Disclosure Repo	_ <u></u>	Yes No					
Do not use this form to							
1. Committee Inform							
a. Fuli Name				c. ID	Number		
BOB PRESCOTT FO	R FORSYTH COUNTY	COMMISSIONER			1CQ276		
b. Mailing Address (includ	e City, State and Zip Code)			d. Da	ite Filed		
5708 Brightington Ct Kernersville, NC 2728	34				05/22/2012		
1 Action of the same				e. Pb	one Number		
					336-408-3574		
2. Report Year 3	. Period Start Date (mm/d	d/yy) 4. Period l (mm/dd/yy)	3.	Treasurer Full Name			
2012	02/07/2012	02/1	.8/2012	m E. Ingram			
6. Type of Committee	(Check One)	9. Type of Report		ne type of report from c			
Candidate Campaig	n Party	Municipal	State/County	<u>'</u>	rendum		
☐ PAC	Referendum	Organizational	Organ	nizational	Organizational		
Independent Expenditure Legal Expense Fund	Joint Fundraiser	Thirty-five day	y Quarte	erly	Pre-referendum		
	(if applicable, check one)	Pre-primary		First	Final		
"Booster Fund"		Pre-election		Second	Supplemental Final		
Building Fund		Pre-runoff	🔲 '	Third	Annual		
		Semi-annual	-	Fourth	Special		
		Mid Year	·	-annual	O NATIONAL MARKS		
Other:		Year End			Special Report Name		
·		Final	<u> </u>	Year End			
8. Number of Fundra	isers this Report	Special	Final				
			Specia		20 2		
11. Account Informat	tion		11. Account Infor				
a. Financial Institution Fu	ll Name		a. Financial Institutio	on Full Name			
BB&T		<u> </u>			Account Code		
b. Purpose	c. Account Code		b. Purpose	C			
Campaign Rep	BB	T					
1			-	a	Period Begin Balance		
	d. Period Begin Balance	e	1	<u> </u>			
	\$ 0.00			\$.	,		
CERTIFICATION					0.51		
I certify that the Comp	nittee or Fund is in compli	iance with all applica	able provisions of A	rticle 22A, 22B, & 22	D-22M of Chapter 163 of		
the NC General Statute	es and that no funds are co	mmingled with profi	libited or other non-	disclosed funds. I furt	her certify that this report		
is complete, true and c	orrect and that I have been	i trained by the NC	State Board of Electi	JOHS.	05/21/2012		
JIM E	Printed Name of Signer		ignature of Appointed Tr	regurer	Date		
FOR OFFICE USE ON			-Bracero or a appointed 11	<i>y</i>			
Date Received:	5/22/12	Employee:	Judys	<u>sea</u> s	<u>ery Method</u> Normal Mail		
Date Postmarked:		Employee:		<u> </u>	Registered Mail Hand Delivered		
Date Scanned:		Employee:			Electronically Filed Signer has not received		
Date Data Entered: Emplo					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.

Amendment Yes No

Detailed SummaryUse 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	
BOB PRESCOTT FOR FORSYTH COOUNTY COMMISSIONER	Organizational		1CQ276	
Start of Election Cycle: January 1,	2009	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start		\$ 0.00	\$ 0.00	
RECEIPTS				
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$	
6) Contributions from Individuals	(CRO-1210)	\$ 2,850.00	\$ 2,850.00	
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$	
8) Contributions from Other Political Committees	(CRO-1230)	\$ 45.52	\$ 45.52	
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 Organizati	ons (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, 11	c, 11d and 11e)	\$ 2,895.52	\$ 2,895.52	
EXPENDITURES				
13) Disbursements				
13a) Operating Expenditures	(CRO-1310)	\$	\$	
13b) Contributions to Candidates/Political Commit		\$	\$	
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)	\$	\$	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1.	5, 16 and 17)	\$ 0.00	\$ 0.00	
19) Cash on Hand at End (Add lines 4 and 12 together, then sub.		\$ 2,895.52	\$ 2,895.52	
ADDITIONAL INFORMATION				
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$		
21) Outstanding Loans (incl. ones from other campaign	is) <i>(CRO-1430)</i>	\$		
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 to be Keranded	(CAO-1213)	Ψ		

