## IN PERSON

Disclosure Report Cover

JAN 1 8 2019

Amendment

c. Account Code

\$

d. Period Begin Balance

☐ 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. DURHAM BOE 1. Committee Information a. Full Name c. ID Number Fred faiter 43-3749026 b. Mailing Address (include City, State and Zip Code) d. Date Filed P.C. Box 15752 e. Phone Number NC 27704 7191 479-2. Report Year 3. Period Start Date (mm/dd/yy) 4. Period End Date (mm/dd/yy) 5. Treasurer Full Name 12-30-18 oster rea 9. Type of Report (check only one type of report from one category) 6. Type of Committee (Check One) Candidate Campaign Party Municipal State/County Referendum Referendum Organizational Organizational Organizational ☐ Independent Expenditure ☐ Joint Fundraiser Thirty-five day Pre-referendum Quarterly Legal Expense Fund Pre-primary First Final Pre-election Supplemental Final Second 7. Type of Fund Pre-runoff Annual (if applicable, check one) Third Booster Fund Semi-annual Fourth Special Building Fund Mid Year Semi-annual Year End 10. Special Report Name Mid Year Other: Final Year End 8. Number of Fundraisers this Report ☐ Special Final ☐ Special 11. Account Information 11. Account Information a. Financial Institution Full Name a. Financial Institution Full Name

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.

b. Purpose

c. Account Code

d. Period Begin Balance

400.00

Fred Foster JR.	Fred Foster, Jr.	/-/8-/9 Date	
Printed Name of Signer	Signature of Appointed Treasurer		
OR OFFICE USE ONLY			
Date Received:	Employee:	Delivery Method  Normal Mail	
Date Postmarked:	Employee:	<ul><li>☐ Registered Mail</li><li>☐ Hand Delivered</li></ul>	
Date Scanned:	Employee:	☐ Electronically Filed	
Date Data Entered:	Employee:	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.

## IN PERSON

**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	Réporty BOE	3. ID Number
Common Tex to Sket fred faster			43-3749026
Start of Election Cycle: January 1, <u>22)</u>	P	Total this Reporting Period	Total this d Election Cycle
4) Cash on Hand at Start		\$ 400.00	\$ 100.00
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$ 4683.00
6) Contributions from Individuals	(CRO-1210)	\$	\$ 19896.00
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$ 500.00
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$ 3750.00
9) Loan Proceeds	(CRO-1410)	\$	\$ 100.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	\$ 375.00
11) Other Receipt Sources	a manuficación y pro-		
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$ .05
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$ 47.44
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)	\$ O	\$ 29,451.49
EXPENDITURES			THE RESERVE THE SECOND
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 38.00	\$ 28751.49
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	i, 16 and 17)	\$ 38.00	\$
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18)	\$ 400.00	\$ 400.00
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	#7.1.7.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1
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)	\$	\$
(8) Contributions to be Refunded	(CRO-1215)	\$	\$

## IN PERSON

**Disbursements** 

JAN 1 8 2019

		Amendment		
Pg	of	Yes	☐ No	

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political

	coordinated party ex					
1. Committee F	Full Name (and Fun-	d if applicable)				2. ID Number
Commi	The Lo 5	lock for	ر لے و	Est.		43-3749026
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)						
Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures						
4. Payee Inform	nation			Add $\square$	Remove	
	Iailing Address & Ph	one		b. Coordinat	ed Committee Name	e d. Comments
(include city, state,						
١			700000			
WIX,	com			-	stered (Specify)	
				Federal	County:	Election County Date
				State	Municipa	dity: e. Election Sum to Date
						\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (	mm/dd/yyyy)	j. Amount	k. Required Remarks
FF2	Draft	A	7-1	16-18	\$ 38,00	Website hosting
					\$	
4. Payee Inforn	nation			Add	Remove	
a. Full Name, Mail	ing Address & Phone			b. Coordinate	ed Committee Name	d. Comments
(include city, stat	te, & zip)					
					. 1(0 :0)	
				c. Level Regis	stered (Specify)  County:	No. C.C.
				State	Municipa	lity: e. Election Sum to Date
				State	Withherpa	
						\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (r	nm/dd/yyyy)	j. Amount	k. Required Remarks
					\$	
					\$	
4. Payee Inform	nation		П	Add $\square$	Remove	
The state of the s	ing Address & Phone				d Committee Name	d. Comments
(include city, stat				o. Coordinate	d Committee Name	u. comments
(merode city, state	c, cc mp)					
				c. Level Regis	tered (Specify)	100
				Federal	County:	
				State	Municipal	ity: e. Election Sum to Date
10						\$
	N 0D	h. Purpose Code	: Data (	(33/	: Amount I	k. Required Remarks
f. Account Code	g. Form of Payment	n. Purpose Code	i. Date (ii		J	k. Required Remarks
					\$	
					\$	
5. Total only thi	is Page					\$ 38.00 \$ 38.00
6. Total of ALL	CRO-1310 Pages					
(This line goes in	line 13a of Detailed Sum	mary Page CRO-110	00 if Oper	ating Expense	s)	\$ 3800
(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)						