

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.

Amendment
 Yes No

I. Committee Information		c. ID Number																	
a. Full Name <i>Committee to Elect Fred Foster</i>		43-3749026																	
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>2019</i>	3. Period Start Date (mm/dd/yy) <i>7-1-19</i>	4. Period End Date (mm/dd/yy) <i>12-31-19</i>	5. Treasurer Full Name <i>Fred Foster, JR.</i>																
6. Type of Committee (Check One) <input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> Legal Expense Fund		9. Type of Report (check only one type of report from one category) <table border="0" style="width:100%;"> <tr> <td style="width:50%; vertical-align: top;"> Municipal <input 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 type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special </td> <td style="width:50%; vertical-align: top;"> State/County <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 type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input checked="" type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special </td> </tr> </table>		Municipal <input 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 type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	State/County <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 type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input checked="" type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special														
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7. Type of Fund (if applicable, check one) <input type="checkbox"/> Booster Fund <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:		10. Special Report Name 																	
8. Number of Fundraisers this Report 		11. Account Information <table border="0" style="width:100%;"> <tr> <td colspan="2">a. Financial Institution Full Name <i>Branch Bank & Trust</i></td> </tr> <tr> <td>b. Purpose <i>Campaign Funds</i></td> <td>c. Account Code</td> </tr> <tr> <td>d. Period Begin Balance <i>\$ 1,089.15</i></td> <td></td> </tr> </table>		a. Financial Institution Full Name <i>Branch Bank & Trust</i>		b. Purpose <i>Campaign Funds</i>	c. Account Code	d. Period Begin Balance <i>\$ 1,089.15</i>											
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d. Period Begin Balance <i>\$ 1,089.15</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>Fred Foster, Jr.</i> Printed Name of Signer		<i>Fred Foster, Jr.</i> Signature of Appointed Treasurer																	
		<i>1-21-20</i> Date																	
FOR OFFICE USE ONLY <table border="0" style="width:100%;"> <tr> <td>Date Received: <i>1/20/2020</i></td> <td>Employee: <i>[Signature]</i></td> <td colspan="2">Delivery Method</td> </tr> <tr> <td>Date Postmarked: _____</td> <td style="text-align: center;">IN PERSON</td> <td colspan="2"> <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed </td> </tr> <tr> <td>Date Scanned: _____</td> <td>Employee: _____</td> <td colspan="2"> <input type="checkbox"/> Signer has not received mandatory training </td> </tr> <tr> <td>Date Data Entered: _____</td> <td>Employee: _____</td> <td colspan="2"></td> </tr> </table>				Date Received: <i>1/20/2020</i>	Employee: <i>[Signature]</i>	Delivery Method		Date Postmarked: _____	IN PERSON	<input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed		Date Scanned: _____	Employee: _____	<input type="checkbox"/> Signer has not received mandatory training		Date Data Entered: _____	Employee: _____		
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Date Scanned: _____	Employee: _____	<input type="checkbox"/> Signer has not received mandatory training																	
Date Data Entered: _____	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 \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Cannon: Do to elect Fred Lister						43-2749026	
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	
Donethel Thomas 2712 Sundial Circle Durham, N.C. 27704-2343				Retired			
				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"/>		Check		8-28-19	\$ 100.00		
<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	
Donald Debnam 4301 Vitex St Garner, N.C. 27529				Retired			
				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"/>		Check		9-30-19	\$ 213.00		
<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	
Annie L. Woods 930 Da Vinci St Durham, N.C. 27704				Retired			
				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"/>		money order		9-17-19	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 413.00	
5. Total of ALL CRO-1210 Pages						\$ 613.00	
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>							

DURHAM BOE

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	
Comm: De to elect Fred Lister						42-2749026	
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	
Jerome I. Levisy 1304 Hosmer Ct Wake Forest, N.C. 27587				Executive Director			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				Boys & Girls Club		\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		Check		9-5-19	\$ 100.00		
<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	
Pilar Rocha-Goldberg 3306 Devon Road Durham, N.C. 27707				President & CEO			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				El Centro Hispano		\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		Check		10-14-19	\$ 100.00		
<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	
				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"/>			IN PERSON		\$		
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-1100)						JAN 21 2020	

