

COPY

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	c. ID Number
Tackabery for School Board	138865
b. Mailing Address (Include City, State and Zip Code)	d. Date Filed
3109 Gladstonbury Rd. Winston-Salem, NC 27104	01/30/2006
	e. Phone Number
	336-768-2501

2. Report Year	3. Period Start Date (mm/dd/yyyy)	4. Period End Date (mm/dd/yyyy)	5. Treasurer Full Name
2005	07/01/2005	12/31/2005	Marianne D. Bach

6. Type of Committee (Check one)		8. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	Municipal	State/County	Referendum
<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> PAC	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Referendum		<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First Plus	<input type="checkbox"/> Final
<input type="checkbox"/> Soft Money Account		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third Plus	<input type="checkbox"/> Annual
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> NC Political Party Financing Fund		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	9. Special Report Name
<input type="checkbox"/> NC Public Campaign Financing Fund		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
<input type="checkbox"/> Other:		<input type="checkbox"/> Special	<input checked="" type="checkbox"/> Final	
			<input type="checkbox"/> Special	

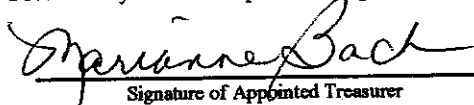
10. Account Information		10. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
Southern Community Bank			
b. Purpose	c. Code	b. Purpose	c. Code
Fundraising/Campaign Expenses	SCB		
	d. Period Begin Balance		d. Period Begin Balance
	\$ 353.58		\$

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.

Marianne D. Bach

Printed Name of Signer



Signature of Appointed Treasurer

01/30/2006

Date

FOR OFFICE USE ONLY

Date Received: 2-1-06

Employee: Judy Speas

Date Postmarked: 1-31-06

Employee: Judy Speas

Date Scanned:

Employee:

Delivery Method

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