

Disclosure Report Cover

Amendment

☐ Yes ☐ No

Please note that this cover sheet 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 those kinds of committee changes.
Use the Addendum form (CRO-1010) if more entries are needed.

1. Committee Information

a. Full Name Committee To Elect Whiteheart County Commissioner	c. ID Number SYH 91
b. Mailing Address (include City, State and Zip Code) POB 40 LEWISVILLE, NC 27023	d. Date Filed 10-25-04
	e. Phone Number 817-1555

2. Report Year 2004	3. Period Start Date (mm/dd/yyyy) 0630 2004	4. Period End Date (mm/dd/yyyy) 1016 2004	5. Treasurer Full Name Wm. Heath Whiteheart
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6. Type of Committee (Check one) <input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> Referendum <input type="checkbox"/> Party <input type="checkbox"/> PAC	8. Type of Report (check only one type of report from one category) Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	State/County <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First Plus <input type="checkbox"/> Second <input checked="" type="checkbox"/> Third Plus <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	Referendum <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special
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7. Type of Fund (if applicable, check one) <input type="checkbox"/> Soft Money Account <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> NC Political Party Financing Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:	9. Special Report Name
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10. Account Information a. Financial Institution Full Name Southern Community B&T	10. Account Information a. Financial Institution Full Name Southern Community B&T
b. Purpose 	b. Purpose
c. Code 	c. Code
d. Period Begin Balance \$2,985.00	d. Period Begin Balance \$

CERTIFICATION

I certify that the Committee is in compliance with all provisions of Article 22A, including that no funds are commingled with funds for a federal or out-of-state PAC. I further say that this report is complete, true and correct.

W.H. WHITEHEART
Printed Name of Signer

[Signature]
Signature of Appointed Treasurer

10/25/04
Date

FOR OFFICE USE ONLY

Date Received: **10-25-04**
Date Postmarked: _____
Date Scanned: _____

Employee: **Judy Spear**
Employee: _____
Employee: _____

Delivery Method

☐ Normal Mail
☐ Registered Mail
☒ Hand Delivered
☐ Electronically Filed

Detailed Summary

Amendment

☐ Yes

☐ No

1. Committee Full Name (and Fund if applicable) <i>Committee to Elect Whiteaker County Commissioner</i>		2. Type of Report		2. ID Number <i>154H91</i>	
Start of Election Cycle: January 1, _____		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ <i>2,985.00</i>		\$	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$		\$	
6) Contributions from Individuals (CRO-1210)		\$		\$	
7) Contributions from Political Party Committees (CRO-1220)		\$		\$	
8) Contributions from Other Political Committees (CRO-1230)		\$		\$	
9) Loan Proceeds (CRO-1410)		\$ <i>22,420.00</i>		\$ <i>33,192.38</i>	
10) Refunds/Reimbursements To the Committee (CRO-1240)		\$		\$	
11) Other Receipt Sources (CRO-1250)					
11a) Interest on Bank Accounts (CRO-1250)		\$		\$	
11b) Contributions from Not-for-Profit Organizations (CRO-1250)		\$		\$	
11c) Outside Sources of Income (CRO-1250)		\$		\$	
12) "Goods and Services" Contributions (CRO-1260)		\$		\$	
13) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)		\$ <i>22,420.00</i>		\$ <i>33,192.38</i>	
EXPENDITURES					
14) Disbursements (CRO-1310)					
14a) Operating Expenditures (CRO-1310)		\$ <i>24,899.44</i>		\$ <i>32,686.82</i>	
14b) Contributions to Candidates/Political Committees (CRO-1310)		\$		\$	
14c) Coordinated Party Expenditures (CRO-1310)		\$		\$	
15) Loan Repayments (CRO-1420)		\$		\$	
16) Refunds/Reimbursements From the Committee (CRO-1320)		\$		\$	
17) In-Kind Contributions (CRO-1510)		\$		\$	
18) TOTAL EXPENDITURES (Add lines 14a, 14b, 14c, 15, 16, and 17)		\$ <i>24,899.44</i>		\$ <i>32,686.82</i>	
19) Cash on Hand at End (Add lines 4 and 13 together, then subtract line 18)		\$ <i>505.56</i>		\$ <i>505.56</i>	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ <i>10,772.38</i>			
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)		\$			
25) Administrative Support (CRO-1710)		\$		\$	
26) Forgiven Loans (CRO-1440)		\$		\$	
27) 48-Hour Notice Reports Sum		\$		\$	

Disbursements

Amendment
Pg ____ of ____ ☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable) COMMITTEE TO RECALL WILKINSON COUNTY COMMISSIONER				2. ID Number 154491	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
DEE STEWART GROUP RALEIGH, NC				POLITICAL MAILING INFO.	
		c. Level Registered (Specify)		e. Election Cycle Sum to Date	
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 21,000.00	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1149	CHECK	MAILING	07012004	\$ 20,000.00	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
DEE STEWART GROUP RALEIGH, NC				POLITICAL MAILING INFO.	
		c. Level Registered (Specify)		e. Election Cycle Sum to Date	
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 23,000.00	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1149	CHECK	MAILING	07012004	\$ 2,000.00	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
WOODEN GRAPHICS DRAWER 819 WELCOME, NC					
		c. Level Registered (Specify)		e. Election Cycle Sum to Date	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 874.69	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1149	CHECK	SIGNS 22x28	07012004	\$ 874.69	
			07012004	\$	
5. Total only this Page				\$	
6. Total of ALL CRO-1310 Pages				\$	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					

