

# Disclosure Report Cover

Amendment  
☐ Yes ☒ No

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.

<b>1. Committee Information</b>	
a. Full Name <u>Committee to Elect Vic Johnson</u>	c. ID Number <u>200790</u>
b. Mailing Address (include city, State and Zip Code) <u>2315 Manchester St. Winston-Salem, NC 27103</u>	d. Date Filed <u>10/18/10</u>
	e. Phone Number <u>(336) 722-2189</u>

2. Report Year <u>2010</u>	3. Period Start Date (mm/dd/yyyy) <u>7/1/10</u>	4. Period End Date (mm/dd/yyyy) <u>10/16/10</u>	5. Treasurer Full Name
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<b>6. Type of Committee (check one)</b>		<b>7. Type of Report (check only one type of report from one category)</b>	
<input type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input checked="" 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 <input type="checkbox"/> Second <input checked="" type="checkbox"/> Third <input 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"/> Referendum <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
<b>8. Number of Fundraisers in this Report</b>		<b>9. Special Report Name</b>	
		2010 BOB FID	

<b>10. Account Information</b>		<b>11. Account Information</b>	
a. Financial Institution Full Name	b. Purpose <u>Campaign</u>	a. Financial Institution Full Name	b. Purpose
c. Account Code <u>VVA</u>	d. Period Begin Balance <u>\$ 225.11</u>	c. Account Code	d. Period Begin Balance

**CERTIFICATION**

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of 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.

Victor Johnson Jr Printed Name of Signer Victor Johnson Jr Signature of Appointed Treasurer 10/18/10 Date

**FOR OFFICE USE ONLY**

Date Received: <u>10/18/2010</u>	Employee: <u>Judy Spear</u>	Delivery Method: <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed
Date Postmarked:	Employee:	<input type="checkbox"/> Signer has not received mandatory training
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.  
 You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

# 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
Committee to Elect Vic Johnson		Quarterly	2C0790
Start of Election Cycle: January 1, _____		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 225.11	\$
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals (CRO-1205)		\$	\$
6) Contributions from Individuals (CRO-1210)		\$ 1200.00	\$ 4342.00
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)		\$	\$
11e) Exempt Purchase Price Sales (CRO-1265)		\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 1900.00	\$ 4342.00
<b>EXPENDITURES</b>			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$ 1002.63	\$ 3389.52
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)		\$	\$ 530.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 1002.63	\$ 3919.52
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 422.48	\$ 422.48
<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 (CRO-2220)		\$	\$
28) Contributions to be Refunded (CRO-1215)		\$	\$

# Contributions from Individuals

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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
Committee to Elect Vic Johnson		2C 0790

3. Contributor Information		<input type="checkbox"/> Add <input type="checkbox"/> Remove
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession
Sandra Jones 5840 Brookway Dr. Winston-Salem, NC 27105		Advertising Agt.
		c. Employer's Name/Specific Field
		self-employed
		d. Comments
		e. Election Sum to Date
		\$

Prior	f. Account Code	h. Form of Payment	i. In Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	WA	check		10/4/10	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information		<input type="checkbox"/> Add <input type="checkbox"/> Remove
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession
Victor Johnson, Jr. 2315 Manchester St. Winston-Salem, NC 27105		Educator
		c. Employer's Name/Specific Field
		Retired
		d. Comments
		e. Election Sum to Date
		\$

Prior	f. Account Code	h. Form of Payment	i. In Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	WA	check		9/22/10	\$ 1000.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information		<input type="checkbox"/> Add <input type="checkbox"/> Remove
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession
Nathan Cook 2908 Sue Dr. Jefferson City, MO 65109		Educator
		c. Employer's Name/Specific Field
		Retired
		d. Comments
		e. Election Sum to Date
		\$

Prior	f. Account Code	h. Form of Payment	i. In Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	WA	check		10/18/10	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page	\$ 1200.00
5. Total of ALL CRO 1210 Pages	\$ 1200.00

