

Disclosure Report Cover

Amendment Yes

No

 \boxtimes

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

The second s	to update information	FORS		1		
1. Committee Infor	mation	but the				
a. Full Name		ann telt	-0 14 0-1	7	c. ID Number	
Nancy Young for C	County Commissioner	ZUUY JAM	-9 80 3.4	1	3CQXF2	
b. Mailing Address (inc	d. Date Filed					
608 Braewyck Lane Winston-Salem, NC	1/06/09					
, , , , , , , , , , , , , , , , , , , ,					e. Phone Number	
					336-760-6936	
2. Report Year	3. Period Start Date (mm/c	dd/yy) 4. Period		5. Treasurer Fu	ull Name	
2008	10/19/08	(mm/dd/yy) 12	/31/08	Marian K. O'Ne	eal	
6. Type of Commit	tee (Check One)	0 Tune of Denom	(abaak an	hi ana tina africa	aut from one autocom)	
Candidate		9. Type of Report			ort from one category)	
Campaign	Party Party	Municipal	State/C	ounty	Referendum	
Joint Fundraiser	PAC	Organizationa		Organizational	Organizational	
Referendum	Legal Expense Fund	Thirty-five da	y _ (Quarterly	Pre-referendum	
7. Type of Fund	(if applicable, check one)	Pre-primary		First	Final	
Booster Fund"		Pre-election		Second	Supplemental Final	
Building Fund	in Ver Contine root	Pre-runoff		Third	Annual	
	ion Year Candidates Fund aign Financing Fund	Semi-annual Mid Yea		Fourth	Special	
Other:	aigh rinaicing rund	Year End		Semi-annual Mid Year	10 Constal Depart Name	
		Final	· -	Year End	10. Special Report Name	
8. Number of Fund	raisars this Dapart			Final		
o. Number of Fund	Taisers this Report	Special				
	0			Special		
11. Account Inform			11. Account I			
a. Financial Institution H	Full Name		a. Financial Insti	itution Full Name		
Wachovia Bank						
b. Purpose	c. Account Code		b. Purpose		c. Account Code	
For all campaign	1					
expenses	d. Period Begin Balance				d. Period Begin Balance	
1						
	\$ 7,992.83				\$	
CERTIFICATION					1	
NC General Statutes	and that no funds are comm prect and that I have been tr	ingled with prohibit ained by the NC Sta	ed or other non-	disclosed funds. I	B, & 22D-22M of Chapter 163 if the further certify that this report is o N.C.G.S. 163-278.7(f). $\frac{1/b}{Date}$	
FOR OFFICE USE		31	gnature of Appointe		Daic	
Date Received:	1-9-09	Employee:	Judy	peas	Delivery Method Normal Mail	
Date Postmarked	:	Employee:			Registered Mail Hand Delivered	
Date Scanned:		Employee:	Signer has not received			
Date Data Entere	d:	Employee:			mandatory training	

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

Amendment \boxtimes Yes

No

1. Committee Full Name (and Fund if applicable)	ort 3. ID Number			
Nancy Young for County Commissioner	Fourth Quarterly		3CQXF2	
Start of Election Cycle: January 1,	2008	Total th Reporting I		
4) Cash on Hand at Start		\$ 7,992.83	\$ 0	
RECEIPTS				
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 25.00	\$ 40.00	
6) Contributions from Individuals	(CRO-1210)	\$ 950.00	\$ 13,662.50	
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$ 1,093.00	
8) Contributions from Other Political Committees	(CRO-1230)	\$ 2,000.00	\$ 2,000.00	
9) Loan Proceeds	(CRO-1410)	\$	\$	
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$	\$ 25.78	
11) Other Receipt Sources				
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$	
11b) Contributions from Not-for-Profit Organizati	ions <i>(CRO-1250)</i>	\$	\$	
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, 11	lc and 11d)	\$ 2,975.00	\$ 16,821.28	
EXPENDITURES				
13) Disbursements				
13a) Operating Expenditures	(CRO-1310)	\$ 4,187.64	\$ 8,963.59	
13b) Contributions to Candidates/Political Commit	ttees (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)	\$ 150.00	\$ 1,227.50	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1	5, 16 and 17)	\$ 4,337.64	\$ 10,191.09	
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18)	\$ 6,630.19	\$ 6,630.19	
ADDITIONAL INFORMATION				
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$		
21) Outstanding Loans (incl. ones from other campaign	ns) <i>(CRO-1430)</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	(CRO-2200)	\$ 2,000.00	\$ 2,000.00	
27) Contributions to be refunded	(CRO-1215)	\$	\$	