Disbursements

Amendment Pg ____ of ____ ☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable) Committee to Elect Whitehead County Commissioner				2. ID Number 154491	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.) <input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) LOYD AARON 3098 HEALY DRIVE WINSTON-SALEM, NC 27103			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Cycle Sum to Date \$ 456.59
f. Account Code 1149	g. Form of Payment CHECK	h. Purpose PHOTOGRAPHY	i. Date (mm/dd/yyyy) 07/13/2004	j. Amount \$ 456.59	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) WINSTON-SALEM JOURNAL PO BOX 3159 WINSTON-SALEM, NC 27102			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Cycle Sum to Date \$ 1568.16
f. Account Code 1149	g. Form of Payment CHECK	h. Purpose NEWSPAPER ADV.	i. Date (mm/dd/yyyy) 07/13/2004	j. Amount \$ 1568.16	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) (1)			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Cycle Sum to Date \$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
5. Total only this Page				\$	
6. Total of ALL CRO-1310 Pages (This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)				\$	

CRO-1310

NC State Board of Elections

March 2003

(1) INVOICE IN TRANSIT FROM WHITEHEAD
OUTDOOR ADV. HOWEVER, NOT RECEIVED AT THE
TIME OF THIS REPORT - WILL APPEAR IN FOURTH QTR.
DO NOT - WHEN PAID.

Loan Proceeds

Pg ____ of ____ Amendment
☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable) COMMITTEE TO ELECT WHATEHEART COUNTY COMMISSIONER				2. ID Number 154491	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) William HEATH WHATEHEART POB 40 LEWISVILLE, NC 27023		b. Job Title/Profession BUSINESSMAN		d. Comments	
		c. Employer's Name/Specific Field SELF EMPLOYED		e. Start Date (mm/dd/yyyy) 07062004	
				f. End Date (mm/dd/yyyy) OPEN	
g. Rate %	h. Security Pledged	i. Account Code	j. Form of Payment	k. Amount \$22,420.00	
l. Full Name of Lending Institution				m. Loan Number	
4. Endorsers/Makers (The people who guarantee the loan.)					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
				d. Percentage %	
				e. Amount \$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
				d. Percentage %	
				e. Amount \$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
				d. Percentage %	
				e. Amount \$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
				d. Percentage %	
				e. Amount \$	
5. Total of ALL CRO-1410 Pages (This line must be on line 9 of Detailed Summary Page CRO-1100)				\$	

Loan Proceeds Statement

The individual making a loan to the committee must provide the following information. Failure to provide all of the information requested could be a violation of campaign reporting disclosure laws.

- Name of committee to receive loan:

COMMITTEE TO ELECT WHITEHEART COUNTY COMMISSIONER

- Person lending money to committee (Lender):

WILLIAM HEATH WHITEHEART

- Date of loan to committee: 7/6 - \$19900.⁰⁰, 7/13 - \$500.⁰⁰, 7/14 - \$2220.⁰⁰

- Name of lending institution and account number (source):

- Amount of loan: \$ 22,420.⁰⁰

- Names of all parties responsible for payment of loan (guarantors):

WILLIAM HEATH WHITEHEART

- Period of loan: OPEN TO CALL

- Rate of interest of loan: ZERO

- Security pledged for loan: NONE

I, _____, acknowledge that all of the information
(Person lending money to committee)
provided is complete, true, and accurate. I further understand I may not forgive a loan
that has an outstanding balance to any source.

WH Whiteheart
Signature of Lender

WH Whiteheart
Signature of Treasurer of Committee

This form must be submitted with the disclosure report for which the loan is initially disclosed.

Outstanding Loans

Pg ____ of ____ Amendment ☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable) COMMITTEE TO ELECT WHITEHEART COUNTY COMMISSIONER		2. ID Number 154491	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip) WILLIAM HEATH WHITEHEART POB 40 LEWISVILLE, NC 27023		b. Job Title/Profession BUSINESSMAN	
		d. Comments	
		c. Start Date (mm/dd/yyyy)	
		05012004	
		f. End Date (mm/dd/yyyy)	
		OPEN	
g. Rate		h. Security Pledged	
% 			
		i. Original Loan Amount	
		\$ 	
k. Full Name of Lending Institution		j. Remaining Loan Balance	
		\$10,572.38	
		l. Loan Number	
			
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	
		d. Comments	
		c. Start Date (mm/dd/yyyy)	
		f. End Date (mm/dd/yyyy)	
g. Rate		h. Security Pledged	
% 			
		i. Original Loan Amount	
		\$ 	
k. Full Name of Lending Institution		j. Remaining Loan Balance	
			
		l. Loan Number	
			
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	
		d. Comments	
		c. Start Date (mm/dd/yyyy)	
		f. End Date (mm/dd/yyyy)	
g. Rate		h. Security Pledged	
% 			
		i. Original Loan Amount	
		\$ 	
k. Full Name of Lending Institution		j. Remaining Loan Balance	
			
		l. Loan Number	
			
4. Total only this Page		\$ 	
5. Total of ALL CRO-1430 Pages (This line must be on line 21 of Detailed Summary Page CRO-1100)		\$ 	