Aggregated Contributions from Individuals

Page _____ of _____

Amendment
 Yes No

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

1. Committee Full Name (and Fund if applicable) <i>Comm. For to elect Fred Lister</i>					2. ID-Number <i>43-3749026</i>
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 <input type="checkbox"/> Remove		<i>Check</i>		<i>9-16-19</i>	\$ <i>50.00</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove		<i>Check</i>		<i>9-17-19</i>	\$ <i>50.00</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove		<i>Money order</i>		<i>9-17-19</i>	\$ <i>20.00</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove		<i>Cashier check</i>		<i>9-24-19</i>	\$ <i>50.00</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove		<i>Check</i>		<i>9-28-19</i>	\$ <i>50.00</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove		<i>Check</i>		<i>10-3-19</i>	\$ <i>50.00</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove		<i>check</i>		<i>10-12-19</i>	\$ <i>30.00</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove		<i>check</i>		<i>10-29-19</i>	\$ <i>50.00</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove		<i>check</i>		<i>11-19-19</i>	\$ <i>25.00</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove		<i>check</i>		<i>12-4-19</i>	\$ <i>50.00</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add <input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add <input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add <input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add <input type="checkbox"/> Remove					\$
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<input type="checkbox"/> Add <input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add <input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add <input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add <input type="checkbox"/> Remove			IN PERSON		\$
<input type="checkbox"/> Add <input type="checkbox"/> Remove					\$
4. Total only this Page					\$ <i>425.00</i>
5. Total of ALL CRO-1205 Pages					\$ <i>425.00</i>
<small>(This line must be on line 5 of Detailed Summary Page CRO-1100)</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	
Comms Dev to 510ct Fred Lister						43-3749026	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<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 <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
Blue Hosting 560 E. Timpanogas Pkwy Orem, UT 84097							
				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		
	Draft	A	11-26-19	\$ 95.40	website fees		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
Durham County Government 201 E. Main St Durham, N.C. 27701							
				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	H	12-11-19	\$ 214.87	filing fee		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
USPS Durham, N.C. 27704							
				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	O	9-13-19	\$ 46.00	box rental fee		
				\$			
5. Total only this Page						\$ 356.27	
6. Total of ALL CRO-1310 Pages						\$ 356.27	
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>							
<i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>							
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>							
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>							
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)							

DURHAM BOE

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	
<i>Cross-Party to State Board of Elections</i>		<i>43-2749026</i>	
Start of Election Cycle: January 1, <i>2019</i>	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start	\$ <i>407.42</i>	\$ <i>100.00</i>	
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)	\$ <i>425.00</i>	\$ <i>5,108.00</i>	
6) Contributions from Individuals (CRO-1210)	\$ <i>613.00</i>	\$ <i>20,584.00</i>	
7) Contributions from Political Party Committees (CRO-1220)	\$	\$ <i>500.00</i>	
8) Contributions from Other Political Committees (CRO-1230)	\$	\$ <i>3,750.00</i>	
9) Loan Proceeds (CRO-1410)	\$	\$ <i>100.00</i>	
10) Refunds/Reimbursements to the Committee (CRO-1240)	\$	\$ <i>375.00</i>	
11) Other Receipt Sources			
11a) Interest on Bank Accounts (CRO-1250)	\$	\$ <i>.05</i>	
11b) Contributions from Not-For-Profit Organizations (CRO-1250)	\$	\$	
11c) Outside Sources of Income (CRO-1250)	\$	\$ <i>47.44</i>	
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)	\$ <i>1,038.00</i>	\$ <i>30,464.49</i>	
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)	\$ <i>356.27</i>	\$ <i>29,175.34</i>	
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$	\$ <i>200.00</i>	
13c) Coordinated Party Expenditures (CRO-1310)	\$	\$	
14) Aggregated Non-Media Expenditures (CRO-1315)	\$	\$	
15) Loan Repayments (CRO-1420)	\$	\$ <i>100.00</i>	
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)	\$ <i>356.27</i>	\$ <i>29,475.34</i>	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ <i>1,089.15</i>	\$ <i>1,089.15</i>	
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)	\$	PERSON	
26) Forgiven Loans (CRO-1440)	\$	\$	
27) 48-Hour Notice Reports Sum (CRO-2220)	\$	JAN 21 2020	
28) Contributions to be Refunded (CRO-1215)	\$	\$	