## Statement of Organization - Candidate Committee

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•	Am	endm	ent			
1				KJ		
1		Yes			No	

1. Committee Information					
a. Full Name		c. ID Number			
V. Peterson For City Council					
b. Mailing Address (include City, State and Zip Code)		d. Date Organized			
P.O. BOXIOI		July 1, 2003			
DURHAM, N.C. 27702		e. Phone Number			
<u>'</u>		667-948			
2. Candidate Information	Candidate's Primary Commi				
a. Full Name	c. Candidate ID Number	d. Party Affiliation			
Victoria Peterson		NONPARTISAN			
b. Mailing Address (include City, State, and Zip Code)	e. Office Sought	f. Jurisdiction			
P.O. Box 101	City Council at	arce			
Durham, N.C. 27702	(If office sought is nonpartisan	, write "Nonpartisan" in [d]			
3. Treasurer Information	Party Affia 4. Custodian of Books Information	***			
a. Full Name	a. Full Name	ation			
Victoria Refersion	di a un i cumo				
b. Mailing Address (include City, State, and Zip Code)	b. Mailing Address (include City, Sta	te, and Zip Code)			
PO. 30x 101 Durham, N.C. 27702					
c. Phone Number d. Email Address	c. Phone Number d. Email Add	ress			
667-9481					
5. Assistant Treasurer Information Add	6. Account Information (inc.	l. CRO-3500)			
a. Full Name Remove	a. Financial Institution Full Name Remove				
Rev. Rodney Green					
b. Mailing Address (include City, State, and Zip Code)	b. Purpose				
1014 CARROLL ST					
c. Phone Number d. Email Address	c. Code d. Type				
824-2740					
CERTIFICATION					
I certify that the Committee is in compliance with all provisi with funds for a federal or out-of-state PAC. I further say the					
Victoraleterson Victo	Ma Peleson  nature of Appointed Treasurer	7/1/2003			



Raleigh, NC 27603

Kimberly Westbrook Deputy Director – Campaign Reporting Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173 Fax: (919) 715-8047

#### Certification of Threshold

FILED BY:	$1/\Omega_{1} = \Gamma_{1} \Omega_{1} \Omega_{1}$
Committee Name:	Vi Peterson For City Council
Treasurer Name:	Victoria Keterson
Treasurer Address:	P.O. BOX 101 Duch Am N.C. 27702
(include city, state, & zip)	
•	
Treasurer Phone:	919-667-9481
Check One:	
election cycle under the pro until the end of the election expenditures during this el	mittee intends to neither receive nor expend more than \$3,000 during the current ocedures set forth in G.S. 163-278.10A. This certification will remain in effect a cycle for this committee. If this committee exceeds \$3,000 in contributions or ection cycle, I understand that I must immediately notify the appropriate board ed campaign finance reports.
file the next scheduled repo	Certification to remain under the \$3000 threshold. I will now be required to ort for all contributions and expenditures that have not been previously reported current election cycle. I further agree to file all future reports required.
1/1/2000	
7/ // 2003 Date Signed	V MOUM Exercises
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Raleigh, NC 27603

Kimberly Westbrook Deputy Director - Campaign Reporting Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173 Fax: (919) 715-8047

### **Certification of Treasurer**

FILED BY:	$\mathcal{L}_{\mathcal{L}}$	
Candidate Name:	Victoria Peterson	
Treasurer Name:	Victoria Peterson	
Treasurer Address:	P.O. BOX 101	
(include city, state, & zip)	Dykham N.C. 27702	
Treasurer Phone:	919-667-9481	

I certify that the above information is correct, and I, as candidate, appoint said treasurer to personally fulfill the duties and responsibilities imposed upon the appointed treasurer and subject to the penalties and sanctions in Subchapter VIII. Regulation of Election Campaigns of Chapter 163 of the North Carolina General Statutes.

I understand that if the above Treasurer changes, it will be necessary to certify a new treasurer and amend the existing Statement of Organization within 10 days of the vacancy.