Aggregated Contributions from Individuals

Page <u>1</u>

Amendment <u>1</u> Yes

of

lment Yes 🔀 No

Optional form used to report NC Contributions From Individuals of \$50 or less

	mmittee Full N	2. I	2. ID Number			
Nano	cy Young for Co		3CQXF2			
3. Co	ntributor Info					
a. Am		b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
	Add	1	Check		10/20/2008	\$ 25
	Remove				10/20/2000	
<u> </u>	Add					\$
	Remove					
<u> </u>	Add					\$
<u>H</u>	Remove					
<u>H</u>	Add					\$
<u>H</u>	Remove Add					
H-	Remove	-				\$
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. Tot	tal only this	Page	I	I	\$	25.00
. Tot	al of ALL C	RO-1205 P	ages			
			nmary Page CRO-1100)		\$	25.00

Contributions from Individuals

Pg 1 Amendment Yes 🖂

No

of 3 Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Com	mittee Full Name	e (and Fund if applica	able)					2. ID Nu	nber	an energy and the
Nancy Y	Young for County	Commissioner							3CQXF2	
3. Cont	ributor Informat	tion	\boxtimes	Add		Remo	ve			
and the state of the second	ame, Mailing Address				Title/Prof		,,,,	d. Comments		
	e city, state, & zip)			Retire		031011		u. commen	13	
0.5	cKinnon				u					
	irginia Road			c Empl	over's Na	me/Spec	ific Field	-		
	n-Salem, NC 2710	04		c. Empr	ojel s la	me/oper		-		
in motor	i buloli, 100 2710							e Election	Sum to Date	
								\$	250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Descr	iption		j. Date (mm/dd/yy	yyy)	k. Amount	
	1	Check					10/20/2	008	\$	250
									\$	
									\$	
3. Contr	ributor Informati	ion		Add		Remo	ve			
a. Full Na	me, Mailing Address	& Phone		b. Job T	itle/Profe	ssion		d. Commen	ts	
(include	e city, state, & zip)									
Patricia	Shore Clark			Retired	b					
301 Settl	ler's Run Drive			c. Employer's Name/Specific Field			1			
Winston	-Salem, NC 2710	1						1		
								e. Election S	Sum to Date	
								\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-H	kind Descri	ption		j. Date (mm/dd/yy		k. Amount	
	1	Check					10/23/2		\$ 100.00	
									\$	
									\$	
3. Contri	ibutor Informati	00		Add		Remo	Ve			
	ne, Mailing Address			b. Job Ti	tle/Profes	She she she	vc	d. Comment	·e	
	city, state, & zip)			0.000 11	inc/11010.	551011		u. comment	.3	
Pandora (Career	Counse	lor				
	eorge Place			c. Emplo			fic Field			
	Run, NC 27006				ployed	-				
					1 5			e. Election S	um to Date	
								\$	50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Descri	ption		j. Date (mm/dd/yy	yy)	k. Amount	
	1	Check					10/25/20	008	\$	50.00
									\$	
									\$	
4. Total	only this Page	B						\$		400.00
	of ALL CRO		1. 					\$		950.00
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Contributions from Individuals

2	

Amendment Yes 🖂

No

Contributions from Individuals	Pg	2	of	3_		Yes
Use this form to report individual contributions over \$50 or contribu	utions under S	\$50 if fo	rm CRO	1205 is no	ot used	

