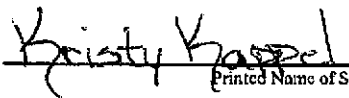
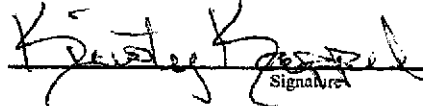


RECEIVED
MAY 27 2016
Campaign Finance Office
NC State Board of Elections

Electioneering Communications Report

This form should be accompanied by forms CRO-2320, CRO-2330 and CRO-2340. For electioneering guidance, please refer to N.C.G.S. § 163-278.6(8j), N.C.G.S. § 163-278.6(8k) and N.C.G.S. § 163-278.12C.

Amendment
 Yes No

1. Reporting Entity Information		
a. Full Name of Entity Making Disbursement North Carolina Chamber	d. Entity Type (Check One) <input type="checkbox"/> Individual <input type="checkbox"/> Other Organization <input checked="" type="checkbox"/> Nonprofit Organization	e. Federal ID Number (if applicable) 56-0340499
b. Mailing Address (Include City, State and Zip Code) and Phone Number 701 Corporate Center Drive, Suite 400 Raleigh, NC 27607 919-836-1400	f. Date Filed 05/27/2016	
g. Employer's Name or Principal Place of Business N/A		h. Occupation N/A
c. Report Type <input type="checkbox"/> Initial Quarterly: <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input checked="" type="checkbox"/> 48 Hour Semi-Annual: <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Other (Specify) _____		
2. Report Year 2016	3. Period Start Date (mm/dd/yyyy) May 25, 2016	4. Period End Date (mm/dd/yyyy) May 27, 2016
5. Custodian of Books		
a. Full Name of Entity's Custodian of Books and Accounts Nathan Babcock		
b. Mailing Address (Include City, State and Zip Code) and Phone Number 701 Corporate Center Drive, Suite 400 Raleigh, NC 27607 919-836-1400	c. Employer's Name or Principal Place of Business North Carolina Chamber	
		d. Occupation Political Director
6. Total Contributions ALL Pages		\$ 450,000.00
7. Total Disbursements ALL Pages		\$ 450,000.00
CERTIFICATION I certify that this statement is complete, true and correct. As provided by N.C.G.S. 163-278.32 this certification is treated as being made under oath and any person making this certification knowing the information to be untrue is guilty of a class 1 felony.		
 Printed Name of Signer	 Signature	5/27/16 Date

SCANNED

MAY 27 2016

JES

Incurred Costs for Electioneering Communications

An organization should use this form to report the entity with which costs were incurred for the electioneering communication as well as candidates identified or those to be identified. This form should be accompanied by forms CRO-2310, CRO-2320, and CRO-2330

1. Disbursement Information					
a. Item Num	b. Incurred Date (mm/dd/yyyy)	c. Communication Date (mm/dd/yyyy)	d. Purpose (including title(s) of communication(s))		
	May 25, 2016	N/A	NC Supreme Court Media Production and Placement		
e. Full Name, Mailing Address (include city, state, and zip) & Phone Number of the entity/business which was paid to produce the communication.					f. Amount
Revolution 1020 Princess Street Alexandria, VA - 22314					\$ 450,000.00
Candidate Full Name		Office Sought			Amount
Robert Edmunds		<input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> Council of State (specify): _____ <input checked="" type="checkbox"/> Co./Municipal Office _____ Co. _____ <input checked="" type="checkbox"/> Other Officer: Supreme Court Justice Co./Dst. _____			\$ 450,000.00
Candidate Full Name		Office Sought			Amount
		<input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Other Officer: _____ Co./Dst. _____			\$
Candidate Full Name		Office Sought			Amount
		<input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Other Officer: _____ Co./Dst. _____			\$
a. Item Num	b. Incurred Date (mm/dd/yyyy)	c. Communication Date (mm/dd/yyyy)	d. Purpose (including title(s) of communication(s))		
e. Full Name, Mailing Address (include city, state, and zip) & Phone Number of the entity/business which was paid to produce the communication.					f. Amount
					\$
Candidate Full Name		Office Sought			Amount
		<input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Other Officer: _____ Co./Dst. _____			\$
Candidate Full Name		Office Sought			Amount
		<input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Other Officer: _____ Co./Dst. _____			\$
Candidate Full Name		Office Sought			Amount
		<input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Other Officer: _____ Co./Dst. _____			\$
2. Total Disbursements THIS Page <i>(sum all the 'f' entries on this page)</i>					\$ 450,000.000
3. Total Disbursements ALL Pages <i>(sum all the 'f' entries on all Disbursement pages)</i>					\$ 450,000.000

CRO-2340

Receipts for Electioneering Communications

An organization should use this form to report all electioneering communication donations that exceeds \$1,000 in aggregated amounts from the same donor during the reporting period. This form should be accompanied by forms CRO-2310, CRO-2320 and CRO-2340

1. Receipt Information

a. Item Num	b. Donor's Full Name, Mailing Address & Phone Number (include city, state, and zip)	c. Principal Occupation of Donor	d. Date (mm/dd/yyyy)	e. Amount
	Institute For Legal Reform 1615 H Street, NW Washington, D.C. - 20062		5/26/16	\$ 250,000.00
	Judicial Crisis Network 722 12th Street, NW Washington, D.C. - 20005		5/20/16	\$ 200,000.00
				\$
				\$
				\$
				\$
2. Total Receipts THIS Page <small>(sum all the '1e' entries on this page)</small>				\$ 450,000.00
3. Total Receipts ALL Pages <small>(sum all the '1e' entries on all receipt pages)</small>				\$ 450,000.00

CRO-2330

Steffens, Jane

From: No.Reply@ncsbe.gov
Sent: Friday, May 27, 2016 4:49 PM
To: SVC_SBOE.Campaign.Reporting
Subject: Fax Mail (3 pages) from No.Reply@ncsbe.gov ; 05/27/16 04:48 PM
Attachments: FaxMessage.pdf

This is a fax message. Open the attached image file to read.

Disclaimer: The content of this message and all attachments are subject to NC Public Record Law. According to the law all information may be considered public record and subject to disclosure upon request to third parties without prior notification. NCSBE www.ncsbe.gov