7/7/2003 Date Signed

Signature of Candidate

JUL 1 7 2003

# Disclosure Report Cover-

graph and the second se	
Amendment	
☐ Yes	

Disclosure Report Cover				IN	PFI	350	M		Yes	
Please note that	this cover sheet c	annot be used	d to ame	de com	nittee in	formula.	বনীয়া	ch as the c	ommittee ac	ddress, treasurer,
Please note that this cover sheet 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 those kinds of committee changes.										
You mus	st amend the States	nent of Orga he Addendu	nization m form (	CRO-10	)10) if r	nore enti	ries a	re needed.		
1. Committee I		lle Addenda	in romit (	ONO 1	, , , , , , , , , , , , , , , , , , , ,					
- Full Name		<del></del>							c. ID Numbe	r
1/ Pot	erson F	FR City	y Co	UNCI	Z					
h Mailing Address	(include City, State	nd Zip Code)							d. Date Filed	
P.O. B	POX 101								July 1	7, 2003
Durche	POX 101 9m, NC 2	770 A								-9481
	3. Period Start Date	(mm/dd/yyyy)	4. Per	iod End	Date (mn	/dd/yyyy	) 5	. Treasurer	Full Name	
2. Report Year 7003	07-07-				7/0			Victor	cia Pet	terson
6. Type of Commi			8. Type of	Report	(che	ck only on	e type	of report fro	n one categor	
Candidate Car	npaign Party		Municipal			State/Cou		1	Referendum	a zational
Joint Fundrais			<b>∏</b> ∕ Organ		· · · · · · · · · · · · · · · · · · ·	Orga		onal	1==	erendum
Referendum				y-five day		Quar	terry First l	Dlue	Final	. remain
7. Type of Fund	(if applicable, c	heck one)		rimary		<u></u>	Secor			mental Final
Soft Money A	ecount	l	ш •••	lection		_	Third		Annual	1
Booster Fund		1	Pre-n	unom -annual			Fourt		Special	1
Building Fund				-annuar Mid Year			i-annu		_	
	Party Financing Fund	- Eust	Year End Mid Year			9. Special R	Report Name			
	lection Year Candidate		Final Year End							
Other:	impaign Financing Fur		☐ Spec			Fina				
C Outer						Spec		41		
10. Account In	nformation		10. Account Information a. Financial Institution Full Name							
a. Financial Instit	tution Full Name				a. Finan	Clat Instit	411011	1		
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b. Purpose		c. Code			b. Purp	)5e			c. Code	
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		d. Period Beg	in Balance	<u> </u>	1					
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CERTIFICA	TION	<u> </u>						•		
CERTIFICA	11011				: <b>-</b>	A minla	22 A	including t	hat no fund	s are commingled
I certify that	the Committee is	in complianc	e with a	li provis	ions or	ATTICLE A	can,	niete trie	and correct	
with funds f	or a federal or out-	of-state PAC	). I furth	er say t	nat uns	report is	COII	ipioto, il uu	,	1 /
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Victor	or a letter	On		LCL	Dua	11 erg	(() (	<i>))(</i>	— —	Date
	Printed Name of Sign	ner		Si	gnature o	Appointe	d Ite	asurer		
				<del></del>						
FOR OFFIC	E USE ONLY					1110	1.	I	elivery Me	
Date Rec	eived: <u>7</u>	-18-03		Emple	yee:	MAX	<u>ve</u>	<u> </u>	☐ Normal	
									Register	
Date Post	tmarked:		<b>_</b>	Empl	oyee:		. 1	<del>, _</del> !	Hand D	
		18-03		Empl	ovee:	Bar	-St	3_	L Electron	nically Filed
Date Scar	nned:	100/		Lingi		7				N -5-20

JUL 1 7 2003

## **Detailed Summary**

## IN PERSON

Amendment
Ves No

Detailed Summary	N PERS	JUNL		Service of the servic
. Committee Full Name (and Fund if applicable)	2. Type of Rep	ort	3. II	) Number
1. Peterson For City Council	orga		`	
Start of Election Cycle: January 1, 2003	3_	Total Reporting		Total this Election Cycle
4) Cash on Hand at Start		s 0°	>	\$
RECEIPTS			<b>没。其政</b>	A PROPERTY OF THE PARTY OF THE
5) Aggregated Contributions from Individuals	(CRO-1205)	s 125	5,00	\$
6) Contributions from Individuals	(CRO-1210)	\$ 15°C	.00	\$
7) Contributions from Political Party Committees	(CRO-1220)	s -		\$
8) Contributions from Other Political Committees	(CRO-1230)	s —	<u> </u>	S
9) Loan Proceeds	(CRO-1410)	s <u> </u>	<u></u>	\$
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$		S
11) Other Receipt Sources	(CRO-1250)			
11a) Interest on Bank Accounts	(CRO-1250)	\$		\$
11b) Contributions from Not-for-Profit Organizatio	ns <i>(CRO-1250)</i>	s <u> </u>		\$
11c) Outside Sources of Income	(CRO-1250)	s —		\$
12) "Goods and Services" Contributions	(CRO-1260)	s —	-	\$
13) TOTAL RECEIPTS		s 279	500	\$
(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)				
<u>EXPENDITURES</u>	/CRO 1210			
14) Disbursements	(CRO-1310)	c / C/	(	S
14a) Operating Expenditures	(CRO-1310)	3 / 0/	.97_	s
14b) Contributions to Candidates/Political Committ		3		\$
14c) Coordinated Party Expenditures	(CRO-1310)	<u>\$</u>	<u>-</u>	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
15) Loan Repayments		\$		
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	- 	\$
17) In-Kind Contributions	(CRO-1510)	\$ -		<u> </u>
18) TOTAL EXPENDITURES  (Add lines 14a, 14b, 14c, 15, 16, and 17)		s 181	.44	\$
(Add thes 14d, 14b, 14c, 15, 16, and 17)  19) Cash on Hand at End		500	61	S
(Add lines 4 and 13 together, then subtract line 18)		931	<i>96</i>	
ADDITIONAL INFORMATION	للمائد للاراسية والمتعلقية بالموارزة معاديم ومعاملين			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$		
21) Outstanding Loans (incl. ones from other campaig	gns) <i>(CRO-1430)</i>	\$		
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		\$	·	\$ March 20