1. Committee Full Name (and Fund if applicable)							2. ID Number			
Nancy Y	Young for County	Commissioner							3CQXF2	
3. Cont	ributor Informati	ion	\boxtimes	Add		Ren	nove	Colore Davis		Sec. 4
a. Full Na	me, Mailing Address	& Phone		b. Job Title/Profession			d. Comments			
	e city, state, & zip)			Director of Employee/						
Nigel D.					nunity					
	oks Landing Drive						ecific Field			
Winston	-Salem, NC 2710	6		GMAC	Insura	ance				
								e. Election	Sum to Date	
								\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-k	-Kind Description j. Date (mm/dd/yg		yy)	k. Amount			
	1	Check					10/28/2	008	\$	100.00
									\$	
									\$	
3. Contr	ibutor Informatio	on	\square	Add		Rem	nove			
	me, Mailing Address	& Phone		b. Job Tit	tle/Profe	ession		d. Commen	ts	
	city, state, & zip)									
Martha S				Real Es				-		
PO Box 11553				c. Employer's Name/Specific Field			-			
winston-	-Salem, NC 27110	6		Self Employed			Floot on C	Course to Data		
								e. Election Sum to Date		
								\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Descrip	otion		j. Date (mm/dd/yy	yy)	k. Amount	
	1	Check					10/28/20	008	\$	100.00
									\$	
									\$	
POINT OF CREAT STREET	ibutor Informatio		\boxtimes	Add		Rem	ove			
	ne, Mailing Address &	& Phone		b. Job Tit	le/Profe	ssion		d. Comment	ts	
and the second se	city, state, & zip)			1						
Emily H.	iberlake Ln			Author c. Employ	anla Na		sifie Field			
	Salem, NC 27106			Self em		-	cific Field			
w inston-	Salein, 14C 27100	, ,		Sen en	pioyeu	ť		e. Election S	Sum to Date	
								\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Ki	ind Descrip	tion		j. Date (mm/dd/yyy	yy)	k. Amount	
	1	Check					10/28/20	008	\$	100.00
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	only this Page						- Antipication	\$		300.00
	of ALL CRO- must be on line 6 of L	-1210 Pages Detailed Summary Page Cl	R <i>O-1100)</i>					\$		950.00

Contributions from Individuals

3 of

Amendment Yes 🖂

No

Contributions from Individuals	Pg	3	of	3		
Use this form to report individual contributions over \$50 or contribution	s under	\$50 if form	n CRO	1205 is no	t used	

1. Committee Full Name (and Fund if applicable)							2. ID Number			
Nancy Y	Young for County	Commissioner					3CQXF2			
3. Cont	ributor Informa	tion		Add 🗌 F	Remove	e gestere.		CALE-SP		
	ame, Mailing Addres	s & Phone		b. Job Title/Professi	on	d. Comments				
	le city, state, & zip)									
Barry B				Partner						
	oor Road n-Salem, NC 271	0.4		c. Employer's Name						
w mstor	I-Salelli, NC 271	04		Piazza Investmen	nt Holdings	a Flastion	Sum to Date			
							Sum to Date			
						\$	50.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/	уууу)	k. Amount			
	1	Check			10/29/	/2008	\$	50.00		
							\$			
							\$			
3. Contr	ributor Informat	ion		Add 🗌 R	emove					
	me, Mailing Address	& Phone		b. Job Title/Professio	n	d. Comme	nts			
	e city, state, & zip)									
	W. Parmon			N. C. State Repre	a second s					
	rkwood Drive	Æ		c. Employer's Name/	Specific Field					
w inston	-Salem, NC 2710	15		1		FR	0 . D .			
						e. Election	Sum to Date			
						\$	50.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Kind Description	j. Date (mm/dd/y	уууу)	k. Amount			
	1	Check			11/1/2	2008	\$	50.00		
							\$			
							\$			
3. Contr	ibutor Informati	on	\boxtimes	Add 🗌 R	emove		and the second	Sec. Sec.		
	ne, Mailing Address	& Phone		b. Job Title/Professio	n	d. Commer	ıts	-		
	city, state, & zip)			100-r 1-73-r						
Betty Jon				Realtor		_				
	key Hill Court Salem, NC 2710	c		c. Employer's Name/S	Specific Field	_				
w mston-	Salein, NC 2710	0		Self Employed		e Election	Sum to Date			
						s	150.00			
. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/y		k. Amount			
				eshments	10/19/2		\$	150.00		
			for o	open hous			\$	-		
							\$			
. Total	only this Page	B				\$	1	250.00		
	of ALL CRO					\$		950.00		
(1 nis une	must be on une 6 of	Detailed Summary Page Cl	KO-1100)							