		m Individuals	0312r \$5	Pg 0 or contributions und	1 of		,	ent 'es N
		(and Fund if applica		o or contributions and	er \$30 H IOIH CN	2. ID Nu		
	•	ORSYTH COUNTY (·	<u> Profitation de la Profita</u>	2.10.10	1CQ276	5
3. Conti	ributor Informati	On.		Add 🛛 Re	move			
	me, Mailing Address		<u> </u>	b. Job Title/Profession		d. Commer	nts	<u>, et la 1860 a 1860</u>
1	e city, state, & zip)			Captain				
Bob Pre				T				
5708 Br	ightington Court			c. Employer's Name/Sp	ecific Field	_		
Kerners	ville, NC 27284			US Airways				
						e. Election	Sum to Date	
						\$	196.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/y	ууу)	k. Amou	nt
	BBT	Check	Filir	ng Fee	02/18/2	2012	\$	196.00
							\$	
							\$	
	ibutor Informatio				nove			
	me, Mailing Address	& Phone		b. Job Title/Profession	d. Commen	its		
	city, state, & zip)			Acct Exec				
Karen Fi				- 10111010101010		-		
	tern Villa			c. Employer's Name/Sp WFUB Hospital	-			
Ciemino	ns, NC 27012			Winston Salem	e. Election Sum to Date			
		•		Window Suloni		\$	1,000.00)
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Description	j. Date (mm/dd/yy	ууу)	k. Amour	nt .
	BBT	Check			02/18/2	012	\$	1,000.00
							\$	
							\$	
3. Contr	ibutor Informatio	on .		Add 🛭 Ren	nove		erin di Ling. Nggara ay	
a. Fuli Nai	ne, Mailing Address d	& Phone	•	b. Job Title/Profession		d. Commen	ts	
	city, state, & zip)	· · · · · · · · · · · · · · · · · · ·		│ VP				
Bob Reid						ļ		
954 George Place Dr			c. Employer's Name/Specific Field Fidelity Bank Kernersville NC		-			
Kernersville, NC					e. Election Sum to Date			
				Keineisville NC			 	
					,,	\$	500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	and Description	j. Date (mm/dd/yy	уу)	k. Amoun	t
	BBT	Check			02/18/20	012	\$	500.00
							\$	
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4. Total only this Page

5. Total of ALL CRO-1210 Pages

(This line must be on line 6 of Detailed Summary Page CRO-1100)

2,850.00

0.00

Use this	form to report ind	m Individuals		Pg O or contributions und		O 1205 is r			
1. Com	nittee Full Name	(and Fund if applica	ble)			2. ID Nu	mber	<u> </u>	
BOB PR	ESCOTT FOR FO	ORSYTH COUNTY C	OMMI	SSIONER		ļ. <u></u>	1CQ276		
	ibutor Informati			, 	move				
	me, Mailing Address city, state, & zip)	& Phone		b. Job Title/Profession Retired	1	d. Comme	nts		
Peggy N				Remed		}			
1791 Sh				c. Employer's Name/S	pecific Field	<u> </u>			
Kernersville, NC 27284						771			
1							Sum to Date		
:						\$	1,000.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Description	j. Date (mm/dd/y)	ууу)	k. Amount		
	BBT	CHECK			02/07/2	012	\$	1,000.00	
							\$		
							\$		
3. Contr	ibutor Informati	o n	\boxtimes	Add 🗌 Re	move				
	ne, Mailing Address	& Phone		b. Job Title/Profession		d. Commen	ıts		
(include Karen Fr	city, state, & zip)			Account Executive	•				
109 Western Villa Dr. Clemmons, NC 27012				c. Employer's Name/Sp	-				
Cicinno	B, 110 27012			WFUB Hospital	-				
							e. Election Sum to Date		
						\$	100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/yy	YY)	k. Amount		
	BBT	CHECK			02/07/2		\$	100.00	
					·	·	\$		
							\$		
	butor Informatio				nove				
	ne, Mailing Address &	& Phone		b. Job Title/Profession		d. Commen	ts		
Allan Ash	city, state, & zip)			Photographer					
6416 Lam				c. Employer's Name/Sp	ecific Field				
Kernersvi	lle, NC 27284			Self-Employed					
						e. Election S	Sum to Date		
						\$	100.00		
f. Prior	g. Account Code	b. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/yy	yy)	k. Amount		
	BBT	CHECK			02/07/20)12	\$	100.00	
							\$		
							\$		
	only this Page					\$		1,200.00	
5. Total	of ALL CRO-	-1210 Pages				\$		2,850.00	

(This line must be on line 6 of Detailed Summary Page CRO-1100)

