

# 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

<b>a. Full Name</b> Motsinger For School Board	<b>c. ID Number</b> T4YN7K
<b>b. Mailing Address (include City, State and Zip Code)</b> 6068 Hedgerow Circle Clemmons, NC 27102	<b>d. Date Filed</b> 1/11/07
	<b>e. Phone Number</b> 778-1273

<b>2. Report Year</b> 2006	<b>3. Period Start Date (mm/dd/yyyy)</b> 10/22/06	<b>4. Period End Date (mm/dd/yyyy)</b> 12/31/06	<b>5. Treasurer Full Name</b> Kenneth R. Ostberg
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<b>6. Type of Committee (Check one)</b> <input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum	<b>8. Type of Report (check only one type of report from one category)</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 33%;">Municipal</th> <th style="width: 33%;">State/County</th> <th style="width: 33%;">Referendum</th> </tr> <tr> <td> <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               </td> <td> <input type="checkbox"/> Organizational  <input type="checkbox"/> Quarterly  <input type="checkbox"/> First Plus  <input type="checkbox"/> Second  <input type="checkbox"/> Third Plus  <input checked="" 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               </td> <td> <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               </td> </tr> </table>	Municipal	State/County	Referendum	<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	<input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First Plus <input type="checkbox"/> Second <input type="checkbox"/> Third Plus <input checked="" 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	<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
Municipal	State/County	Referendum					
<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	<input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First Plus <input type="checkbox"/> Second <input type="checkbox"/> Third Plus <input checked="" 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	<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					

**7. Type of Fund (if applicable, check one)**  
☐ Soft Money Account  
☐ "Booster Fund"  
☐ Building Fund  
☐ NC Political Party Financing Fund  
☐ Presidential Election Year Candidates Fund  
☐ NC Public Campaign Financing Fund  
☐ Other:

10. Account Information		10. Account Information	
<b>a. Financial Institution Full Name</b> Wachovia		<b>a. Financial Institution Full Name</b>	
<b>b. Purpose</b> School Board Election	<b>c. Code</b> WIN26	<b>b. Purpose</b>	<b>c. Code</b>
	<b>d. Period Begin Balance</b> \$3464.96		<b>d. Period Begin Balance</b> \$

### 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.

<u>Kenneth R. Ostberg</u> Printed Name of Signer	<u>[Signature]</u> Signature of Appointed Treasurer	<u>1/11/07</u> Date
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### FOR OFFICE USE ONLY

Date Received: <u>1-12-07</u>	Employee: <u>Judy Spears</u>	Delivery Method <input checked="" type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed
Date Postmarked: <u>1-11-07</u>	Employee: <u>Judy Spears</u>	
Date Scanned: <u>02/15/07</u>	Employee: _____	

CRO-1000

61:8 HJ 21 MAR 2007 NC State Board of Elections

March 2003

SERIALIZED  
 MAR 15 2007  
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# Detailed Summary

Amendment

☐ Yes

☒ No

1. Committee Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
Matsinger For School Bd.		4 <sup>th</sup> Qtr.		T4XN7K	
Start of Election Cycle: January 1, 2006		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 3464.96		\$	
<b>RECEIPTS</b>					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 225.00		\$ 5093.40	
6) Contributions from Individuals (CRO-1210)		\$		\$ 2975.00	
7) Contributions from Political Party Committees (CRO-1220)		\$		\$ 500.00	
8) Contributions from Other Political Committees (CRO-1230)		\$		\$ 590.00	
9) Loan Proceeds (CRO-1410)		\$		\$	
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)		\$ 225.00		\$ 9158.40	
<b>EXPENDITURES</b>					
14) Disbursements (CRO-1310)		\$		\$	
14a) Operating Expenditures 2249.01 (CRO-1310)		\$ 2248.98		\$ 7479.02 1479.05	
14b) Contributions to Candidates/Political Committees (CRO-1310)		\$ 350.00		\$ 350.00	
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)		\$		\$ 238.40	
18) TOTAL EXPENDITURES (Add lines 14a, 14b, 14c, 15, 16, and 17)		\$ 2599.01		\$ 8067.42 8067.45	
19) Cash on Hand at End (Add lines 4 and 13 together, then subtract line 18)		1090.95		\$ 1090.98 1090.95	
<b>ADDITIONAL INFORMATION</b>					
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)		\$		\$	
25) Administrative Support (CRO-1710)		\$		\$	
26) Forgiven Loans (CRO-1440)		\$		\$	
27) 48-Hour Notice Reports Sum		\$		\$	

Page 4 of 4☐ Yes      ☒ No

**CRO-1205**

# Disbursements

Pg 1 of 2 Amendment ☐ Yes ☒ No

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Motsinger For School Board				T4YN 7K	
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 checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Rainbow Print & Copy 4305 Enterprise Drive W-S, NC 27106					
		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:			
				\$ 771.47	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
WIN 26	check	Printing Flyers	12/27/2006	\$ 771.47	
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Election day payments to 10 Poll Workers.					
		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:			
				\$ 1000.00	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
WIN 26	cash	Poll Workers	11/7/2006	\$ 1000.00	
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Eliot Riska & Morgan W-S, NC					
		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:			
				\$ 178.86	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
WIN 26	check	Legal fees	12/10/06	\$ 178.86	
				\$	
5. Total only this Page				\$ 1950.33	
6. Total of ALL CRO-1310 Pages					
(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)				\$ 2248.98	
(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)				2249.01	
(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)					