Contributions from Other Political Committees

Pg <u>1</u> of

Amendment Ves

No

1

Use this form to report contributions from other candidate, referendum or PAC committees

1. Committee H	2. ID Number						
Nancy Young I	for County Commissioner					3CQXF	2
3. Contributor	the base of the solution of the second se	\boxtimes	Add 🗌	Remove	and see		
	ing Address & Phone		b. Type of Committee		d. Comm	nents	
(include city, sta			Candidate	PAC PAC			
NC Association			Referendum		_		
PAC for Educat	tion		c. Level Registered (Sp		-		
NCAE Center			Federal	County:			
PO Box 25788			State State	Municipality:	e. Electio	on Sum to D	ate
Raleigh, NC 27	/611				\$	2,000.00	
f. Account Code	g. Form of Payment	h. In-K	ind Description	Description i. Date (mm/dd/yyyy)		j. Amount	
1	Check			10/31/2008	3	\$ 2,0	00.00
						\$	
						\$	
3. Contributor	Information		Add 🗌	Remove			
. Full Name, Maili	ng Address & Phone		b. Type of Committee		d. Comm	ients	
(include city, stat	e, & zip)		Candidate	PAC PAC			
			Referendum				
			c. Level Registered (Spe	ecify)	1		
			Federal	County:	1		
			State	Municipality:	e. Electio	on Sum to Da	ate
					\$		
Account Code	g. Form of Payment	h. In-Ki	nd Description	i. Date (mm/dd/yyyy)	j. Amount	
						\$	
						\$	
						\$	•
. Contributor I			Add	Remove			
	g Address & Phone		b. Type of Committee		d. Comm	ents	
(include city, state	, & zip)		Candidate	PAC			
			Referendum				
			c. Level Registered (Spe				
			Federal	County:			
			State	Municipality:		n Sum to Da	ite
Account Code	g. Form of Payment	h In Kir	d Description	i. Date (mm/dd/yyyy)	\$		
	gi torm of tuyinent			i. Date (iniii/dd/yyyy)		j. Amount \$	
						\$	
						\$	
Total only this	Page			Contraction of the second	\$ 2	2,000.00	
Total of ALL (CRO-1230 Pages				\$ 2	2,000.00	

Disbursements

Pg <u>1</u> of <u>3</u>

Amendment

No

 \boxtimes

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee I	Full Name (and Fur	d if applicable)	and the second second second		2. ID Number
Nancy Young t	for County Commiss	ioner			3CQFX2
3. Type of Dish	ursement (Ple	ase use separate (CRO-1310 forms for each t	type of Disbursem	ent.)
Operating I	Expenses		ndidates/Political Committees		ordinated Party Expenditures
4. Payee Inform			Add	Remove	
	ing Address & Phone		b. Coordinated Committee N		d. Comments
(include city, state,					
done By MUN					
2687 Amesbury			c. Level Registered (Specify)		-
Winston-Salem			Federal X	County:	-
in motori Suiteri	,		State	Municipality:	e. Election Sum to Date
				Wanterparty.	c. Diccion Sum to Date
					\$ 430.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
			i. Date (init/du/yyyy)	J. Amount	Early polling
1	Check	0	10/20/2008	\$350.00	staff
					Election day
1	Check	0	11/11/2008	\$80.00	-
4. Payee Inform	ation		Add	Remove	polling staff
	ng Address & Phone		b. Coordinated Committee N		d. Comments
	0		D. Coordinated Committee N	аше	d. Comments
(include city, state, USPS	& zip)				
	~		T ID IN NO. 10		-
Walkertown, No	0		c. Level Registered (Specify)	~	-
			Federal X	County:	
			State	Municipality:	e. Election Sum to Date
					\$ 94.20
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
			and all courses and served a ferr		Stamps
1	Debit Card	I	10/20/2008	\$27.00	Sumps
				\$	
4. Payee Inform	ation		Add 🗌	Remove	
a. Full Name, Mailin	ng Address & Phone		b. Coordinated Committee Na		d. Comments
(include city, state, a					
The Chronicle					
617 N. Liberty S	treet		c. Level Registered (Specify)		
Winston-Salem,			Federal X	County:	
,			State	Municipality:	e. Election Sum to Date
					\$ 388.80
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1					Newspaper ads
1	Check	Α	10/20/2008	\$388.80	on $10/23$ and
					10/30
				\$	10/00
5. Total only this	Page			Maria Containe	\$ 845.80
	CRO-1310 Pages			en ann an an an an	
	ine 13a of Detailed Sum	mary Page CRO-1100	if Operating Expenses)		0
	ine 13b of Detailed Sum	al Comm)	\$ 4,187.64		
			if Coordinated Party Expenditur		
	s (List detailed exp				
A* - Media	B* - Printing	C* - Fund		D - To Anoth	er Candidate
E - Salaries	F* - Equipment		0		g Public Office Expenses
- Postage	J - Penalties		ce Expenses	O* - Other	, - and onle Expenses
	datailad avalanatic			o other	the sub-free state of the second state of the

