,

ł	Ame	ndment
		ndment Yes

 $\boxtimes$ No

**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 undate information

1. Committee Information c. ID Number											
a. Full Name											
Committee to Elect Donald Dunn											
b. Mailing Address (iaclude City, State and Zip Code)											
	8580 Brook Meadow Ct.										
Lewisville NC 27023											
e. Phone Number											
336 945-0115											
2. Report Year	3. Per	iod Start Date (mm/d	d/yy) 4. Period End Date 5. Treasurer Fu					I Name			
2010	3/4/.	-3/8/2010	20)		/2010		Donald Dunn	Junn			
······································		$\frac{6}{0}$	・ <u>てアン</u> 9 Tw	pe of Report	(c)	heck of	nly one type of report	t from one category)			
6. Type of Commit		Party	Munici				County	Referendum			
	ացու [ Γ	Referendum		Organizational			Organizational	Organizational			
PAC Independent	<u>د</u> ۲			Thirty-five day	1	_	Quarterly	Pre-referendum			
Expenditure	L	Joint Fundraiser		THE CALL OF THE DAY			~~~~····				
Legal Expense F				n			First	Final			
7. Type of Fund	(if app	licable, check one)	님	Pre-primary			First	Supplemental Final			
"Booster Fund"			[님	Pre-election		님	Third	Annual			
Building Fund				Pre-runoff Semi-annual		H	Fourth	Special			
				Semi-annuar Mid Year		المسما	Semi-annual				
				Year End	1		Mid Year	10. Special Report Name			
Other:			Final								
O Marshan of Dans	Iraiaara	this Report		Special	Final						
8. Number of Fund	maisers	uns reput	╡└┉╴	~F			Special				
	4				11 4		-	<u> </u>			
11. Account Inform							Information stitution Full Name	······································			
a. Financial Institution		18			a. rmai	ICEAL URS		2			
First Citizens Bank	: 			<u>.</u>	h D	086	<u> </u>	c. Accomt Code			
b. Purpose		c. Account Code			b. Purpose						
Campaign for School Board	•	Bu	IS								
	ļ	d. Period Begin Balanc	e					d. Period Begin dalance			
		\$ 50.00						\$ <u></u>			
CERTIFICATION	1 T	<u> </u>						C S			
		or Fund is in compl	iance w	ith all applica	ble pro	visions	s of Article 22A, 22E	3, & 22D-22M of Chapter 163 of			
AL - NIC Concern1 Stor	futoe an	d that no finds are o	rmming	led with prof	ndited (	г оше	r non-disclosed failu	s. I further certify that this report			
is complete, true an	d correc	t and that I have bee	n traine	d by the NC	State Bo	and of	Elections.				
Donald Du	mn				A al	IN X	and the	4/26/2010			
· · · · · · · · · · · · · · · · · · ·	Print	ed Name of Signer		<u> </u>	ignature o	of Appoi	nted Treasurer	Date			
FOR OFFICE USE	ONLY						r	Delivery Method			
Date Received: <u>4/26/10</u> Employee: <u>Juby Speas</u>						Normal Mail					
Registered Mail											
Date Postmarke	Date Postmarked: Employee: Hand Delivered										
								Electronically Filed			
								Signer has not received mandatory training			
Date Data Ente	ered:			Employee:							
							لداده ممتنا سيمم مراد م	race tragenter accistant tragenter			
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.											

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

1000

## **Detailed Summary**

⊠ No □ Yes Use this form to summarize all disclosure reporting forms and to total monetary information . Committee Full Name (and Fund if applicable) 3. ID Number Omm 35 der h as to KAL A. L. D <sup>1</sup>Total this Total this 200 Start of Election Cycle: January 1, **Reporting Period** Election Cycle 4) Cash on Hand at Start 50 \$ \$ RECEIPTS 5) Aggregated Contributions from Individuals (CRO-1205) \$ \$ 6) Contributions from Individuals (CRO-1210) \$ ۲., +60\$ 2 7) Contributions from Political Party Committees (CRO-1220) \$ \$ 8) Contributions from Other Political Committees (CRO-1230) \$ \$ 9) Loan Proceeds (CRO-1410) \$ \$ 0) 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) \$ **11e) Exempt Purchase Price Sales** (CRO-1265) \$ \$ 12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e) \$ \$ んつ EXPENDITURES 13) Disbursements 13a) Operating Expenditures (CRO-1310) \$ 757.98 \$ 7.98 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) \$ 98 \$ 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18 \$ 7.02 \$ ADDITIONAL INFORMATION 20) Non-Monetary Gifts Given to Other Committees Ð (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-2220) \$

