

Disclosure Report Cover

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.
Do not use this form to update information

COPY

Amendment

☐ Yes

☒ No

1. Committee Information	
a. Full Name <u>NANCY YOUNG FOR COUNTY COMMISSIONER</u>	c. ID Number <u>3CQXF2</u>
b. Mailing Address (include City, State and Zip Code) <u>608 BRAEWYCK LANE WINSTON-SALEM, NC 27104</u>	d. Date Filed <u>2/25/08</u>
	e. Phone Number <u>336-760-6936</u>

2. Report Year <u>2008</u>	3. Period Start Date (mm/dd/yy) <u>2/14/08</u>	4. Period End Date (mm/dd/yy) <u>2/25/08</u>	5. Treasurer Full Name <u>MARIAN K. O'NEAL</u>
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6. Type of Committee (Check One)		7. Type of Report (check only one type of report from one category)	
☒ Candidate Campaign ☐ Joint Fundraiser ☐ Referendum ☐ Party ☐ PAC ☐ Legal Expense Fund	8. Number of Fundraisers this Report <u>0</u>	Municipal ☐ Organizational ☐ Thirty-five day ☐ Pre-primary ☐ Pre-election ☐ Pre-runoff ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special	State/County ☒ Organizational ☐ Quarterly ☐ First ☐ Second ☐ Third ☐ Fourth ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special

11. Account Information		12. Account Information	
a. Financial Institution Full Name <u>WACHOVIA BANK</u>	b. Purpose <u>FOR ALL CAMPAIGN EXPENSES</u>	a. Financial Institution Full Name <u>WACHOVIA BANK</u>	b. Purpose <u>FOR ALL CAMPAIGN EXPENSES</u>
c. Account Code <u>1</u>	d. Period Begin Balance <u>\$ 0</u>	c. Account Code <u>1</u>	d. Period Begin Balance <u>\$ 0</u>

CERTIFICATION

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Chapter 163 if the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections according to N.C.G.S. 163-278.7(f).

MARIAN K. O'NEAL Marian K. O'Neal 2/25/08
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: <u>2-25-08</u>	Employee: <u>Judy Spear</u>	Delivery Method ☐ Normal Mail ☐ Registered Mail ☒ Hand Delivered ☐ Electronically Filed ☐ Signer has not received mandatory training
Date Postmarked: _____	Employee: _____	
Date Scanned: _____	Employee: _____	
Date Data Entered: _____	Employee: _____	

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

Detailed Summary

Amendment

☐ Yes ☒ No

Use this form to summarize all disclosure reporting forms and to total monetary information.

1. Committee Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
NANCY YOUNG FOR COUNTY COMMISSIONER		ORGANIZATIONAL		3C9XF21	
Start of Election Cycle: January 1, 2008		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ -0-		\$ -0-	
5) Aggregated Contributions from Individuals (CRO-1205)		\$		\$	
6) Contributions from Individuals (CRO-1210)		\$ 2,100		\$ 2,100	
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					
11a) Interest on Bank Accounts (CRO-1250)		\$		\$	
11b) Contributions from Not-for-Profit Organizations (CRO-1250)		\$		\$	
11c) Outside Sources of Income (CRO-1250)		\$		\$	
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c and 11d)		\$ 2,100		\$ 2,100	
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$		\$	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$		\$	
13c) Coordinated Party Expenditures (CRO-1310)		\$		\$	
14) Aggregated Non-Media Expenditures (CRO-1315)		\$		\$	
15) Loan Repayments (CRO-1420)		\$		\$	
16) Refunds/Reimbursements From the Committee (CRO-1320)		\$		\$	
17) In-Kind Contributions (CRO-1510)		\$		\$	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ -0-		\$ -0-	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 2,100		\$ 2,100	
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 (CRO-2200)		\$		\$	
27) Contributions to be refunded (CRO-1215)		\$		\$	

Contributions from Individuals

Pg 1 of 1 Amendment ☐ Yes ☒ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if Applicable)					2. ID Number	
NANCY YOUNG FOR COUNTY COMMISSIONER					3CBXF2	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
LARRY ROTH PO BOX 398 GERMANTON, NC 27019			RETIRED			
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$ 100	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	1	CHECK		2/15/08	\$ 100	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
NANCY YOUNG 2061 POLO ROAD WINSTON-SALEM, NC 27106			CONSULTANT			
			c. Employer's Name/Specific Field			
			N YOUNG COMMUNICATIONS 2061 POLO ROAD WINSTON-SALEM NC 27106		e. Election Sum to Date	
					\$ 2,000	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	1	CHECK		2/25/08	\$ 2,000	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐					\$	
☐					\$	
☐					\$	
4. Total only this Page					\$ 2,100	
5. Total of ALL CRO-1210 Pages					\$ 2,100	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						