Disbursements

Pg <u>2</u> of <u>3</u>

Amendment Yes

No

 \boxtimes

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee I	Full Name (and Fun	d if applicable)	Ball Black Start Starting		2. ID Number			
Nancy Young for County Commissioner 3CQFX2								
3. Type of Dish	ursement (Plea	ise use separate C	RO-1310 forms for each t	vpe of Disbursem	ent.)			
Operating I			ndidates/Political Committees		ordinated Party Expenditures			
4. Payee Inform		\boxtimes	Add	Remove				
	ing Address & Phone	K_3	b. Coordinated Committee N		d. Comments			
(include city, state,			D. Coor dinated Committee 14	ame				
Winston-Salem			1					
Contorney reported to the two			c. Level Registered (Specify)		-			
418 N Marshall Street Winston-Salem, NC 27101				0	-			
w mston-salem	, NC 27101		Federal State	County:				
			State	Municipality:	e. Election Sum to Date			
					\$ 1,215.00			
	1				2			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks			
1	Check	А	10/29/2008	\$1,215.00 Newspaper ads				
8				\$1,210.00	11/1-11/4			
				\$				
				Ψ				
4. Payee Inform	nation		Add	Remove				
a. Full Name, Maili	ing Address & Phone		b. Coordinated Committee Na	ате	d. Comments			
(include city, state,	& zip)							
Clemmons Cou	rier							
PO Box 765			c. Level Registered (Specify)					
Clemmons, NC 27012			Federal X	County:				
			State	Municipality:	e. Election Sum to Date			
					\$ 162.00			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks			
1	Chaole		10/00/0000	¢1(0.00	Newspaper ads			
1	Check	Α	10/20/2008	\$162.00				
				¢				
				\$				
4. Payee Inform	ation		Add 🗌	Remove				
and a second	ng Address & Phone		b. Coordinated Committee Na		d. Comments			
(include city, state,	-							
Kernersville Nev								
PO Box 337		-	c. Level Registered (Specify)					
Kernersville, NC	27285	-	Federal S	County:				
rtemens mie, me	27203		State	Municipality:	e. Election Sum to Date			
		-		Wuncipanty.	e. Election Sum to Date			
					\$ 939.84			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	: Amount	k Dequired Demonto			
I. Account Code	g. Form of rayment	In rulpose code	i. Date (mm/uu/yyyy)	j. Amount	k. Required Remarks			
1	Check	Α	10/20/2008	\$939.84	Newspaper ads			
				\$				
6 m-4-1 - 1 - 0 -	D			Sector and sectors	0.001/01			
5. Total only this		Martin Martin			\$ 2,316.84			
	CRO-1310 Pages							
	ine 13a of Detailed Sum	\$ 4,187.64						
	ine 13b of Detailed Sum	(A.1997) (A.1997)						
			if Coordinated Party Expenditur	res)				
	s (List detailed exp							
A* - Media	B* - Printing	C* - Func G - Politic	0	D - To Anoth	Construction of the Strengthener and Streng			
E - Salaries	F* - Equipment	H* - Holding	g Public Office Expenses					
I - Postage J - Penalties K* - Office Expenses O* - Other								
* Codes require	datailad avalanatio	n in roanirad ran	marke field (17)		약 1월 1일 - 19 · 19 · 19 · 19 · 19 · 19 · 19 · 19			

