREET

City State Zip Code  
CHARLOTTE NC 28285

Purpose of Disbursement  
In-Kind Loan Repayment

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 28 2013

Amount of Each Disbursement this Period

2000000.00

Transaction ID : SB23B.4191

Category/  
Type

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

4100000.00

9000000.00



**SCHEDULE C (FEC Form 4)**

**LOANS**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4102**  
**COMMITTEE FOR CHARLOTTE/CHARLOTTE DNC HOST COMMITTEE**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) BANK OF AMERICA	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 400 S TRYON STREET	
City CHARLOTTE State NC ZIP Code 28285	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2000000.00	2000000.00	0.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
MM / DD / YYYY 08 / 14 / 2012	MM / DD / YYYY 2/28/2013	0.00 % (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial) Duke Energy Corporation	Name of Employer
Mailing Address 526 S. College Street	Occupation
City State ZIP Code Charlotte NC 28202	Amount Guaranteed Outstanding: 0.00 <b>Transaction ID : SC/10.4102.0.SC2</b>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional) .....	0.00
<b>TOTALS</b> This Period (last page in this line only) .....	
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>	

**SCHEDULE C (FEC Form 4)**

**LOANS**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4109**  
**COMMITTEE FOR CHARLOTTE/CHARLOTTE DNC HOST COMMITTEE**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) BANK OF AMERICA	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 400 S TRYON STREET	
City CHARLOTTE State NC ZIP Code 28285	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2000000.00	2000000.00	0.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
08 / 27 / 2012	2/28/2013	0.00 % (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial) Duke Energy Corporation	Name of Employer
Mailing Address 526 S. College Street	Occupation
City State ZIP Code Charlotte NC 28202	Amount Guaranteed Outstanding: 0.00 <b>Transaction ID : SC/10.4109.0.SC2</b>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional) .....	0.00
<b>TOTALS</b> This Period (last page in this line only) .....	
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>	

**SCHEDULE C (FEC Form 4)**

**LOANS**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4110**  
**COMMITTEE FOR CHARLOTTE/CHARLOTTE DNC HOST COMMITTEE**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) BANK OF AMERICA	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 400 S TRYON STREET	
City CHARLOTTE State NC ZIP Code 28285	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3900000.00	3900000.00	0.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
MM / DD / YYYY 09 / 20 / 2012	MM / DD / YYYY 2/28/2013	0.00 % (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial) Duke Energy Corporation	Name of Employer
Mailing Address 526 S. College Street	Occupation
City State ZIP Code Charlotte NC 28202	Amount Guaranteed Outstanding: <b>Transaction ID : SC/10.4110.0.SC2</b>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional) .....	0.00
<b>TOTALS</b> This Period (last page in this line only) .....	
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>	

**SCHEDULE C (FEC Form 4)**

**LOANS**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4103**  
**COMMITTEE FOR CHARLOTTE/CHARLOTTE DNC HOST COMMITTEE**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) BANK OF AMERICA	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 400 S TRYON STREET	
City CHARLOTTE State NC ZIP Code 28285	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2100000.00	2100000.00	0.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
10 / 22 / 2012	2/28/2013	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial) Duke Energy Corporation	Name of Employer
Mailing Address 526 S. College Street	Occupation
City State ZIP Code Charlotte NC 28202	Amount Guaranteed Outstanding: 0.00 <b>Transaction ID : SC/10.4103.0.SC2</b>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional) .....	0.00
<b>TOTALS</b> This Period (last page in this line only) .....	0.00

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE D (FEC Form 4)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 21 OF 23
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**COMMITTEE FOR CHARLOTTE/CHARLOTTE DNC HOST COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>AT&amp;T Mobility</b>	Nature of Debt (Purpose): Phones
Mailing Address 5565 Glenridge Connector	
City State Zip Code Atlanta GA 31132	

Outstanding Balance Beginning This Period 13820.15	Transaction ID : SD10.4112	
Amount Incurred This Period 0.00	Payment This Period 13820.15	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Jocelyn Augustino</b>	Nature of Debt (Purpose): Photography Expenses
Mailing Address 3416 Gunston Road	
City State Zip Code Alexandria VA 22302	

Outstanding Balance Beginning This Period 944.20	Transaction ID : SD10.4114	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 944.20

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Centerstaging</b>	Nature of Debt (Purpose): Production - Musical Equipment
Mailing Address 3407 Winona Ave	
City State Zip Code Burbank CA 91504	

Outstanding Balance Beginning This Period 47078.00	Transaction ID : SD10.4116	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 47078.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	48022.20
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 4)  
DEBTS AND OBLIGATIONS**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)  9  10

