Disclosure Report Cover

1	Am	endment
Ų		Yes

⊠ N

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 undate information

1. Committee Informa	***************************************				
a. Full Name					c ID Number
Elect Donald Dunn				1	3CQHOI
h. Mailing Address (include					d. Date Filed
1330 Waughtown Steel Winston-Salem	t			!	3/5/14
NC 27107				!	e. Phone Number
		•			336 345 6494
2. Report Year 3.	Period Start Date (mm/d	dd/yy) 4. Period (mm/dd/yy	l End Date	5. Treasurer Full !	Name
2014	1/1/2014		3/10/14	William A. Pass	
6. Type of Committee (9. Type of Repor		ly one type of report f	Acom and restaurables
Candidate Campaign	Party	Municipal	State/C	ounty	Referendum
PAC Independent	Referendum	Organizations		Organizational	Organizational
Expenditure Logal Expense Fund	Joint Fundraiser	Thirty-five da	ay (Quarterly	Pre-referendum
7. Type of Fund ##	f applicable; check ane)	Pre-primary		First	Final
"Booster Fund" Building Fund	1	Pre-election Pre-runoff		Second Third	Supplemental Final
<u>~~~~~</u>	!	Semi-annual		Fourth	Annual Special
Other:	Į.	Mid Year End	· 1 ~	Semi-annual Mid Year	10, Special Report Name
		Final		Year End	319. эрвэм жерог жанс
8. Number of Fundrais	ers this Report	Special Special	=	Final	
0 IL Account Informatio	on.		LI. Account I	Special Information	
a. Financial Institution Full N			a. Financial Insti	tution Full Name	
First Citizens Bank h. Purpose	s. Account Code		N/A b. Purpose		c. Account Code
Campaign	1		n cm to		c. Account Code
account for Receipts and	d. Period Begin Balance		a a		
Expenditures					d. Period Begin Balance
_	\$ 200.00				\$ 2
CERTIFICATION I certify that the Committee	tee or Fund is in compli	once with all applic	ahla provisions o	-FAinia 22A 22B &	₹1 & 22D-22M/of Chapter 163 of
the NC General Statutes a	and that no funds are con	mmingled with proh	hibited or other n	on-disclosed funds. I	£ 22D-22M/of Chapter 163 of further certify that this report
is complete, true and corr William A. Pass	rect and that I have been	trained by the NC S	State Board of El	lections.	
Pri	rinted Name of Signer	- 8	ignature of Appointe		/21/2014 Date
FOR OFFICE USE ONLY	whilen		1,	ZZ Di	elivery Method
Date Received	- dest con	Employee:	11000		Normal Mail
Date Postmarked:		Employee:	/		Registered Mail Hand Delivered
Date Scanned:		Employee:			Electronically Filed
Date Data Entered:				Ш	Signer has not received mandatory training
Pale Pala Entereu.		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.

Contributions from Individuals Use this form to report individual contributions over \$5	Pg (O or contributions under	_1 of or \$50 if form CRC	1 1205 is not	L Yes	⊠ No
1. Committee Pull Name (and Fund if applicable)	O OI COMBIDGOIS GARAC	1 950 ii Ioini Cac	2. ID Num		
Elect Donald Dunn				3СQНОІ	
3. Contributor Information a. Full Name, Mailing Address & Phone (include city, state, & zip) Donald Dunn 8580 Brook Meadow Ct Lewisville, NC 27023	Add Rem b. Job Title/Profession Sales person c. Employer's Name/Spe Pharma		d Comments Candidate	***************************************	
Living 110 21022		ļ	e, Election Su	m to Date	
			\$	200.00	
f. Prior g. Account Code h. Form of Payment l. In-	Kind Description	j. Date (mm/dd/yy)		k Amount	
Money orde		2/28/20	14	\$	200.00
				\$	
				\$	
3. Contributor Information	Add 🔲 Rem	love			
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession		d. Comments		

	c. Employer's Name/Spe	cific Field			
			e. Election Su	m to Date	
			\$	-	
L Prior g. Account Code h. Form of Payment [. In-	Kind Description]. Date (mm/dd/yy)	(7)	k. Amount	
				\$	
				\$	
	!			\$	
3. Contributor Information	Add Rem	iove	d. Comments		
a. Full Name, Mailing Address & Phone (Include city, state, & zip)	b, Job Title/Profession		U.C. Olimenia		
	c, Employer's Name/Spe	seine Rield			
	t. Ediphoyer Stramas	CHR PICIA			
	}		e. Election Su	m to Date	
- V		1	\$	ı	
f. Prior g. Account Code L. Form of Payment U.In-l	Kind Description	j, Date (mm/dd/yy)	(Y)	k Amount	
				\$	
				\$	
				\$	
4. Total only this Page			\$		200,00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-110)	er.		\$		200.00
	##	.00000000000000000000000000000000000000			