CRO-1100

28) Contributions to be Refunded

NC State Board of Elections

(CRO-1215)

\$

\$

August 2008

\$

		m Individuals	ovor \$5(	) or contr	P			Amendme Ve	<b></b>	
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										
Committee Dunn4Schools										
Commi										
	ributor Informati			Add	<u> </u>	emove				
	me, Mailing Address	& Phone			itle/Profession	1	d. Commen			
	e city, state, & zip)			Execu	tive		Candidat	Candidate		
Donald	ook Meadow Ct.						-			
	lle, NC 27023			<u> </u>	yer's Name/S Holdings I		4			
2011041	10,110 27025				rioranii 55 r		e. Election Sum to Date			
							·		245.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Descri	ption <sub>R</sub>	j. Date (mm/dd/yy	· ·yy)	k. Amount		
$\boxtimes$		-Castr chule			~	02/25/2	010	\$	95.00*	
	BUS	Cash			· · · · · · · · · · · · · · · · · · ·	03/08/2	2010	\$ _	50 100.00-	
	Bus	Cash				4/12/2	010	\$	100.00	
3. Contr	ibutor Informatio	)0	$\boxtimes$	Add	Re Re	move				
	me, Mailing Address ó	k Phone			tle/Profession		d. Comment	ts		
	city, state, & zip)			Parent						
	3. Martin 5 <sup>th</sup> Street						ļ			
	-Salem, NC			c. Emplo	yer's Name/S	pecific Field			-	
W HISTOIL	balchi, ive			,			e. Election Sum to Date			
							\$	\$ 15.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Ki	ind Descrip	ption	j. Date (mm/dd/yy	yy)	k. Amount		
	Рег	Chk				3/17/20	10	\$	15.00	
								\$		
					·			\$		
3. Contri	ibutor Informatio	II .	<u>ک</u>	Add	Rei	nove		-		
	ne, Mailing Address &	Phone		b. Job Tit	le/Profession		d. Comment	š		
(include	city, state, & zip)	lign 6. Goed	(n)	PIA c. Employ	 ver's Name/Sp	25 . ecific Field				
10	. BOX 16	,08				· · · · ·		num to Data		
Columbia, SC								e. Election Sum to Date		
£ Prior	g. Account Code	h. Form of Payment	i. In-Ki	nd Descrip	tion	j. Date (mm/dd/yyy	r <b>y</b> )	k. Amount		
								\$		
								\$		
							<u>.</u>	\$		
	only this Page		-				\$		<b>3</b> 15.00	
	of ALL CRO-	•	_				\$		315.00	
(This line	must be on line 6 of D	etailed Summary Page Ck	(0-1100)				-		~ K	

T>+ 1						Amendment					
Disbursen					<u>1</u> of	<u>1</u> [] Yes [] No					
Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political											
committees and coordinated party expenditures.											
1. Committee Full Name (and Fund if applicable) 2. ID Number   Committee to Elect Donald Dunn 2. ID Number											
3. Type of Disl		······································	RO-1310 forms for ea								
Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures   4. Payee Information Add Remove											
· · · · · · · · · · · · · · · · · · ·			Add								
	ling Address & Phone		b. Coordinated Commit	ttee Nam	le	d. Comments					
(include city, state Office Max	, & zip)					Ink Cart. 26.99					
140 Stratford (	Yamanan Cut		7 17 17			Bus. Cds 16.99					
Winston-Salen			c. Level Registered (Spe		~ .						
winston-Saten	LINC 27105			_	County:						
					Municipality:	e. Election Sum to Date					
						\$ 47.39					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	<u> </u>		k. Required Remarks					
L ACCOUNT COUC			L. Date (HILDUWyyyy)	· ·	j. Amount	Ink cart					
Bus	Credit Card	k	4/6/2010		\$47.99	Bus Cards					
	· · · · · · · · · · · · · · · · · · ·					Bus carus					
				1:	\$						
4. Payee Inform	nation		Add		Remove						
	ing Address & Phone		b. Coordinated Commit			d. Comments					
	-	F	b. Condinated Commu	ACC I VAILE	c	Bus Cds 13.99					
(include city, state, Office Depot	oc zapj					Dus Cas 15.77					
7774 North Poi	nt Rivd		c. Level Registered (Spec	eify)		-					
Winston-Salem		-	Federal F		County:						
Winston-Salon	,		State Municipality:			e. Election Sum to Date					
,		-			within cipanty.						
						\$ 15.07					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)		. Amount	k. Required Remarks					
		-				Bus Cards					
Bus	Credit Card	K	4/9/2010	1	\$15.07						
<u></u>											
			Í.	1	5						
4. Payee Inform	ation		Add [	F F	Remove	· · · · · · · · · · · · · · · · · · ·					
	ng Address & Phone		b. Coordinated Committ			d. Comments					
(include city, state,	5				-	Gas- Govern's					
Neighbors						Briefing Raleig					
5981 University	Blvd	F	c. Level Registered (Spec	cifv)							
Winston-Salem,		ŀ	Federal		County:	1					
			State Municipality:			e. Election Sum to Date					
		F	<u> </u>		<u>r</u> y						
						\$ 30.00					
f. Account Code	g. Form of Payment	h. Purpose Code	L Date (mm/dd/yyyy)	i	Amount	k. Required Remarks					
		···				Gas					
Bus	Chk 991	0	3/3/2010	\$	30.00						
·-··											
				\$							
5. Total only thi	s Page		<u> </u>			\$ 92.46					
	CRO-1310 Pages										
	line 13a of Detailed Sum	mary Page CRO-1100	f Operating Expenses)			¢ 077 00					
	-			olitical C	Comm)	\$ 257.98					
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)											
	s (List detailed exp					······································					
A* - Media	B* - Printing	C* - Fundr			D - To Anoth	er Candidate					
E - Salaries	F* - Equipment	G - Political				Public Office Expenses					
I - Postage	J - Penalties	K* - Office	Expenses			n to Legal Expense Fund					
O* - Other	. J. 4 . 9. J	- • • •									
* Codes require	e detailed explanati	on in required ren	aarks neid (k)			I					

