

# Disclosure Report Cover

# COPY

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 <b>Kaplan for Commissioner</b>	c. ID Number <b>NIYXIE</b>
b. Mailing Address (include City, State and Zip Code) <b>P.O. Box 10 Bethania, NC 27010</b>	d. Date Filed <b>4-22-2010</b>
	e. Phone Number <b>336 922-4000</b>

2. Report Year <b>2010</b>	3. Period Start Date (mm/dd/yy) <b>01-01-2010</b>	4. Period End Date (mm/dd/yy) <b>04-17-2010</b>	5. Treasurer Full Name <b>James W. Armentrout</b>
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<b>6. Type of Committee (Check One)</b> <input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund		<b>9. Type of Report (check only one type of report from one category)</b> <table border="1"> <tr> <th>Municipal</th> <th>State/County</th> <th>Referendum</th> </tr> <tr> <td><input type="checkbox"/> Organizational</td> <td><input type="checkbox"/> Organizational</td> <td><input type="checkbox"/> Organizational</td> </tr> <tr> <td><input type="checkbox"/> Thirty-five day</td> <td><input type="checkbox"/> Quarterly</td> <td><input type="checkbox"/> Pre-referendum</td> </tr> <tr> <td><input type="checkbox"/> Pre-primary</td> <td><input checked="" type="checkbox"/> First <b>PLUS</b></td> <td><input type="checkbox"/> Final</td> </tr> <tr> <td><input type="checkbox"/> Pre-election</td> <td><input type="checkbox"/> Second</td> <td><input type="checkbox"/> Supplemental Final</td> </tr> <tr> <td><input type="checkbox"/> Pre-runoff</td> <td><input type="checkbox"/> Third</td> <td><input type="checkbox"/> Annual</td> </tr> <tr> <td><input type="checkbox"/> Semi-annual</td> <td><input type="checkbox"/> Fourth</td> <td><input type="checkbox"/> Special</td> </tr> <tr> <td><input type="checkbox"/> Mid Year</td> <td><input type="checkbox"/> Semi-annual</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Year End</td> <td><input type="checkbox"/> Mid Year</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Final</td> <td><input type="checkbox"/> Year End</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Special</td> <td><input type="checkbox"/> Final</td> <td></td> </tr> <tr> <td></td> <td><input type="checkbox"/> Special</td> <td></td> </tr> </table>		Municipal	State/County	Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum	<input type="checkbox"/> Pre-primary	<input checked="" type="checkbox"/> First <b>PLUS</b>	<input type="checkbox"/> Final	<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final	<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual	<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special	<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year		<input type="checkbox"/> Final	<input type="checkbox"/> Year End		<input type="checkbox"/> Special	<input type="checkbox"/> Final			<input type="checkbox"/> Special	
Municipal	State/County	Referendum																																					
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<input type="checkbox"/> Final	<input type="checkbox"/> Year End																																						
<input type="checkbox"/> Special	<input type="checkbox"/> Final																																						
	<input type="checkbox"/> Special																																						
<b>7. Type of Fund (if applicable, check one)</b> <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> NC Political Party Financing Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:		<b>10. Special Report Name</b> 																																					
<b>8. Number of Fundraisers this Report</b> 																																							

<b>11. Account Information</b>	
a. Financial Institution Full Name <b>Branch Banking and Trust Company</b>	
b. Purpose <b>candidate receipts/expenditures</b>	c. Account Code <b>1001</b>
	d. Period Begin Balance <b>\$ 61,27</b>

**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 undisclosed 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

James W. Armentrout    [Signature]    **4-22-2010**  
 Printed Name of Signer    Signature of Appointed Treasurer    Date

**FOR OFFICE USE ONLY**

Date Received: <u>4/22/10</u>	Employee: <u>Judy Spear</u>	<b>Delivery Method</b> <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> 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.  
 You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

# Detailed Summary

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

Amendment  
☐ Yes ☒ No

1 Committee Full Name (and Fund if applicable)		2 Type of Report		3 ID Number	
Kaplan for Commissioner		1st Quarter		NITXIE	
Start of Election Cycle: January 1, 2007		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 61.27		\$ 985.94	
<b>RECEIPTS</b>					
5) Aggregated Contributions from Individuals (CRO-1205)		\$		\$	
6) Contributions from Individuals (CRO-1210)		\$		\$	
7) Contributions from Political Party Committees (CRO-1220)		\$		\$	
8) Contributions from Other Political Committees (CRO-1230)		\$		\$ 2,000.00	
9) Loan Proceeds (CRO-1410)		\$		\$ 19,600.00	
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)		\$ 190.00		\$ 190.00	
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c and 11d)		\$ 190.00		\$ 21,790.00	
<b>EXPENDITURES</b>					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 5.00		\$ 18,929.67	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$		\$	
13c) Coordinated Party Expenditures (CRO-1310)		\$		\$ 3,600.00	
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)		\$ 190.00		\$ 190.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 195.00		\$ 22,719.67	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 56.27		\$ 56.27	
<b>ADDITIONAL INFORMATION</b>					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 19,600.00			
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)		\$		\$	

