

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

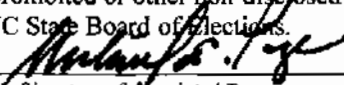
a. Full Name Campaign to Re Elect Michael D. Page		c. ID Number 1
b. Mailing Address (include City, State and Zip Code) P.O. Box 261 Durham NC 27702		d. Date Filed 01/10/13
		e. Phone Number 919-949-4022

2012	10/21/12	12/31/12	Robin B. Mason
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<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:	<input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser	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 checked="" type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	Referendum <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special
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a. Financial Institution Full Name SunTrust Bank		a. Financial Institution Full Name SunTrust Bank	
b. Purpose Campaign Account for Receipts and Expenditures	c. Account Code 1	b. Purpose Campaign Account for Receipts and Expenditures	c. Account Code 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 of Elections.

Robin B. Mason IN PERSON  01/09/13
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: JAN 10 2013	Employee: 	Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training
Date Postmarked: DURHAM BOE	Employee: _____	
Date Scanned: _____	Employee: _____	
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.

Detailed Summary

Amendment
 Yes No

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

Campaign to Re Elect Michael D. Page		2012 COUNTY FOURTH QUARTER	1	
Start of Election Cycle:	January 1,	2012	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start			\$ -10.00	\$ -10.00
5) Aggregated Contributions from Individuals		(CRO-1205)	\$	\$
6) Contributions from Individuals		(CRO-1210)	\$ 327.47	\$ 327.47
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 Organizations		(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, 11c, 11d and 11e)			\$ 327.47	\$ 327.47
13) Disbursements				
13a) Operating Expenditures		(CRO-1310)	\$ 349.28	\$ 349.28
13b) Contributions to Candidates/Political Committees		(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, 15, 16 and 17)			\$ 349.28	\$ 349.28
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)			\$ -31.81	\$ -31.81
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-2200)	\$	\$
28) Contributions to be Refunded		(CRO-1215)	\$	\$

Disbursements

Use this form to report expenditures from the committee for: operating expenses, contributions to candidate/political committees and coordinated party expenditures.

Campaign to Re Elect Michael D. Page					1
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Omar Beasley Durham NC		b. Coordinated Committee Name Committee to Elect Omar Beasley		d. Comments Pollworker	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check	E	11/03/12	\$250.00	Poll Worker
				\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip) ESP Graphx 4512 Sun Valley Drive Durham NC 27713		b. Coordinated Committee Name		d. Comments Production of Campaign Tshirts	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check	B	11/05/12	\$99.28	Production of Campaign Tshirt
				\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				\$	
					\$ 349.28
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)					\$ 349.28
(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)					
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					

Contributions from Individuals

Pg _____ of _____

Amendment
 Yes No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

Form Number					
Campaign to Re Elect Michael D. Page					1
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Michael D. Page 702 Basil Drive Durham NC 27713		County Commissioner			
		c. Employer's Name/Specific Field			
		County of Durham		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"/>	1	check		12/13/12	\$ 150.00
<input type="checkbox"/>	1	check		12/31/12	\$ 177.47
<input type="checkbox"/>					\$
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"/>					\$
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"/>					\$
					\$ 327.47
					\$ 327.47