Amendment

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 3CQHOI
Elect Sonald Du	******************	se use separate C	.Ye 86			on of Dishurson		200101
3. Type of Diabe Operating E		Contributions to Can	_					d Party Expenditures
4. Payee Inform		V	Add			Remove		
*******************************	ng Address & Phone			oordinated Comm	nttee Na		d. Co	mments
(include city, state,			***************************************	<u> </u>	The Control of the Control			
Forsyth County								
201 N. Chestnut	Steet		c. L	evel Registered (S	pecify)			
Winston-Salem,	NC 27107			Federal	\boxtimes	County:	*************	· .
			<u>Ц</u>	State		Municipality:	e. Ele	ction Sum to Date
							\$ 9	99.00
f. Account Code	g. Form of Payment	h. Purpose Code	ı	Date (mm/dd/yy	yy)	j. Amount	k Re	quired Remarks
	Money Order	K		2/28/2014		\$99.00	File	fee
			+	<u>.</u>				
						\$		
4. Payer Inform		<u> </u>	Ado			Remove		
	ng Address & Phone		b.C	oordinated Comm	nittee Na	me	d. Co	nunents
(include city, state,	& zip)							
				evel Registered (S	ia			
				Federal	pecaty)	County:		
			Ħ	State	Ħ	Municipality:	e Ele	ction Sum to Date
			<u> </u>					
			nence ntone		**************************************		\$	
£ Account Code	g. Form of Payment	h. Purpose Code	L	. Date (mm/dd/yy	yy)	j. Amount	k. Re	quired Remarks
,						\$		
		1 1/4/				\$		
			Adi	4		Remove		
4. Payce Inform	atrui ng Address & Phone	ш	********	e oordinated Comm	nittee Na		d Co	nments
(include city, state,			*********				***********	
			c. Le	evel Registered (S	pecify)			
				Federal		County:		
			Ц	State	Ц.	Municipality:	e, Ele	ction Sum to Date
							\$	
f. Account Code	g. Form of Payment	h. Purpose Code	ı	Date (mm/dd/yy	ry)	j. Amount	k. Rec	puired Remarks
						\$		
				 				
						: \$		
5. Total only thi							\$	99.00
6. Total of ALL CRO-1310 Pages								
(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)					\$	99.00		
•	line 13b of Detailed Sum line 13c of Detailed Sum		-					
	s (List detailed ext					/		
A* - Media	B* - Printing	C* - Fund				D - To Anothe	r Cand	idate
E - Salaries	F*-Equipment	G - Politic	ıl Par	ty		H*-Holding	Public	Office Expenses
I - Postage	J - Penalties	K* - Offic	Exp	ienses		Q* - Donation	to Le	gal Expense Fund
O' - Other	. detailed eculonati			u eda an				

Amendment Yes No

Detailed SummaryUse this form to summarize all disclosure reporting forms and to total monetary information.

Committee Full Name (and Fund if applicable) Elect Donald Dunn	2. Type of Report	0.000000000000000000000000000000000000	3. ID Number 3CQHOI
Start of Election Cycle: January 1,	2013	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 0	\$ 0
RECEIFIS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$ 200.00	\$ 200.00
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 Organization		\$	\$
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, 11c	c, 11d and 11e)	\$ 200.00	\$ 200.00
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 9900	\$ 99.00
13b) Contributions to Candidates/Political Commit	tees (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)	\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 13		\$ 99.00	\$ 99.00
19) Cash on Hand at End (Add lines 4 and 12 together, then subt		\$ 101.00	\$ 101,00
ADDITIONAL INFORMATION			,
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaign	s) <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)	\$	
	(CRO-1710)	\$	\$
25) Administrative Support	`		
26) Forgiven Loans	(CRO-1440)	\$	\$
27) 48-Hour Notice Reports Sum	(CRO-2200)	S	\$
28) Contributions to be Refunded	(CRO-1215)	\$	\$