CRO-1210

NC State Board of Elections

April 2007

# Disbursements

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

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Amendment

☐ Yes ☐ No

Committee Full Name (and Fund if applicable)		ID Number	
Committee to Elect Vice Johnson		ZC 790	
Types of Disbursement: <i>Please use separate CRO-1310 forms for each type of disbursement.</i> <input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures			
Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state & zip) Fed Ex Office 232 Stratford Rd. Winston-Salem, NC 27103			
b. Coordinated Committee Name		c. Comments	
d. Level Registered (Specify)		e. Election Sum to Date	
<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
		\$ 174.85	
Account Code	Form of Payment	Purpose Code	Date (mm/dd/yyyy)
WA	Check	B	9/22/10
			\$ 174.85
			Printing data
Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state & zip) Kristopher Calken 237 Magnolia St. Apt W-S, NC 27103			
b. Coordinated Committee Name		c. Comments	
d. Level Registered (Specify)		e. Election Sum to Date	
<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
		\$ 50.00	
Account Code	Form of Payment	Purpose Code	Date (mm/dd/yyyy)
WA	Check	B	10/4/10
			\$ 50.00
			Printing labels
Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state & zip) Postmaster			
b. Coordinated Committee Name		c. Comments	
d. Level Registered (Specify)		e. Election Sum to Date	
<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
		\$ 660.00	
Account Code	Form of Payment	Purpose Code	Date (mm/dd/yyyy)
VUA	Check	I	10/13/10
			\$ 660.00
Total on this page			\$ 884.85
Total of ALL CRO-1310 pages			\$
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)			
(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)			
Purpose Codes: <i>Use appropriate code in column below</i> A - Media B* - Printing C - Fundraising D - To Another Candidate E - Salaries F* - Equipment G - Political Party H* - Holding Public Office Expenses I - Postage J - Penalties K* - Office Expenses O* - Other			
Codes require detailed explanation in required remarks field.			

# Disbursements

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Amendment

☐ 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) **Committee to Elect Vic Johnson** 2. ID Number **7C0790**

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) **AKA Gifts + Promotions  
4465 Kimball Lane  
Winston-Salem, NC 2705**  
 b. Coordinated Committee Name  
 c. Level Registered (Specify)  
☐ Federal ☐ County:  
☐ State ☐ Municipality:  
 d. Election Sum to Date  
**\$ 67.78**

e. Account Code	f. Form of Payment	g. Purpose Code	h. Date (mm/dd/yyyy)	i. Amount	j. Required Remarks
VVA	check	Sign Back	10/12/10	\$ 67.78	
				\$	

4. Payee Information ☐ Add ☐ Remove  
 a. Full Name, Mailing Address & Phone (include city, state, & zip) **Kristopher Glenn  
287 Magnolia St Apt C  
Winston-Salem, NC 27103**  
 b. Coordinated Committee Name  
 c. Level Registered (Specify)  
☐ Federal ☐ County:  
☐ State ☐ Municipality:  
 d. Election Sum to Date  
**\$ 50.00**

e. Account Code	f. Form of Payment	g. Purpose Code	h. Date (mm/dd/yyyy)	i. Amount	j. Required Remarks
VVA	check	B	10/18/10	\$ 50.00	
				\$	

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. Election Sum to Date  
**\$**

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

5. Total only this Page **\$ 117.78**

6. Total of ALL CRO-1310 Pages  
 (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)  
 (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)  
**\$ 1,002.63**

7. Purpose Codes (List detailed expenditure code in (d) above)  
 A\* - Media B\* - Printing C\* - Fundraising D - To Another Candidate  
 E - Salaries F\* - Equipment G - Political Party H\* - Holding Public Office Expenses  
 I - Postage J - Penalties K\* - Office Expenses O\* - Other

Codes require detailed explanation in required remarks field (8)