

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 <i>Committee to Elect Fred Foster</i>			c. ID Number <i>42-3749026</i>	
b. Mailing Address (include City, State and Zip Code) <i>P.O. Box 15752 Durham, NC 27704</i>			d. Date Filed	
			e. Phone Number <i>(919) 479-8305</i>	
2. Report Year <i>2015</i>	3. Period Start Date (mm/dd/yy) <i>1/1/2015</i>	4. Period End Date (mm/dd/yy) <i>6/30/2015</i>	5. Treasurer Full Name <i>Jerry Head Sr.</i>	
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"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser		Municipal <input checked="" type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input checked="" type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special		
7. Type of Fund (if applicable, check one)		State/County		
<input type="checkbox"/> Booster Fund <input type="checkbox"/> Building Fund <input type="checkbox"/> Other		<input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input checked="" type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special		
8. Number of Fundraisers this Report		10. Special Report Name IN PERSON		
11. Account Information		11. Account Information		
a. Financial Institution Full Name <i>Branch Bank & Trust</i>		a. Financial Institution Full Name <i>JUL 10 2015</i>		
b. Purpose <i>Campaign Funds</i>		b. Purpose <i>DURHAM BO</i>		
c. Account Code		c. Account Code		
d. Period Begin Balance <i>\$141.72</i>		d. Period Begin Balance <i>\$</i>		
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 of Elections.				
<i>Jerry Head Sr.</i> Printed Name of Signer		<i>[Signature]</i> Signature of Appointed Treasurer		<i>7-10-15</i> Date
FOR OFFICE USE ONLY				
Date Received:	<i>7/10/2015</i>	Employee:	<i>MDJ</i>	Delivery Method
Date Postmarked:	_____	Employee:	_____	<input type="checkbox"/> Normal Mail
Date Scanned:	_____	Employee:	_____	<input type="checkbox"/> Registered Mail
Date Data Entered:	_____	Employee:	_____	<input checked="" 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

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	
Committee to elect Fred Foster				42-3749026	
Start of Election Cycle: January 1, 2012		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 1141.72		\$ 100.00	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$		\$	2798.00
6) Contributions from Individuals (CRO-1210)		\$	1250.00	\$	790.00
7) Contributions from Political Party Committees (CRO-1220)		\$	-	\$	500.00
8) Contributions from Other Political Committees (CRO-1230)		\$	-	\$	1900.00
9) Loan Proceeds (CRO-1410)		\$	-	\$	100.00
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$	-	\$	375.00
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)		\$	0.18	\$.28
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)		\$	1850.18	\$	14574.28
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$	65.00	\$	11447.38
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$	-	\$	200.00
13c) Coordinated Party Expenditures (CRO-1310)		\$		\$	
14) Aggregated Non-Media Expenditures (CRO-1315)		\$		\$	
15) Loan Repayments (CRO-1420)		\$		\$	100.00
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$		\$	
17) In-Kind Contributions (CRO-1510)		\$		\$	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$	65.00	\$	11747.38
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$	2926.90	\$	2926.90
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)		\$		\$	

Contributions from Individuals

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) <i>Committee to elect Fred Luster</i>						2. ID Number <i>43-3749026</i>	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Robert Dillard Teer Sr. P.O. Box 13508 Research Triangle Park, NC 27709</i>				b. Job Title/Profession <i>President CEO</i>		d. Comments	
				c. Employer's Name/Specific Field <i>Ivello Teer Construction Co.</i>		e. Election Sum to Date \$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		<i>check</i>		<i>2-13-2013</i>	\$ <i>1,000.00</i>		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
IN PERSON							
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>John Thomas Hunt 1115 Donoghil Rd Durham, NC 27712</i>				b. Job Title/Profession <i>Retired</i>		d. Comments <i>JUL 10 2013</i>	
				c. Employer's Name/Specific Field <i>Crum & Forester Ins. Co.</i>		e. Election Sum to Date \$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		<i>check</i>		<i>3/13/2013</i>	\$ <i>500.00</i>		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Philip A. Harewood 525 Peathers Run Durham, NC 27713</i>				b. Job Title/Profession <i>Director</i>		d. Comments	
				c. Employer's Name/Specific Field <i>Lincoln Community Health Center</i>		e. Election Sum to Date \$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		<i>check</i>		<i>3/12/2013</i>	\$ <i>100.00</i>		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ <i>1600.00</i>	
5. Total of ALL CRO-1210 Pages						\$ <i>1850.00</i>	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

Contributions from Individuals

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	
Committee to elect Fred Lister						42-3749026	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Robert A. Ingram 3624 Dorer Rd Durham, NC 27707				General manager			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				Hutterer venture Partner		\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		check		4/27/2015	\$ 250.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
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	
						IN PERSON	
				c. Employer's Name/Specific Field		JUL 10 2015	
						e. Election Sum to Date	
						\$ DURHAM BOE	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
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	
				c. Employer's Name/Specific Field		e. Election Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page					\$ 250.00		
5. Total of ALL CRO-1210 Pages					\$ 1850.00		
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>							

Other Receipt Sources

Use this form to report income not reported on another form. i.e. interest income, not for profit contributions etc.

Committee Full Name (and Party if applicable)						CRO-1250 Page	
<input type="checkbox"/> Interest <input type="checkbox"/> Contributions from Not-for-Profit Organizations <input type="checkbox"/> Outside Sources of Income							
<input checked="" type="checkbox"/> Interest <input type="checkbox"/> Contributions from Not-for-Profit Organizations <input type="checkbox"/> Outside Sources of Income							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Branch Bankway & Trust Co.</i> <i>P.O. Box 219</i> <i>Wilson, NC 27894</i>			b. Not-for-Profit Federal ID # 		d. Comments 		
			c. Outside Source Explanation 		e. Election Sum to Date \$		
f. Account Code	g. Form of Payment <i>Direct Bank Deposit</i>	h. In-Kind Description		i. Date (mm/dd/yyyy) <i>1-1-2015</i> <i>→ 6/30/15</i>	j. Amount <i>\$.18</i>		
					\$		
					\$		
<input type="checkbox"/> Interest <input type="checkbox"/> Contributions from Not-for-Profit Organizations <input type="checkbox"/> Outside Sources of Income							
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #		d. Comments 		
			c. Outside Source Explanation		e. Election Sum to Date <i>JUL 10 2015</i> \$		
					DURHAM BOE		
					\$		
					\$		
<input type="checkbox"/> Interest <input type="checkbox"/> Contributions from Not-for-Profit Organizations <input type="checkbox"/> Outside Sources of Income							
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #		d. Comments 		
			c. Outside Source Explanation		e. Election Sum to Date \$		
					\$		
					\$		
k. Total only this Page					\$ <i>-18</i>		
l. Total of ALL CRO-1250 Pages <small>Please refer to the 11th of District Committee Page CRO-1250 for instructions.</small> <small>Please refer to the 11th of District Committee Page CRO-1250 for instructions.</small> <small>(Do not refer to the 11th of District Committee Page CRO-1250 for instructions.)</small>					\$		

Disbursements

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
Crown Point to State Fund 1st						43-3749026
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)						
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Adrienne Williams 5908 Thistle Rock Lane Durham, NC 27707						
			c. Level Registered (Specify)		e. Election Sum to Date	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	check	A	2-10-2015	\$ 65.00	web site	
				\$	Leet	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
					IN PERSON	
			c. Level Registered (Specify)		e. Election Sum to Date	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ MAY 10 2015 DURHAM BOE	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				\$		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify)		e. Election Sum to Date	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				\$		
				\$		
5. Total only this Page						\$ 65.00
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) (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* - 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)						