

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

1. Committee Information			
a. Full Name Tackabery for School Board			c. ID Number BIY436
b. Mailing Address (include City, State and Zip Code) 3109 Gladstonbury Road Winston-Salem, NC 27104			d. Date Filed 01/03/2011
			e. Phone Number 336-760-3248
2. Report Year 2010	3. Period Start Date (mm/dd/yy) 10/17/2010	4. Period End Date (mm/dd/yy) 12/31/2010	5. Treasurer Full Name Marianne D. Bach
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)	
<input checked="" 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		Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input 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 State/County <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input checked="" type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input checked="" type="checkbox"/> Final <input type="checkbox"/> Special 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	
7. Type of Fund (if applicable, check one)		10. Special Report Name	
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:		2011 JAN 10 AM 9:11 RECEIVED BOA FOR 7TH COUNTY	
8. Number of Fundraisers this Report			
11. Account Information		11. Account Information	
a. Financial Institution Full Name Southern Community Bank		a. Financial Institution Full Name	
b. Purpose Fundraising Expenses	c. Account Code SCB	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 406.69		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.

Marianne D. Bach

Printed Name of Signer

Marianne D. Bach

Signature of Appointed Treasurer

December 31, 20

Date

FOR OFFICE USE ONLY

Date Received: 1/10/11
 Date Postmarked: _____
 Date Scanned: _____
 Date Data Entered: _____

Employee: *Judy Spas*
 Employee: _____
 Employee: _____
 Employee: _____

Delivery Method
☐ Normal Mail
☐ Registered Mail
☒ Hand Delivered
☐ Electronically Filed
☐ Signer has not received 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.

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	
Tackabery for School Board		2010 4 th Quarter & Final report		B1Y436	
Start of Election Cycle: January 1, 2007		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 406.69		\$ 1452.01	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$		\$	
6) Contributions from Individuals (CRO-1210)		\$ 197.24		\$ 859.13	
7) Contributions from Political Party Committees (CRO-1220)		\$		\$ 100.00	
8) Contributions from Other Political Committees (CRO-1230)		\$		\$ 300.00	
9) Loan Proceeds (CRO-1410)		\$		\$	
10) Refunds/Reimbursements To the Committee (CRO-1240)		\$		\$	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$.06		\$ 7027	
11b) Contributions from Not-for-Profit Organizations (CRO-1250)		\$		\$	
11c) Outside Sources of Income (CRO-1250)		\$		\$	
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$		\$	
11 e) Exempt Purchase Price Sales (CRO-1265)		\$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 197.30		\$ 1266.40	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 209.51		\$ 1400.15	
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)		\$ 197.24		\$ 659.13	
17) In-Kind Contributions (CRO-1510)		\$ 197.24		\$ 659.13	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 603.99		\$ 2718.41	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ -0-		\$ -0-	
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 (CRO-2200)		\$		\$	
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	
Tackabery for School Board					BIY436	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Jill A. Tackabery 4109 Gladstonbury Road Winston-Salem, NC 27104 336-768-2501			School Board member and candidate			
			c. Employer's Name/Specific Field			
			WS/FC School board			
					e. Election Sum to Date	
					\$ 644.39	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	SCB	check	Republican ad	10/31/2010	\$ 100.00	
<input type="checkbox"/>	SCB	credit card	gas expense	various	\$ 82.50	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Marianne D. Bach 332 Beechcliff Court Winston-Salem, NC 27104 336-760-3248			volunteer			
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$ 14.74	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	SCB	cash	stamps/envelope	11/15/2010	\$ 14.74	
<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		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	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 197.24	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 197.24	

Other Receipt Sources

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Amendment
☐ Yes ☒ No

Use this form to report income not reported on another form. i.e. interest income, not for profit contributions etc.

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Tackabery for School Board				B1Y436	
3. Type of Receipt Source <i>(Please use separate CRO-1250 forms for each type of Receipt Source.)</i>					
<input checked="" type="checkbox"/> Interest <input type="checkbox"/> Contributions from Not-for-Profit Organizations <input type="checkbox"/> Outside Sources of Income					
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Not-for-Profit Federal ID #	d. Comments
Southern Community Bank PO Box 26134 Winston-Salem, NC 27114 336-794-9911					
				c. Outside Source Explanation	
				e. Election Sum to Date	
				\$ 7.27	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
SCB	autodeposit		10/29/2010	\$.04	
SCB	autodeposit		11/30/2010	\$.02	
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Not-for-Profit Federal ID #	d. Comments
				c. Outside Source Explanation	
				e. Election Sum to Date	
				\$	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Not-for-Profit Federal ID #	d. Comments
				c. Outside Source Explanation	
				e. Election Sum to Date	
				\$	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
5. Total only this Page				\$.06	
6. Total of ALL CRO-1250 Pages <i>(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest)</i> <i>(This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution)</i> <i>(This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)</i>				\$.06	