		m Individuals lividual contributions	over \$5		Pg <u>3</u> of nder \$50 if form CI		Amendme Ye not used	_
1. Com	mittee Full Name	(and Fund if applica	ble)			2. ID No	ımber	
BOB PR	RESCOTT FOR FO	ORSYTH COUNTY	COMM	ISSIONER			1CQ276	-
3. Conti	ributor Informati	on		Add 🗌 R	Remove			
a. Full Na	me, Mailing Address	& Phone		b. Job Title/Profession	on	d. Comme	ents	
(include	e city, state, & zip)			Vice President				
Susan A						_		
	445 Bent Creek Trail			c. Employer's Name	 	4		
Kernersville, NC 27284			High Point Bank		e. Election Sum to Date			
						\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
	BBT	CHECK			02/07/2	2012	\$	100.00
						· .	\$	
							\$	
	ibutor Informati			Add 🗌 R	emove			
	me, Mailing Address	& Phone		b. Job Title/Profession	on .	d. Comme	nts	
	city, state, & zip)			President				
Duane L	ong I Coach Rd.			a Employeeta Nome	-			
	rille, NC 27284			c. Employer's Name/ Long Insurance C	-			
IXCI HCI SV	ine, NC 27204			Long insurance Co.		e. Election Sum to Date		
						\$	150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
	BBT	CHECK	ļ		02/10/2	.012	\$	150.00
							\$	
							\$	
3. Contri	ibutor Informatio	on the second second	['] 🗵	Add R	emove			11.00
	ne, Mailing Address &			b. Job Title/Professio	n	d. Commer	ıts	<u>. . 14 14 941</u>
(include	city, state, & zip)			Owner				
Craig Sm								
931-B S.				c. Employer's Name/S	Specific Field			
Kernersv	ille, NC 27284			Smitty's Grill				
						e. Election	Sum to Date	
						\$	500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/yy	уу)	k. Amount	
	BBT	CHECK			02/17/2	012	\$	500.00
							\$	
		<u> </u>				,	\$	
4. Total	only this Page		<u> </u>			\$		750.00

5. Total of ALL CRO-1210 Pages

(This line must be on line 6 of Detailed Summary Page CRO-1100)

2,850.00

\$

		m Individuals lividual contributions	over \$5		Pg <u>4</u> 01		Amendme Ye not used	
		(and Fund if applica				2. ID Nu		
BOB PR	ESCOTT FOR F	ORSYTH COUNTY	COMM				1CQ276	
3. Conti	ributor Informat	ion	\boxtimes	Add 🔲 I	Remove		5 (A)	
a. Full Na	me, Mailing Address	& Phone		b. Job Title/Profess	ion	d. Comme		
(include	e city, state, & zip)			Contractor				
Keith Be	ender							
	yton Park			c. Employer's Name	e/Specific Field	_		
Kernersville, NC 27284			Self-Employed					
						e. Election	Sum to Date	
						\$	500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/y	ууу)	k. Amoun	t
	BBT	CHECK			02/14/2	2012	\$	500.00
							\$	
							\$	
3. Contr	ibutor Informati	on		Add 🗌 F	Remove			
a. Fuli Na	ne, Mailing Address	& Phone		b. Job Title/Professi	on	d. Commer	nts	
	city, state, & zip)			Retired				
Ann Bart						_		
_	wood Trail			c. Employer's Name	/Specific Field			
Kernersv	ille, NC 27284					a Florier	Sum to Date	
								<u></u>
				ł.		\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
	BBT	CHECK			02/23/2	2012	\$	100.00
							\$	
							\$	
3. Contri	butor Informatio	on		Add 🔲 R	emove			
	ne, Mailing Address	& Phone		b. Job Title/Profession	on .	d. Commen	its	
	city, state, & zip)	·		Captain			·	
Bob Prese								
	ghtington Ct			c. Employer's Name/	Specific Field	4		
Kernersvi	ille, NC 27284			US Airways		e. Election Sum to Date		
		•				\$	300.00	
f. Prior	g. Account Code	h. Form of Payment	i, In-K	and Description	j. Date (mm/dd/yy		k. Amount	
	ВВТ	CHECK			02/13/2		\$	300.00
							\$	
							\$	
4. Total	only this Page	<u> </u> e	<u>l.</u>		A Super Super	\$		900.00
	of ALL CRO							-

2,850.00

	ons from Other Politica			~ -	1	Amendment Yes	Νo
1. Committee F	ull Name (and Fund if applicab	le)			2. ID	Number	14,1
	TT FOR FORSYTH COUNTY C		ONER			1CQ276	
3. Contributor	Information ng Address & Phone	×		emove	Lace		7
(include city, stat	- -	ERMAN	b. Type of Committee Candidate Referendum c. Level Registered (Speci	ify) County: Municipality:		tion Sum to Date	
f. Account Code	g. Form of Payment	h. In-Kin	nd Description	i. Date (mm/dd/yyyy	·)	j. Amount	
BBT	AccountTransfer			02/13/2012		\$ 45.52	
						\$	_
						\$	
3. Contributor I		<u> </u>		emove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Type of Committee Candidate Referendum c. Level Registered (Specif	PAC (y) County:	d. Com	nments	
			State	Municipality:	e. Elect	tion Sum to Date	_
f. Account Code	g. Form of Payment	h. In-Kin	d Description	i. Date (mm/dd/yyyy)		j. Amount	_
						\$	
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3. Contributor I				emove	<u> </u>		· .
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Type of Committee Candidate Referendum	PAC	d. Com	ments	
			c. Level Registered (Specify Federal State	County: Municipality:	e. Electi	ion Sum to Date	_
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			······································			\$	
	· · · · · · · · · · · · · · · · · · ·			<u>-</u>		\$	
						\$	
l. Total only this	Page				\$	45.52	

5. Total of ALL CRO-1230 Pages

(This line must be on line 8 of Detailed Summary Page CRO-1100)

\$

45.52