

Amendment

☐ Yes	☐ No	
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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.

Do not use this form to update in	itorination.								
1. Committee Information			. 1.00			Lmn			
a. Full Name						c. ID Number	***		
CAMPAIGH COMM	TCQIJL								
b. Mailing Address (include City, Stat	e and Zip Code)		_		.	d. Date Filed			
						13/3/11			
						e. Phone Number			
					·	336-945-	% 33		
2. Report Year 3. Period Start	Date (mm/dd/yy)	4. Period E	nd Date	(mm/dd/yy)	5. Treasure	er Full Name	<u> </u>		
Jost or 24		Dec 3				ley A Zerge			
6. Type of Committee (Check C					type of repo	ort from one categ	ory)		
Candidate Campaign Part	· —	nicipal		State/County		Referendum			
	erendum 🔲	Organizationa	1	Organizati	ional	Organizational Pro referendum			
	t Fundraiser	Thirty-five day	^у [,	Quarterly		Pre-referendum			
Legal Expense Fund	ᄖ	Pre-primary	li	First	_ i	Final			
BT B C C C C C C C C C C	<u>, </u>	Pre-election Pre-runoff	l:	Secon		Supplemental Final Annual			
7. Type of Fund (if applicable, Booster Fund	cneck one)	Semi-annual		Four		Special			
Building Fund	l _m	Mid Yea	, l'	Semi-anni		C openia			
Dunung Pund	吊	Year End	" 1.	☐ Mid		10. Special Report Name			
Other:	iii	Final		Year					
8. Number of Fundraisers this		Special	ļ	Final					
01.111111111111111111111111111111111111		•	li	Special					
11 Account Information			11 Acc	ount Inform	nation	<u> </u>			
11. Account Information a. Financial Institution Full Name	·	·		ial Institution			~		
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BB+T						<u>_</u>			
b. Purpose	c. Account Code		b. Purpos	se		c. Account Code			
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- ' '	d. Period Begin Ba	alance				d. Period Begin Bal:	ange-		
				\$ F1	9				
CERTIFICATION	\$ 115.37	_				 			
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.									
report is complete, true and correc	t and that I have be	een tramed by	me NC 3	itale board of	Elections.				
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Printed Name of Sign	er	Sign	nature of A	Appointed Treas	Surer	Date			
FOR OFFICE USE ONLY				<u> </u>					
	lahon	_		TID. C	Del	livery Method			
Date Received:	7/2012	Employ	уее: <u>с</u>	May 32		Normal Mail			
Date Postmarked:		Employ	yee: _	<u> </u>	- 블	Registered Mail Hand Delivered			
Date Scanned:		Employ	yee: _		_ 🗆	Electronically Fil			
Date Data Entered:		Employ	yee: _			Signer has not re- 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.									

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 Elect Jalt 6 (Awayin (mm. Her TC & 13L Total this Total this Start of Election Cycle: January 1. Reporting Period **Election Cycle** 4) Cash on Hand at Start \$ 118 87 \$ RECEIPTS 5) Aggregated Contributions from Individuals (CRO-1205) \$ 6) Contributions from Individuals (CRO-1210) \$ 278 38 \$ -7K-38 7) Contributions from Political Party Committees (CRO-1220) 2133.38 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) 27d. 36 **EXPENDITURES** 13) Disbursements 13a) Operating Expenditures (CRO-1310) **ʒ**g1。2≲ 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) \$ 5.00 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) 397.*05* \$ 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) 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) \$

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Use t	his form to report	individual contribut	ions over \$50 or	contributions ur	nder \$5	0 if f	orm C	RO	1205 is not used
1, Co	mmittee Full Na	me (and Fund if ap	plicable)					2.	ID Number
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	ntributor Inforn			Add 🔲 R	emove		1 1		
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	ude city, state, & zip			- Builder	_				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
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		f Detailed Summary Pag	e CRO-1100)	, s. g. L. X				\$ [)7k.Z€

Amendment

Disbursen	nents				Pg	of		Amendment Yes No
Use this form to	o report expenditures	from the commit	tee for o	operating ex	nenses		ions to c	
committees and	coordinated party e	xpenditures		pordung on	ролосо,	COMMICAL	ions to c	andidate/pontical
	Full Name (and Fur				2 2 2		2.]	D Number
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3. Type of Dist	oursement (Pleas	e use separate Cl	<i>(0-131)</i>	forms for a	each typ	e of Dish	urseme	nt.)
Operating Exp		ntributions to Candid						arty Expenditures
4. Payee Inform	mation			Add 🔲	Remov	e e		
a. Full Name, M	Mailing Address & Pl	ione		b. Coordinat	ed Comn	uittee Name	d. C	Comments
(include city, state	, & zip)							
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020 60	server st.			c. Level Regi	stered (S	peoify)		
-		2-1	. ~	☐ Federal	<u> </u>	County:		
water	- Salem, NC	27101-50	۲ /	☐ State		Municipa	lity: e. E	lection Sum to Date
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f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amou	nt	k. Requir	ed Remarks
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4 D T C	<u> </u>				Φ.			
4. Payee Inform			<u>. 및</u>	Add 🔲	Remov			
a. Full Name, Mail (include city, stat	ing Address & Phone te. & zin)			b. Coordinate	ed Comm	ittee Name	d. C	omments
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5. Total only thi		<u> </u>		11.0		· ·	\$	
	CRO-1310 Pages	Contract to the second					ĺ	
(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* - Printin	~		ndraising		D - To A		
E - Salaries	F* - Equipn			tical Party				blic Office Expenses
- Postage	J - Penaltie	s I	K* - Of	fice Expens	es	Q* - Doı	ation to	Legal Expense Fund
O* Other	14.01 7		_	ne 3 3 2" \				
 Codes require 	detailed explanation	<u>on in required re</u>	<u>marks i</u>	field (k)				