

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 update information.

Amendment

☐ Yes ☒ No

1. Committee Information		c. ID Number	
a. Full Name WHITEHEAD COMMITTEE		BCQ402	
b. Mailing Address (include City, State and Zip Code) POB 40 LEWISVILLE, NC 27023		d. Date Filed 10/22/2010	
		e. Phone Number 817-1555	
2. Report Year 2010	3. Period Start Date (mm/dd/yy) 07/01/2010	4. Period End Date (mm/dd/yy) 10/16/2010	5. Treasurer Full Name Wm. H. Whitehead
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)	
☒ Candidate Campaign ☐ PAC ☐ Independent Expenditure ☐ Legal Expense Fund ☐ Party ☐ Referendum ☐ Joint Fundraiser		Municipal ☐ Organizational ☐ Thirty-five day ☐ Pre-primary ☐ Pre-election ☐ Pre-runoff ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special State/County ☐ Organizational ☐ Quarterly ☐ First ☐ Second ☒ Third ☐ Fourth ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special Referendum ☐ Organizational ☐ Pre-referendum ☐ Final ☐ Supplemental Final ☐ Annual ☐ Special	
7. Type of Fund (if applicable check one)		10. Special Report Name	
☐ Booster Fund ☐ Building Fund ☐ Other:		2	
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 DEPOSIT AND DISTRIBUTE CAMPAIGN FUNDS	c. Account Code WC	b. Purpose	c. Account Code
	d. Period Begin Balance \$25,760.90		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 otherwise 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.			
Wm. H. Whitehead Printed Name of Signer		10/22/2010 Signature of Appointed Treasurer Date	
FOR OFFICE USE ONLY			
Date Received: 10/22/10	Employee: Judy Spears	Delivery Method	
Date Postmarked:	Employee:	☐ Normal Mail ☐ Registered Mail ☒ Hand Delivered ☐ Electronically Filed	
Date Scanned:	Employee:	☐ Signer has not received mandatory training	
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
WHITEHEART Committee		3rd QT.	8CQ402
Start of Election Cycle: January 1, _____		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 25,760.90	\$
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)		\$	\$
6) Contributions from Individuals (CRO-1210)		\$ 950.00	\$ 52,141.00
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)		\$ 950.00	\$ 52,141.00
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$ 13,897.79	\$ 39,136.89
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)		\$	\$ 191.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 13,897.79	\$ 39,327.89
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 12,813.11	\$ 12,813.11
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-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	
WHITE HEART COMMITTEE				8CQ 402	
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (Include city, state, & zip)		b. Job Title/Profession		d. Comments	
BERT BARNSON 580 YAMKIN VALLEY RD. ADVANCE, NC 27006		FARMER			
		c. Employer's Name/Specific Field		e. Election Sum to Date	
		SELF		\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	WC	✓#6430		09/29/2010	\$ 250.00
☐					\$
☐					\$
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (Include city, state, & zip)		b. Job Title/Profession		d. Comments	
PAT S. BROWN 131 WESTMONT DRIVE W-SALEM, NC 27104		RETD. EXECUTIVE			
		c. Employer's Name/Specific Field		e. Election Sum to Date	
				\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	WC	✓#6575		09/29/2010	\$ 50.00
☐					\$
☐					\$
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (Include city, state, & zip)		b. Job Title/Profession		d. Comments	
FRANK MINTER 3308 MAYFIELD CT. W-SALEM, NC 27104		BUSINESS OWNER			
		c. Employer's Name/Specific Field		e. Election Sum to Date	
		Gym owner SELF		\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	WC	✓#6330		09/29/2010	\$ 100.00
☐					\$
☐					\$
4. Total only this Page				\$ 400.00	
5. Total of ALL CRO-1210 Pages				\$ 400.00	
(This line must be on line 6 of Detailed Summary Page CRO-1100)					

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	
WH HEART COMMITTEE				BCQ 402	
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (Include city, state, & zip)			b. Job Title/Profession		d. Comments
JAMES E. LOWE 6585 YANTINVILLE ROAD PRAIRIE TOWN, NC 27040			BUSINESS OWNER		
			c. Employer's Name/Specific Field		
			Nursing Care SELF		
			e. Election Sum to Date		
					\$ 500.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	WC	V#5130		09/29/2010	\$ 500.00
☐					\$
☐					\$
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (Include city, state, & zip)			b. Job Title/Profession		d. Comments
E.T. SHIPLEY III 2503 BIRTING ROAD W-SALEM, NC 27014			ATTORNEY		
			c. Employer's Name/Specific Field		
			SELF		
			e. Election Sum to Date		
					\$ 50.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	WC	V#1034		09/29/2010	\$ 50.00
☐					\$
☐					\$
3. Contributor Information ☐ Add ☐ 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
☐					\$
☐					\$
☐					\$
4. Total only this Page					\$ 550.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 950.00

Disbursements

Pg 1 of 2 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	
WHITE HART Committee						8C9402	
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)				b. Coordinated Committee Name		d. Comments	
BYRON NELSON 4825 COMMERCIAL PLAZA SUITE A27 W-SALEM, NC 27104							
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☒ County: ☐ State ☐ Municipality:		\$3,950.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
WC	V# 1017	E	08/06/2010	\$1,800.00			
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
BYRON NELSON 4825 COMMERCIAL PLAZA SUITE A27 W-SALEM, NC 27104							
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☒ County: ☐ State ☐ Municipality:		\$4,950.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
WC	V# 1018	E	09/03/2010	\$1,000.00			
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
WXII 710 COLISEUM DRIVE W-SALEM, NC 27106							
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☒ County: ☐ State ☐ Municipality:		\$9,834.50	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
WC	V# 1019	A	09/23/2010	\$9,834.50	TV spot		
				\$			
5. Total only this Page						\$11,834.50	
6. Total of ALL CRO-1310 Pages						\$11,834.50	
(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 (h) 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)							

Disbursements

Pg 2 of 2

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	
WHITE KE ART COMMITTEE						8CQ 402	
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)				b. Coordinated Committee Name		d. Comments	
WOODEN GRAPHICS DRAWER 819 WELCOME, NC 27374							
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☒ County: ☐ State ☐ Municipality:			
				\$ 2,654.97		\$ 5,950.00	
f. Account Code		g. Form of Payment		h. Purpose Code		i. Date (mm/dd/yyyy)	
WC		VH 1020		B		10/01/2010	
						j. Amount	
						\$ 963.29	
						k. Required Remarks	
						yard signs	
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (Include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
BYRON NELSON 4825 COMMERCIAL PARK SUITE A 27 W-SALEM, NC 27104							
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☒ County: ☐ State ☐ Municipality:			
						\$ 5,950.00	
f. Account Code		g. Form of Payment		h. Purpose Code		i. Date (mm/dd/yyyy)	
WC		VH 1021		E		10/01/2010	
						j. Amount	
						\$ 1,000.00	
						k. Required Remarks	
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (Include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
SEAN CRAIG 4825 COMMERCIAL PARK SUITE A 27 W-SALEM, NC 27104							
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☒ County: ☐ State ☐ Municipality:			
						\$ 200.00	
f. Account Code		g. Form of Payment		h. Purpose Code		i. Date (mm/dd/yyyy)	
WC		VH 1022		E		10/08/2010	
						j. Amount	
						\$ 100.00	
						k. Required Remarks	
5. Total only this Page						\$ 2,063.29	
6. Total of ALL CRO-1310 Pages						\$ 13,897.79	
(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 (h) 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)							