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)					2. ID Number
Tackabery for School Board					B1Y436
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
City of Winston-Salem PO Box 2756 Winston-Salem, NC 27102-2756 336-727-2628					
		c. Level Registered (Specify)			
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> 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
SCB	check	J	10/31/2010	\$50.00	sign fine
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Southern Community Bank PO Box 26134 Winston-Salem, NC 27114-6134 336-768-8500					
		c. Level Registered (Specify)			
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				e. Election Sum to Date	
				\$ 6.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
SCB	debit	O	11/30/2010	\$6.00	bank service charge
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
School Buddies Fund 601 N. Cherry Street Suite 300 Winston-Salem, NC 27101 336-748-4025					
		c. Level Registered (Specify)			
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				e. Election Sum to Date	
				\$ 153.51	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
SCB	check	O	12/10/2010	\$153.51	donation to close account
				\$	
5. Total only this Page					\$ 209.51
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)					\$ 209.51
(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* - Fundraising	
E - Salaries		F* - Equipment		D - To Another Candidate	
I - Postage		J - Penalties		G - Political Party	
O* - Other				H* - Holding Public Office Expenses	
				K* - Office Expenses	
				Q* - Donation to Legal Expense Fund	
* Codes require detailed explanation in required remarks field (k)					

Refunds/Reimbursements From the Committee

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Amendment

☐ Yes ☒ No

Use this form to report refunds/reimbursements, including contributions returned to the contributor.

1. Committee Full Name (and Fund if applicable)			2. ID Number	
Tackabery for School Board			BIY436	
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		b. Original Receipt Date
Jill A. Tackabery 4109 Gladstonbury Road Winston-Salem, NC 27104 336-768-2501		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		10/31/2010
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		e. Level Registered (Specify)		i. Original Receipt Amount
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 100.00
f. Purpose Code		j. Election Sum to Date		
P		\$ 100.00		
h. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code
candidate		paid campaign expense with personal funds		SCB
l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount	
check	repayment of ad cost	10/31/2010	\$ 100.00	
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		b. Original Receipt Date
Jill A. Tackabery 4109 Gladstonbury road Winston-Salem, NC 27104 336-768-2501		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		various
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		e. Level Registered (Specify)		i. Original Receipt Amount
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 82.50
f. Purpose Code		j. Election Sum to Date		
P		\$ 82.50		
h. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code
candidate		pay for gas		SCB
l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount	
cash	repayment for gas expense	12/10/2010	\$ 82.50	
3. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		b. Original Receipt Date
Marianne Bach 332 Beechcliff Court Winston-Salem, NC 27104 336-760-3248		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		11/15/2010
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		e. Level Registered (Specify)		i. Original Receipt Amount
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 14.74
f. Purpose Code		j. Election Sum to Date		
P		\$ 14.74		
h. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code
volunteer		pay for stamps/envelopes		SCB
l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount	
cash	stamps and envelopes	12/10/2010	\$ 14.74	
4. Total only this Page				\$ 197.24
5. Total of ALL CRO-1320 Pages (This line must be on line 16 of Detailed Summary Page CRO-1100)				\$ 197.24
L - Returned to Contributor M - Overpayment for Service N - Exceeded Contribution Limit P* - Reimbursement of In-Kind O* Other				
* Codes require detailed explanation in required remarks field (m)				

In-Kind Contributions

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Amendment

☐ Yes ☒ No

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)		2. ID Number
Tackabery for School Board		B1Y436
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	c. Comments
Jill A. Tackabery 4109 Gladstonbury Road Winston-Salem, NC 27104 336-768-2501		
		d. Election Sum to Date
		\$ 644.39
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
paid for Republican ad	10/31/2010	\$ 100.00
auto/gas expense	various	\$ 82.50
		\$
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	c. Comments
Marianne Bach 332 Beechcliff Court Winston-Salem, NC 27104336-760-3248		
		d. Election Sum to Date
		\$ 14.74
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
bought envelopes and stamps	11/16/2010	\$ 14.74
		\$
		\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor <input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	c. Comments
		d. Election Sum to Date
		\$
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
		\$
		\$
		\$
4. Total only this Page		\$ 197.24
5. Total of ALL CRO-1510 Pages (This line must be on line 12 of Detailed Summary Page CRO-1100)		\$ 197.24