# Other Receipt Sources

Page 1 of 1 Amendment ☐ Yes ☒ No

1. Committee Full Name (and Fund if applicable) <div style="text-align: center;">Kaplan for Commissioner</div>				2. ID Number <div style="text-align: center;">N1YXIE</div>	
3. Type of Receipt Source <i>(Please use separate CRO-1250 forms for each type of Receipt Source.)</i> <input type="checkbox"/> Interest <input type="checkbox"/> Contributions from Not-for-Profit Organizations <input checked="" type="checkbox"/> Outside Sources of Income					
4. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)  <div style="text-align: center;">Ted Kaplan 1117 Glousman W-S, NC 27104</div>			b. Not-for-Profit Federal ID #  		d. Comments  
			c. Outside Source Explanation  <div style="text-align: center;">paid filing fee with his funds</div>		e. Election Cycle Sum to Date  <div style="text-align: center;">\$ 190.00</div>
f. Account Code <div style="text-align: center;">1001</div>	g. Form of Payment <div style="text-align: center;">check</div>	h. In-Kind Description <div style="text-align: center;">filing fee</div>	i. Date (mm/dd/yyyy) <div style="text-align: center;">02-17-2010</div>	j. Amount <div style="text-align: center;">\$190.00</div>	
				<div style="text-align: center;">\$</div>	
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 Cycle Sum to Date  <div style="text-align: center;">\$</div>
				<div style="text-align: center;">\$</div>	
				<div style="text-align: center;">\$</div>	
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 Cycle Sum to Date  <div style="text-align: center;">\$</div>
				<div style="text-align: center;">\$</div>	
				<div style="text-align: center;">\$</div>	
5. Total only this Page				<div style="text-align: center;">\$ 190.00</div>	
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>				<div style="text-align: center;">\$ 190.00</div>	

# Disbursements

Pg 1 of 1

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) <b>Kaplan for Commissioner</b>						2. ID Number <b>NIYXIE</b>	
3. Type of Disbursement (Please use separate CRO-1100 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 type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)  <b>Branch Banking and Trust Company          Robinhood Road          Winston-Salem, NC 27106</b>				b. Coordinated Committee Name		d. Comments  <b>monthly fee</b>	
				c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date  <b>\$ 0.00</b>	
f. Account Code <b>1001</b>	g. Form of Payment <b>deduct</b>	h. Purpose Code <b>"0" operating</b>	i. Date (mm/dd/yyyy) <b>03-31-2010</b>	j. Amount <b>\$ 5.00</b>	k. Required Remarks <b>auto deduct</b>		
		<b>acct. deduct</b>		<b>\$</b>			
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	
				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  <b>\$</b>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
				<b>\$</b>			
				<b>\$</b>			
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	
				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  <b>\$</b>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
				<b>\$</b>			
				<b>\$</b>			
5. Total only this Page					<b>\$ 5.00</b>		
6. Total of ALL CRO-1100 Pages					<b>\$ 5.00</b>		
(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)							
7. Purpose Codes (List detailed expenditure code in (k) 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		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							

# In-Kind Contributions

Amendment Pg 1 of 1 ☐ Yes ☒ No

1. Committee Full Name (and Fund if applicable) Kaplan for Commissioner		2. ID Number N1YXIE	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)  Ted Kaplan 1117 Glousman W-S, NC 27104		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	
		d. Election Cycle Sum to Date \$ 190.00	
e. Description Paid filing fee with own money		f. Date (mm/dd/yyyy) 02-17-2010	g. Fair Market Amount \$190.00
			\$
			\$
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 Cycle Sum to Date \$	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
			\$
			\$
			\$
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 Cycle Sum to Date \$	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
			\$
			\$
			\$
4. Total only this Page		\$ 190.00	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 190.00	

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable)			2. ID Number	
Kaplan for Commissioner			N1YXIE	
3. Lender 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	
Ted Kaplan 1117 Glousman Road W-S, NC 27104		Candidate/investor/ Kaplan School Supply		loaned to his comm.
		c. Employer's Name/Specific Field		e. Start Date (mm/dd/yyyy)
		Kaplan School Supply childrens play equip.		09-13-2007
		f. End Date (mm/dd/yyyy)		unknown
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance	
0 %	none	\$ 18,000.00	\$ 18,000.00	
k. Full Name of Lending Institution			l. Loan Number	
n/a			n/a	
3. Lender 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	
Ted Kaplan 1117 Glousman Road W-S, NC 27104		Candidate/investor Kaplan School Supply		loaned to his comm.
		c. Employer's Name/Specific Field		e. Start Date (mm/dd/yyyy)
		Kaplan School Supply childrens play equip.		02-10-2009
		f. End Date (mm/dd/yyyy)		unknown
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance	
0 %	none	\$ 1,600.00	\$ 1,600.00	
k. Full Name of Lending Institution			l. Loan Number	
n/a			n/a	
3. Lender 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. Start Date (mm/dd/yyyy)
		f. End Date (mm/dd/yyyy)		
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance	
%		\$	\$	
k. Full Name of Lending Institution			l. Loan Number	
4. Total on this Page				
5. Total on All CRO-1430s			\$ XXX,XXX.XX 19,600	
6. Total on All CRO-1430s			\$ XXX,XXX.XX 19,600	