

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.

| | |
|--|-----------------------------|
| 1. Committee Information | |
| a. Full Name JACK INGLE FOR COUNCIL | c. ID Number |
| b. Mailing Address (include City, State and Zip Code) 6840 GREENBROOK DRIVE CLEMMONS, NC 27012 | d. Date Filed 12/06/2011 |
| | e. Phone Number |

| | | | |
|------------------------|---|---|--------------------------------------|
| 2. Report Year 2011 | 3. Period Start Date (mm/dd/yy) 10/25/2011 | 4. Period End Date (mm/dd/yy) 12/06/2011 | 5. Treasurer Full Name JACK INGLE |
|------------------------|---|---|--------------------------------------|

| | | | | |
|---|---|--|---|---|
| 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"/> Party | Municipal | State/County | Referendum |
| <input type="checkbox"/> Joint Fundraiser | <input type="checkbox"/> PAC | <input type="checkbox"/> Organizational | <input type="checkbox"/> Organizational | <input type="checkbox"/> Organizational |
| <input type="checkbox"/> Referendum | <input type="checkbox"/> Legal Expense Fund | <input type="checkbox"/> Thirty-five day | <input type="checkbox"/> Quarterly | <input type="checkbox"/> Pre-referendum |
| 7. Type of Fund (if applicable, check one) | | <input type="checkbox"/> Pre-primary | <input type="checkbox"/> First | <input type="checkbox"/> Final |
| <input type="checkbox"/> "Booster Fund" | | <input type="checkbox"/> Pre-election | <input type="checkbox"/> Second | <input type="checkbox"/> Supplemental Final |
| <input type="checkbox"/> Building Fund | | <input type="checkbox"/> Pre-runoff | <input type="checkbox"/> Third | <input type="checkbox"/> Annual |
| <input type="checkbox"/> Presidential Election Year Candidates Fund | | <input type="checkbox"/> Semi-annual | <input type="checkbox"/> Fourth | <input type="checkbox"/> Special |
| <input type="checkbox"/> NC Public Campaign Financing Fund | | <input type="checkbox"/> Mid Year | <input type="checkbox"/> Semi-annual | |
| <input type="checkbox"/> Other: | | <input type="checkbox"/> Year End | <input type="checkbox"/> Mid Year | 10. Special Report Name |
| 8. Number of Fundraisers this Report | | <input checked="" type="checkbox"/> Final | <input type="checkbox"/> Year End | |
| 0 | | <input type="checkbox"/> Special | <input type="checkbox"/> Final | |
| | | | <input type="checkbox"/> Special | |

| | | | |
|---|-------------------------------------|------------------------------------|-------------------------|
| 3. Account Information | | 3. Account Information | |
| a. Financial Institution Full Name FIRST CITIZENS BANK | | a. Financial Institution Full Name | |
| b. Purpose MANAGE CAMPAIGN FINANCES | c. Account Code JIFC | b. Purpose | c. Account Code |
| | d. Period Begin Balance \$ 47.14 | | 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

JACK R Ingle Jr
Printed Name of Signer

JACK R Ingle Jr
Signature of Appointed Treasurer

12/06/2011
Date

FOR OFFICE USE ONLY

Date Received: 12/8/11
Date Postmarked: _____
Date Scanned: _____
Date Data Entered: _____

Employee: JUDY SPEAS
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 | |
| JACK INGLE FOR COUNCIL | | 2011 Final | | | |
| Start of Election Cycle: January 1, 2011 | | | Total this Reporting Period | | Total this Election Cycle |
| 4) Cash on Hand at Start | | | \$ 47.14 | | \$ 0.00 |
| RECEIPTS | | | | | |
| 5) Aggregated Contributions from Individuals (CRO-1205) | | \$ 0.00 | | \$ 0.00 | |
| 6) Contributions from Individuals (CRO-1210) | | \$ 0.00 | | \$ 1,355.00 | |
| 7) Contributions from Political Party Committees (CRO-1220) | | \$ 0.00 | | \$ 0.00 | |
| 8) Contributions from Other Political Committees (CRO-1230) | | \$ 250.00 | | \$ 250.00 | |
| 9) Loan Proceeds (CRO-1410) | | \$ 0.00 | | \$ 0.00 | |
| 10) Refunds/Reimbursements to the Committee (CRO-1240) | | \$ 0.00 | | \$ 0.00 | |
| 11) Other Receipt Sources | | | | | |
| 11a) Interest on Bank Accounts (CRO-1250) | | \$ 0.00 | | \$ 0.00 | |
| 11b) Contributions from Not-For-Profit Organizations (CRO-1250) | | \$ 0.00 | | \$ 0.00 | |
| 11c) Outside Sources of Income (CRO-1250) | | \$ 0.00 | | \$ 0.00 | |
| 11d) Legal Expense Fund - Other Sources (CRO-1270) | | \$ 0.00 | | \$ 0.00 | |
| 11e) Exempt Purchase Price Sales (CRO-1265) | | \$ 0.00 | | \$ 0.00 | |
| 12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e) | | \$ 250.00 | | \$ 1,605.00 | |
| EXPENDITURES | | | | | |
| 13) Disbursements | | | | | |
| 13a) Operating Expenditures (CRO-1310) | | \$ 261.73 | | \$ 1,569.59 | |
| 13b) Contributions to Candidates/Political Committees (CRO-1310) | | \$ 0.00 | | \$ 0.00 | |
| 13c) Coordinated Party Expenditures (CRO-1310) | | \$ 0.00 | | \$ 0.00 | |
| 14) Aggregated Non-Media Expenditures (CRO-1315) | | \$ 0.00 | | \$ 0.00 | |
| 15) Loan Repayments (CRO-1420) | | \$ 0.00 | | \$ 0.00 | |
| 16) Refunds/Reimbursements from the Committee (CRO-1320) | | \$ 35.41 | | \$ 35.41 | |
| 17) In-Kind Contributions (CRO-1510) | | \$ 0.00 | | \$ 0.00 | |
| 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) | | \$ 297.14 | | \$ 1,605.00 | |
| 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) | | \$ 0.00 | | \$ 0.00 | |
| ADDITIONAL INFORMATION | | | | | |
| 20) Non-Monetary Gifts Given to Other Committees (CRO-1330) | | \$ 0.00 | | | |
| 21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430) | | \$ 0.00 | | | |
| 22) Debts and Obligations owed by the Committee (CRO-1610) | | \$ 0.00 | | | |
| 23) Debts and Obligations owed to the Committee (CRO-1620) | | \$ 0.00 | | | |
| 24) Account Transfers Within the Committee (CRO-1720) | | \$ 0.00 | | | |
| 25) Administrative Support (CRO-1710) | | \$ 0.00 | | \$ 0.00 | |
| 26) Forgiven Loans (CRO-1440) | | \$ 0.00 | | \$ 0.00 | |
| 27) 48-Hour Notice Reports Sum (CRO-2220) | | \$ 0.00 | | \$ 0.00 | |
| 28) Contributions to be Refunded (CRO-1215) | | \$ 0.00 | | \$ 0.00 | |