Disbursements

of <u>3</u> 3

Amendment Yes

No

 \boxtimes

Pg Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures

	Full Name (and Fu				2. ID Number
	for County Commiss				3CQFX2
3. Type of Dis			CRO-1310 forms for each		
Operating			ndidates/Political Committees		pordinated Party Expenditures
4. Payee Infor		\square	Add 🗌	Remove	
a. Full Name, Mai	iling Address & Phone		b. Coordinated Committee N	lame	d. Comments
(include city, state					
Concerned Bla					
	arlton Eversley		c. Level Registered (Specify)		
Dellabrook Pre	esbyterian Church		Federal 🛛	County:	
115 Dellabrook Road			State	Municipality:	e. Election Sum to Date
Winston-Salen	n, NC 27105				\$ 100.00
		1			\$ 100.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	В	10/26/2008	\$100.00	Print handout
				\$	
4. Payee Inform		\square	Add	Remove	
	ing Address & Phone		b. Coordinated Committee N	ame	d. Comments
(include city, state,			-		
City of Winston	n-Salem				
Attn: Invoices			c. Level Registered (Specify)		
PO Box 2756			Federal 🛛	County:	
Winston-Salem	, NC 27102		State	Municipality:	e. Election Sum to Date
					\$ 50.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	J	11/01/2008	\$50.00	Signage Penalty
				\$	
		N			
4. Payee Inform		\square	Add	Remove	
	ng Address & Phone		b. Coordinated Committee Na	ame	d. Comments
(include city, state,	& zip)				
Terry Young					-
99 Bella Vista I			c. Level Registered (Specify)		-
Galax, VA 243	33		Federal X	County:	
			State	Municipality:	e. Election Sum to Date
					\$ 875.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	0	11/05/2008	\$875.00	Putting up sign Poll work
				\$	
5. Total only thi	s Page				\$ 1,025.00
	CRO-1310 Pages				Ψ 1,025.00
	line 13a of Detailed Sum				
(This line goes in l	line 13b of Detailed Sum	\$ 4,187.64			
			if Coordinated Party Expenditus	res)	
A* - Media	s (List detailed exp B* - Printing		and the second se	D T- 4- 4	han Can didata
E - Salaries	F* - Equipmen	C* - Fund t G - Politic			her Candidate
L - Doctage	I - Denalties		cal Fally	H* - Holdin O* - Other	g Public Office Expenses

In-Kind Contributions

1 of Amendment Yes

No

 \boxtimes Pg 1 Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund. Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)	3			2. 11) Number	
Nancy Young for County Commissioner					3CQXF2	
3. Contributor Information Add		Remove		L.		
a. Full Name, Mailing Address & Phone		and the second	Contributor	c. Comments		
(include city, state, & zip) Betty Jones 3121 Turkey Hill Court Winston-Salem, NC 27106		Car Car Par PAr Ref		d. Ele \$	d. Election Sum to Date \$ 150.00	
e. Description			f. Date (mm/dd/yy	yy)	g. Fair Market Amount	
Refreshments for open house			10/19/2008		\$ 150.00	
					\$	
3. Contributor Information Add		Demonstra			\$	
a. Full Name, Mailing Address & Phone		Remove b. Type of C	Contributor	- Cou	nments	
		Part PAC	 Candidate Party PAC Referendum Other Receipt Source 		d. Election Sum to Date	
e. Description			f. Date (mm/dd/yyy	yy) g. Fair Market Amount		
					\$	
					\$	
					\$	
3. Contributor Information Add		Remove		11.55		
a. Full Name, Mailing Address & Phone (include city, state, & zip)		Canc Canc Party AC Refe	idual lidate		nments ction Sum to Date	
e. Description			f. Date (mm/dd/yyy	y)	g. Fair Market Amount	
					\$	
					\$	
					\$	
. Total only this Page 5. Total of ALL CRO-1510 Pages				\$	150.00	
(This line must be on line 17 of Detailed Summary Page CRO-1100)				\$	150.00	