**Excluding Loans**

NAME OF COMMITTEE (In Full)

**COMMITTEE FOR CHARLOTTE/CHARLOTTE DNC HOST COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <p style="text-align: center; font-size: 1.2em;"><b>Charlotte Convention Center</b></p>	Nature of Debt (Purpose): Convention Center Operations Expenses						
Mailing Address 501 S. College St.							
<table style="width:100%; border: none;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>Charlotte</td> <td>NC</td> <td>28202</td> </tr> </table>	City	State	Zip Code	Charlotte	NC	28202	
City	State	Zip Code					
Charlotte	NC	28202					

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;">37731.00</div>	<b>Transaction ID : SD10.4118</b>						
<table style="width:100%; border: none;"> <tr> <td style="width:33%;">Amount Incurred This Period</td> <td style="width:33%;">Payment This Period</td> <td style="width:34%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;">0.00</div></td> <td><div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;">0.00</div></td> <td><div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;">37731.00</div></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;">0.00</div>	<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;">0.00</div>	<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;">37731.00</div>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;">0.00</div>	<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;">0.00</div>	<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;">37731.00</div>					

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <p style="text-align: center; font-size: 1.2em;"><b>Grassroots Press</b></p>	Nature of Debt (Purpose): Printing Expenses						
Mailing Address 401-1 West Peace Street							
<table style="width:100%; border: none;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>Raleigh</td> <td>NC</td> <td>27603</td> </tr> </table>	City	State	Zip Code	Raleigh	NC	27603	
City	State	Zip Code					
Raleigh	NC	27603					

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;">68.06</div>	<b>Transaction ID : SD10.4120</b>						
<table style="width:100%; border: none;"> <tr> <td style="width:33%;">Amount Incurred This Period</td> <td style="width:33%;">Payment This Period</td> <td style="width:34%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;">0.00</div></td> <td><div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;">0.00</div></td> <td><div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;">68.06</div></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;">0.00</div>	<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;">0.00</div>	<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;">68.06</div>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;">0.00</div>	<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;">0.00</div>	<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;">68.06</div>					

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <p style="text-align: center; font-size: 1.2em;"><b>Hargrove, Inc.</b></p>	Nature of Debt (Purpose): Construction Management and Exposition Services						
Mailing Address attn: Seth Henderson One Hargrove							
<table style="width:100%; border: none;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>Lanham</td> <td>MD</td> <td>20706</td> </tr> </table>	City	State	Zip Code	Lanham	MD	20706	
City	State	Zip Code					
Lanham	MD	20706					

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;">985654.12</div>	<b>Transaction ID : SD10.4122</b>						
<table style="width:100%; border: none;"> <tr> <td style="width:33%;">Amount Incurred This Period</td> <td style="width:33%;">Payment This Period</td> <td style="width:34%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;">0.00</div></td> <td><div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;">985654.12</div></td> <td><div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;">0.00</div></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;">0.00</div>	<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;">985654.12</div>	<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;">0.00</div>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;">0.00</div>	<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;">985654.12</div>	<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;">0.00</div>					

<b>1) SUBTOTALS</b> This Period This Page (optional) ..... ▶	<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;">37799.06</div>
<b>2) TOTALS</b> This Period (last page this line number only) ..... ▶	<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;"> </div>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;"> </div>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 5px auto; text-align: center;"> </div>

**SCHEDULE D (FEC Form 4)  
DEBTS AND OBLIGATIONS**

(Use separate schedule(s) for each numbered line)	PAGE 23 OF 23
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

**Excluding Loans**

NAME OF COMMITTEE (In Full)

**COMMITTEE FOR CHARLOTTE/CHARLOTTE DNC HOST COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Show Pros Entertainment Services</b>	Nature of Debt (Purpose): Security Services
Mailing Address PO Box 12599	
City State Zip Code Charlotte NC 28220-2599	

Outstanding Balance Beginning This Period <input type="text" value="2760.12"/>	Transaction ID : SD10.4130	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2760.12"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tuxedo Touring, LLC</b>	Nature of Debt (Purpose): Transportation
Mailing Address 535 Stonebriar Way	
City State Zip Code Atlanta GA 30331	

Outstanding Balance Beginning This Period <input type="text" value="7255.00"/>	Transaction ID : SD10.4126	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="7255.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>TWCA</b>	Nature of Debt (Purpose): Arena Modifications
Mailing Address 333 East Trade Street	
City State Zip Code Charlotte NC 28202	

Outstanding Balance Beginning This Period <input type="text" value="3025.00"/>	Transaction ID : SD10.4128	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3025.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="5785.12"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text" value="91606.38"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="91606.38"/>