Contributions from Other Political Committees Pg 1 of 1 Amendment ☐ Yes ☒ No

Use this form to report contributions from other candidate, referendum or PAC committees

| | | | | |
|--|---------------------------|---|-----------------------------|--------------------------------|
| 1. Committee Full Name (and Fund if applicable) | | | 2. ID Number | |
| JACK INGLE FOR COUNCIL | | | | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | b. Type of Committee | | d. Comments |
| NC REALTORS PAC 4511 WEYBRIDGE LANE GREENSBORO, NC 27407 | | <input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC | | check dated 10/02/2011 |
| | | <input type="checkbox"/> Referendum | | |
| | | c. Level Registered (Specify) | | e. Election Sum to Date |
| | | <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality: | | |
| | | | | \$ 250.00 |
| f. Account Code | g. Form of Payment | h. In-Kind Description | i. Date (mm/dd/yyyy) | j. Amount |
| JFPC | Check | | 10/28/2011 | \$ 250.00 |
| | | | | \$ |
| | | | | \$ |
| 4. Total only this Page | | | | \$ 250.00 |
| 5. Total of ALL CRO-1230 Pages (This line must be on line 8 of Detailed Summary Page CRO-1100) | | | | \$ 250.00 |

CRO-1230

NC State Board of Elections

April 2007

Disbursements

Amendment
Pg 1 of 1 ☐ 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 | |
| JACK INGLE FOR COUNCIL | | | | | | |
| 3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i> | | | | | | |
| <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) CLEMMONS COURIER 3600 CLEMMONS RD CLEMMONS, NC 27012 (336) 766-4126 | | | | 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 | | |
| | | | | \$ 575.88 | | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | |
| JFC | Check | A | 10/30/2011 | \$ 200.88 | CAMPAIGN AD | |
| | | | | \$ | | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) NUEXPRESSION 420-T JONESTOWN RD WINSTON-SALEM, NC 27104 | | | | 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 | | |
| | | | | \$ 60.85 | | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | |
| JFC | Check | B | 11/07/2011 | \$ 60.85 | CAMPAIGN LITERATURE | |
| | | | | \$ | | |
| 5. Total only this Page | | | | | \$ 261.73 | |
| 6. Total of ALL CRO-1310 Pages | | | | | | |
| <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i> | | | | | \$ 261.73 | |
| 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) | | | | | | |

Refunds/Reimbursements From the Committee

Pg 1 of 1

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 | |
| JACK INGLE FOR COUNCIL | | | | | |
| 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 | | g. Comments | |
| JACK R INGLE JR 6840 GREENBROOK DR CLEMMONS, NC 27012 | | <input type="checkbox"/> Candidate <input type="checkbox"/> PAC | | | |
| | | <input type="checkbox"/> Referendum <input type="checkbox"/> Party | | | |
| | | e. Level Registered (Specify) | | h. Original Receipt Date | |
| | | <input type="checkbox"/> Federal <input type="checkbox"/> County: | | 10/21/2011 | |
| | | <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | | |
| | | | | i. Original Receipt Amount | |
| | | | | \$ 850.00 | |
| b. Job Title/Profession | c. Employer's Name/Specific Field | f. Purpose Code | | j. Election Sum to Date | |
| REAL ESTATE BROKER | Real Estate | L | | \$ 1,094.59 | |
| k. Account Code | l. Form of Payment | m. Required Remarks | n. Date (mm/dd/yyyy) | o. Amount | |
| JIFC | Check | | 12/06/2011 | \$ 35.41 | |
| 4. Total only this Page | | | | \$ 35.41 | |
| 5. Total of ALL CRO-1320 Pages (This line must be on line 15 of Detailed Summary Page CRO-1100) | | | | \$ 35.41 | |
| 6. Purpose Codes (List detailed disbursement code in (f) above) | | | | | |
| L - Returned to Contributor M - Overpayment for Service N - Exceeded Contribution Limit | | | | | |
| P* - Reimbursement of In-Kim O* Other | | | | | |
| * Codes require detailed explanation in required remarks field (m) | | | | | |

CRO-1320

NC State Board of Elections

July 2007