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: Walter Marshall Campaign

b. Mailing Address (include City, State and Zip Code):
Harry James Jr.
1500 Reynard Dr.
Kernersville, N.C. 27284

c. ID Number: HTY945

d. Date Filed: 10-26-06

e. Phone Number: (336) 996-2218

2. Report Year: 2006

3. Period Start Date (mm/dd/yyyy): 6-30-06

4. Period End Date (mm/dd/yyyy): 10-30-06

5. Treasurer Full Name: Harry James Jr

6. Type of Committee *(Check one)*
- ☐ Candidate Campaign
- ☐ Joint Fundraiser
- ☐ Referendum
- ☐ Party
- ☐ PAC

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:

8. Type of Report *(check only one type of report from one category)*

Municipal
- ☐ Organizational
- ☐ Thirty-five day
- ☐ Pre-primary
- ☐ Pre-election
- ☐ Pre-runoff
- Semi-annual
  - ☐ Mid Year
  - ☐ Year End
- ☐ Final
- ☐ Special

State/County
- ☐ Organizational
- Quarterly
  - ☐ First Plus
  - ☐ Second
  - ☑ Third Plus
  - ☐ Fourth
- Semi-annual
  - ☐ Mid Year
  - ☐ Year End
- ☐ Final
- ☐ Special

Referendum
- ☐ Organizational
- ☐ Pre-referendum
- ☐ Final
- ☐ Supplemental Final
- ☐ Annual
- ☐ Special

9. Special Report Name:

10. Account Information

a. Financial Institution Full Name:
Mechanics and Farmers Bank
770 MLK Dr. Winston-Salem N.C.

b. Purpose: Use for Campaign purpose

c. Code: 809

d. Period Begin Balance: $

10. Account Information

a. Financial Institution Full Name:

b. Purpose:

c. Code:

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.

Harry James Jr
Printed Name of Signer

Harry James Jr
Signature of Appointed Treasurer

10-22-06
10-26-06
Date

FOR OFFICE USE ONLY

Date Received: 10-24-06
Employee: Judy Speas

Date Postmarked: none
Employee: Judy Speas

Date Scanned:
Employee:

Delivery Method
- ☑ Normal Mail
- ☐ Registered Mail
- ☐ Hand Delivered
- ☐ Electronically Filed

Detailed Summary

Amendment ☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable) Walter Marshall Campaign	2. Type of Report	2. ID Number HCX945

Start of Election Cycle: January 1, ______		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$ 0	$ 0
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	$ 50.00	$ 425.00
6) Contributions from Individuals	(CRO-1210)	$ 750.00	$ 4207.06
7) Contributions from Political Party Committees	(CRO-1220)	$	$
8) Contributions from Other Political Committees	(CRO-1230)	$	$
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)*		$ 800.00	$ 4632.06
EXPENDITURES			
14) Disbursements	(CRO-1310)		
14a) Operating Expenditures	(CRO-1310)	$ 435.00	$ 2969.65
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)	$	$ 287.06
17) In-Kind Contributions	(CRO-1510)	$	$ 287.06
18) TOTAL EXPENDITURES *(Add lines 14a, 14b, 14c, 15, 16, and 17)*		$ 435.00	$ 3543.77
19) Cash on Hand at End *(Add lines 4 and 13 together, then subtract line 18)*		$ 365.00	$ 1088.29
ADDITIONAL INFORMATION			
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		$	$

Aggregated Contributions from Individuals

Page ____ of ____

Amendment ☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable) Walter Marshall Campaign	2. ID Number HTY945

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove	809	check		9-15-06	$ 50.00
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$

4. Total only this Page	$
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$

Contributions from Individuals

Pg ____ of ____ Amendment ☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable) Walter Marshall Campaign

2. ID Number HTY945

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)

Timothy Samuels
2812 OAKhollow Rd.
Kernersville N.C. 27284

b. Job Title/Profession retired Police Capt.

c. Employer's Name/Specific Field

d. Comments

e. Election Cycle Sum to Date $ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	809	Check		9-25-06	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)

Tom Trollinger
3500 Parrish Rd.
W-S N.C. 27105

b. Job Title/Profession President of Contract office supply

c. Employer's Name/Specific Field

d. Comments

e. Election Cycle Sum to Date $ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	809	Check		10-18-06	$ 200.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)

Archie Kendall
3331 Cotton Grove Rd.
Lexington N.C

b. Job Title/Profession President of Plaza Ford

c. Employer's Name/Specific Field

d. Comments

e. Election Cycle Sum to Date $ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	809			10-6-06	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 400.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$

Contributions from Other Political Committees

Pg ____ of ____

Amendment ☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)
Walter Marshall Campaign

2. ID Number
HTY945

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)

Piedmont Conservative Voters
1416 Brookstown Ave
W-S N.C. 27101

b. Type of Committee
☐ Candidate ☐ PAC
☐ Referendum

c. Level Registered (Specify)
☐ Federal ☐ County:
☐ State ☐ Municipality:

d. Comments

e. Election Cycle Sum to Date
$ 100^00

f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
809	Check		10-17-06	$ 100^00
				$
				$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)

Drive Committee
25 Louisiana Ave NW
Washington O.C. 20001-2198

b. Type of Committee
☐ Candidate ☐ PAC
☐ Referendum

c. Level Registered (Specify)
☐ Federal ☐ County:
☐ State ☐ Municipality:

d. Comments

e. Election Cycle Sum to Date
$ 250^00

f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
809	Check		10-13-06	$ 250^00
				$
				$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)

b. Type of Committee
☐ Candidate ☐ PAC
☐ Referendum

c. Level Registered (Specify)
☐ Federal ☐ County:
☐ State ☐ Municipality:

d. Comments

e. Election Cycle Sum to Date
$

f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
				$
				$
				$

4. Total only this Page	$ 350^00
5. Total of ALL CRO-1230 Pages *(This line must be on line 8 of Detailed Summary Page CRO-1100)*	$

Disbursements

Pg ____ of ____

Amendment ☐ Yes ☐

1. Committee Full Name (and Fund if applicable)
Walter Marshall Campaign

2. ID Number
HTY945

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*
☐ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
Tony Couch
109 Walkertown Ave
W-S N.C. 27105

b. Coordinated Committee Name

c. Level Registered (Specify)
☐ Federal ☐ County:
☐ State ☐ Municipality:

d. Comments

e. Election Cycle Sum to D
$ 285 00

f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount
809	Check	Catering Food for campaign workers	9-19-06	$ 285 00
				$

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
Kuandela WSSU
106 Martin Lutherking Dr
W-S N.C. 27110

b. Coordinated Committee Name

c. Level Registered (Specify)
☐ Federal ☐ County:
☐ State ☐ Municipality:

d. Comments

e. Election Cycle Sum to Dat
$ 150 00

f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount
809	Check	Political Advertiement	7-25-06	$ 150 00
				$

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)

b. Coordinated Committee Name

c. Level Registered (Specify)
☐ Federal ☐ County:
☐ State ☐ Municipality:

d. Comments

e. Election Cycle Sum to Date
$

f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount
809				$
				$

5. Total only this Page $ 435.00

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)