

Disclosure Report Cover

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			c. ID Number	
DAN BESSE COMMITTEE			000-9C08C4-0-000	
b. Mailing Address (include City, State and Zip Code)			d. Date Filed	
PO BOX 15306 WINSTON-SALEM, NC 27113			01/24/2018	
			e. Phone Number	
			(336) 687-0193	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name	
2017	07/01/2017	12/31/2017	JACK H CAMPBELL JR	
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 <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund		Municipal State/County Referendum <input type="checkbox"/> Organizational <input type="checkbox"/> Organizational <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Quarterly <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Pre-primary <input type="checkbox"/> First <input type="checkbox"/> Final <input type="checkbox"/> Pre-election <input type="checkbox"/> Second <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Third <input type="checkbox"/> Annual <input type="checkbox"/> Semi-annual <input type="checkbox"/> Fourth <input type="checkbox"/> Special <input type="checkbox"/> Mid Year <input type="checkbox"/> Semi-annual <input checked="" type="checkbox"/> Year End <input type="checkbox"/> Mid Year <input type="checkbox"/> Final <input type="checkbox"/> Year End <input type="checkbox"/> Special <input type="checkbox"/> Final <input type="checkbox"/> <input type="checkbox"/> Special		
7. Type of Fund (if applicable, check one)		10. Special Report Name		
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:				
8. Number of Fundraisers this Report				
0				
3. Account Information		3. Account Information		
a. Financial Institution Full Name		a. Financial Institution Full Name		
FIRST NATIONAL BANK				
b. Purpose	c. Account Code	b. Purpose	c. Account Code	
GENERAL CAMPAIGN PURPOSES	NB-1			
	d. Period Begin Balance		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				
<u>JACK H. CAMPBELL JR.</u> Printed Name of Signer		<u>[Signature]</u> Signature of Appointed Treasurer		01/24/2018 Date
FOR OFFICE USE ONLY				
Date Received:	<u>1/29/18</u>	Employee:	<u>[Signature]</u>	
Date Postmarked:	_____	Employee:	_____	
Date Scanned:	_____	Employee:	_____	
Date Data Entered:	_____	Employee:	_____	
Delivery Method <input type="checkbox"/> Normal Mail <input checked="" type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> 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

Use this form to summarize all disclosure reporting forms and to total monetary information

Amendment

☐ Yes ☒ No

1. Committee Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
DAN BESSE COMMITTEE		2017 Year End Semi-Annual		000-9C08C4-0-000	
Start of Election Cycle: January 1, 2017		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 22,800.98		\$ 22,800.98	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 3.84		\$ 7.61	
6) Contributions from Individuals (CRO-1210)		\$ 246.00		\$ 246.00	
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00		\$ 0.00	
8) Contributions from Other Political Committees (CRO-1230)		\$ 0.00		\$ 0.00	
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)		\$ 249.84		\$ 253.61	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 0.00		\$ 0.00	
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)		\$ 100.00		\$ 100.00	
17) In-Kind Contributions (CRO-1510)		\$ 249.84		\$ 253.61	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 349.84		\$ 353.61	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 22,700.98		\$ 22,700.98	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0.00			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 8,000.00			
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	

Aggregated Contributions from IndividualsPage 1 of 1

Amendment

☐ Yes ☒ No

Optional form used to report NC Contributions From Individuals of \$50 or less

1. Committee Full Name (and Fund if applicable)				2. ID Number	
DAN BESSE COMMITTEE				000-9C08C4-0-000	
3. Contributor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/> Add		In-Kind	POSTAGE	07/28/2017	\$ 3.84
<input type="checkbox"/> Remove					
4. Total only this Page				\$	\$3.84
5. Total of ALL CRO-1205 Pages				\$	\$3.84
(This line must be on line 5 of Detailed Summary Page CRO-1100)					

CRO-1205

NC State Board of Elections

April 2007

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	
DAN BESSE COMMITTEE				000-9C08C4-0-000	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments
KEITH STONE 294 WEST END BLVD WINSTON-SALEM, NC 27101			SR DEVELOPER		
			c. Employer's Name/Specific Field		e. Election Sum to Date
			97 DISPLAY SOFTWARE		
					\$ 246.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		In-Kind	WEBSITE SERVICES	12/15/2017	\$ 246.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 246.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 246.00

CRO-1210

NC State Board of Elections

April 2007

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	
DAN BESSE COMMITTEE			000-9C08C4-0-000	
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
TRENT HARMON 4896 HAMPTON RD 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: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		05/18/2015
				i. Original Receipt Amount
				\$ 100.00
b. Job Title/Profession	c. Employer's Name/Specific Field	f. Purpose Code		j. Election Sum to Date
STUDENT	UNCG	O		\$ 0.00
k. Account Code	l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount
NB-1	Draft	WRITE OFF RETURNED CHECK	07/01/2017	\$ 100.00
4. Total only this Page				\$ 100.00
5. Total of ALL CRO-1320 Pages (This line must be on line 15 of Detailed Summary Page CRO-1100)				\$ 100.00
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-Kind O* Other				
* Codes require detailed explanation in required remarks field (m)				

CRO-1320

NC State Board of Elections

July 2007

In-Kind Contributions

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Amendment

☐ Yes ☒ No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.

Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
DAN BESSE COMMITTEE		000-9C08C4-0-000	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments	
Aggregated Individual Contribution	<input checked="" type="checkbox"/> Individual		
	<input type="checkbox"/> Candidate		
	<input type="checkbox"/> Party		
	<input type="checkbox"/> PAC		
	<input type="checkbox"/> Referendum	d. Election Sum to Date	
	<input type="checkbox"/> Other Receipt Source	\$ 7.61	
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount	
POSTAGE	07/28/2017	\$ 3.84	
		\$	
		\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments	
KEITH STONE 294 WEST END BLVD WINSTON-SALEM, NC 27101	<input checked="" type="checkbox"/> Individual		
	<input type="checkbox"/> Candidate		
	<input type="checkbox"/> Party		
	<input type="checkbox"/> PAC		
	<input type="checkbox"/> Referendum	d. Election Sum to Date	
	<input type="checkbox"/> Other Receipt Source	\$ 246.00	
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount	
WEBSITE SERVICES	12/15/2017	\$ 246.00	
		\$	
		\$	
4. Total only this Page		\$ 249.84	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 249.84	

Outstanding Loans

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Amendment

☐ Yes ☒ No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
DAN BESSE COMMITTEE		000-9C08C4-0-000	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
DAN BESSE PO BOX 15306 WINSTON-SALEM, NC 27113 (336) 760-4678		ATTORNEY	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		SELF EMPLOYED	06/28/2013
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
0.00%	NONE	\$ 8,000.00	\$ 8,000.00
k. Full Name of Lending Institution			l. Loan Number
4. Total only this Page			\$ 8,000.00
5. Total of ALL CRO-1430 Pages (This line must be on line 21 of Detailed Summary Page CRO-1100)			\$ 8,000.00

CRO-1430

NC State Board of Elections

December 2007