1.

Аш	endmient
	Yes

Disbursements
---------------

÷.,

,

 $\boxtimes$ 

1310

No

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

1. Committee Full Name (and Fund if applicable) 2. ID Number									
Committee to Elect Donald Dunn									
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 Inform	A	dd		Remove					
a. Full Name, Mail	ing Address & Phone		b.	<b>Coordinated Comm</b>	ittee Na	une	d. Co	mments	
(include city, state,	& zip)				•				
PK Graphics			1						
420 Lincoln Rd	Suite 305		c. Level Registered (Specify)						
Miami Beach, FL				Federal County:					
			Г	State	$\boxtimes$	Municipality:	e. Ele	ction Sum to Date	
							\$	159.42	
							<b>₽</b> .	1.37.42	
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyy	y)	j. Amount	k. Re	quired Remarks	
Pue	Credit Card	в		4/7/2010		\$159.42	Post Cards		
Bus	Ciedii Caiu	D		4/ 1/2010		φ1 <i>39.</i> 42			
						\$			
						φ			
4. Payee Inform	ation	$\boxtimes$	A	dd		Remove			
a. Full Name, Maili	ng Address & Phone		<b>b.</b>	<b>Coordinated</b> Commi	ittee Na	me	L	mments	
(include city, state,	& zip)						Ope	ning ACCT	
PayPal			]					:	
-			c. ]	Level Registered (Sp	ecify)				
				Federal		County:	1		
				State	$\boxtimes$	Municipality:	e. Ele	ction Sum to Date	
				_				10	
							\$.	10	
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy	7)	j. Amount	k. Re	quired Remarks	
D	Credit Card	0		2/21/2010		\$.07	Oper	ning Acct	
Bus	Creatic Cara	0		3/31/2010	<b>3.</b> 07	ļ			
Bus	Credit Card	0		3/31/2010		\$.03	Oper	ning Acct	
Dus	Create Card			<i>5/51/2</i> 010		φ.05			
4. Payee Inform	ation	$\boxtimes$	Ac	Add Remove			r		
a. Full Name, Mailin	ng Address & Phone		b. (	b. Coordinated Committee Name			d. Co	mments	
(include city, state, a									
First Citizens Ba	ink								
P.O. Box 092			c. Level Registered (Specify)						
Raleigh,NC			Federal County:						
				State	$\boxtimes$	Municipality:	c. Ele	ction Sum to Date	
							\$ 6	5.00	
							<b>•</b> •		
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy	)	j. Amount		uired Remarks	
Bus	Draft	0		4/6//2010		\$6.00		red Dep.	
Dus	Блац	<u> </u>		+10/12010		40.00	Slips		
						\$			
						Ψ			
5. Total only this							\$	165.52	
	CRO-1310 Pages								
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) \$ 257.98									
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)									
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)									
7. Purpose Codes (List detailed expenditure code in (h.) above)									
A* - Media B* - Printing C* - Fundra									
E - Salaries F* - Equipment G - Politica									
I - Postage O* - Other	J - Penalties	K* - Offic	e Li	rhenses		Q~ - Dollatio	1 10 L.C	gal Expense Fund	
	* Codes require detailed explanation in required remarks field (k)								