# Disbursements

Amendment  
Pg 2 of 2 ☐ Yes ☒ No

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Malsinger For School Board				T4YN7K	
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)			b. Coordinated Committee Name		d. Comments
Postmark, Inc. W-S, NC					
			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
					\$ 298.68
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
WMX6	check	Mailing	12/10/06	\$ 298.68	
				\$	
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
			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	
				\$	
				\$	
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
			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				\$ 298.68	
6. Total of ALL CRO-1310 Pages					
(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)				\$ 2248.98	
(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)				2249.01	
(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

# Disbursements

Amendment  
Pg 1 of 1 ☐ Yes ☒ No

1. Committee Full Name (and Fund if applicable)			2. ID Number	
Motsinger For School Board			T4XN7R	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)				
<input type="checkbox"/> Operating Expenses <input checked="" type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures				
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments
Fourth County Democratic Women Spruce St - W-S, NC				
		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:		\$ 150.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount
WIN86	check	Political Action	12/12/06	\$ 150.00
				\$
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments
Dan Besse for City Council W-S, NC 27103 1136 Miller St.				
		c. Level Registered (Specify)		e. Election Cycle Sum to Date
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$ 200.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount
WIN86	check	Political Contribution	12/12/06	\$ 200.00
				\$
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
		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:		\$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount
				\$
				\$
5. Total only this Page				\$ 350.00
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)				\$ 350.00

**CAMPAIGN REPORT DISCREPANCIES  
REPLY REQUIRED**

TO:           Treasurer    Elisabeth Motsinger  
              Committee   Motsinger for School Board  
              Address      6068 Hedgerow Circle  
                              Clemmons, NC 27012

FROM:       Campaign Finance Office

REPORT IN QUESTION:  
Fourth Quarter Report

DATE:       01/18/2007

A recent preliminary audit of reports filed revealed the following discrepancies. Please supply this office with the missing or corrected information in order to complete the reports. A more detailed audit of the reports listed will be conducted after the following information is provided.

This is your first notice. You must respond within thirty days of receipt of this notice.

Failure to respond will result in noncompliance. In order to comply with the required information, the forms to amend are provided for completion. Amend only the forms required.

- ☐ The depository information was not listed on the Political Committee Disclosure Report.
- ☐ Addresses were either missing or incomplete. Contributions received without the contributor's complete name and mailing address that remain incomplete for forty-five (45) days are considered anonymous and must be paid over to the State Board of Elections for deposit to the general fund of the State. All disbursements must be listed by name and complete mailing address of the payee.
- ☐ Joint contributions, which are prohibited, were listed on the Report of Contributions. You must determine the individual amount of contribution for each contributor.
- ☐ Some or no dates were shown on the reports. A date is required for each entry.
- ☐ Details were not provided for the sums listed on the Detailed Summary Page
- ☐ Method of payment not provided
- ☐ Contributions over \$100 are listed with "cash" being the method of payment.
- ☐ Contributions over \$100 are listed as "aggregated individual contribution" (AIC).
- ☐ The ending balance is negative. The Committee cannot operate on a negative balance.

- ☐ Some of the occupation information was incomplete or incorrect on the Itemized Receipts page(s).

Name of contributor(s):


- ☐ A contribution from a business entity/non-registered committee was listed. The contribution must be paid to the Civil Penalty and Forfeiture Fund and reported as a disbursement on the next report.
- ☐ The purpose of expenditure was not listed on the Itemized Disbursements page.
- ☐ Disbursements for media expenses are paid with cash.
- ☒ Disbursements over \$50 that are not for postage are paid with cash.
- ☐ "Sum to date" information not provided.
- ☐ We are in receipt of a Final Report, but are unable to close the Committee because there is a remaining balance of \$\_\_\_\_\_.
- ☐ No matching "In Kind" entry. "InKind" contributions must be disclosed in the Itemized Receipts and Disbursements pages. You will also need to amend your "Detailed Summary Page" to reflect these changes.
- ☐ Contributions from the following contributors exceed the \$4,000 per election limit:

\_\_\_\_\_ on \_\_\_\_\_

\_\_\_\_\_ on \_\_\_\_\_

\_\_\_\_\_ on \_\_\_\_\_

\_\_\_\_\_ on \_\_\_\_\_

The contribution amount exceeding \$4,000 must be returned to the contributor, a copy of the refund check sent to this office, and the refund reported on the next scheduled report. If the contributor is the spouse, sibling, or parent of the candidate, please advise in writing.

- ☒ OTHER CRO-1000 - Treasurer has resigned; Motsinger must appoint replacement. CRO-1100 - small addition problem from 1310s. CRO-1210 - Smith and Dunn contribution missing per our conversation. CRO-1310 - Violation of NCGS 163-278.8 - Election day payments to 10 Poll workers of \$100 cash each to be referred to the Campaign Finance office of the SBOE. Fourth Quarter report arrived late on 1/12/2007. Amend with the CRO-1000, 1100 and other affected forms. Thank you.

Please send your reply to : Judy J. Speas Forsyth County Board of Elections, 201 N. Chestnut Street, Winston-Salem, NC 27101

If you have any questions please refer to the Campaign Finance section on the SBOE website, [www.sboe.state.nc.us](http://www.sboe.state.nc.us), or call (919)733-7173.

FOR THE CAMPAIGN FINANCE OFFICE:

ICR-001