Amendment

JUL 1 7 2003

Aggregated Contributions from Individual ERSON of \_\_\_\_ Ves

1. Committee Full Name (and Fund if applicable)  2. ID Number										
V. Peterson For City Council										
3. Contributor Information										
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyy						
☐ Add ☐ Remove	A	Eash		7/8/0	3 \$ 50:00					
Add Remove	B	eash		7/11/0	3 \$ 50,00					
☐ Add ☐ Remove	C.	eash Cash		7/14/0	3 \$ 50:00 3 \$ 50:00 3 \$ 25:00					
Add Remove					S					
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	only this Page				1-100-					
	4. Total only this Page  5. Total of ALL CRO-1205 Pages  (This line must be on line 5 of Detailed Summary Page CRO-1100)  5 / 25,00									

JUL 1 7 200

Contributions from Individuals

INI	DEC	200	NB

Amendment

Yes

1. Comm	ittee Full Name (an	d Fund if applicable)					2. ID	Number	
V.F.	V. Peterson for City Council								
3. Cont	3. Contributor Information								
1	a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments								
(includ	le city, state, & zip)	ala ( . //a		Pre		Lef			
114.	Kiddick C	llexande	7	c. Employer		ne/Specific Field			
[(1	Orang	alexande e St. Duri	HAM	alex	Dar	Ser Y	e. E1	ection Cycle Sum to Date	
			2101	"	a	Sent ssociates	\$	150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion		j. Date (mm/dd/yyy		k. Amount	
						1/8/03		\$ 150	
								\$	
								\$	
	ributor Informa			Add 🔲	Ren	nove			
	ame, Mailing Addre	ss & Phone		b. Job Title/	Profes	sion	d. Co	omments	
(includ	le city, state, & zip)			· ·					
				c. Employer	's Nan	ne/Specific Field			
							e. El	ection Cycle Sum to Date	
							\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion		j. Date (mm/dd/yyy	у)	k. Amount	
						_		\$	
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								\$	
3. Cont	ributor Informa	ition		Add 🔲	Ren	nove			
•	ame, Mailing Addre	ss & Phone		b. Job Title/	Profes	sion	d. C	omments	
(includ	e city, state, & zip)			1					
				c. Employer	's Nan	ne/Specific Field		*	
						<del></del>	ļ	<u> </u>	
1							e. El	ection Cycle Sum to Date	
							\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion		j. Date (mm/dd/yyy	у)	k. Amount	
								\$	
								\$	
								\$	
4. Tot	al only this P	age					\$	150.00	
5. Tot	al of ALL CF	RO-1210 Pages					\$	/50.00 150.00	
(This li	(This line must be on line 6 of Detailed Summary Page CRO-1100)								

		JUL 1	7 2003	,	Amendment
Disbursem	ients		n.l.	of	Yes No
1. Committee Full	Name (and Fund if applicable	, IN PE	RSON		2. ID Number
	enson For C	<u> </u>			7. A
3. Type of Disb		eparate CRO-1310 forms		bursement.)	
Operating Expe		tions to Candidates/Politic			ed Party Expenditures
4. Payee Inforn			Add  Ren	move	
	ling Address & Phone		b. Coordinated Co	mmittee Name	d. Comments
(include city, stat	te, & zip)	<i>n</i>	4		
PURNAM	1 County Boar	L Z	c. Level Registered	d (Specify)	
$(\omega t)_{2} = \overline{t}_{2}$	~4 <b>5</b>		Federal	County:	
Dunh	Am, N.C. 2770	27	State	Municipality:	e. Election Cycle Sum to Date
1)4101	Had bear and a second				\$
f. Account Code	g. Form of Payment	h. Purpose		i. Date (mm/dd/yyy	y) j. Amount
	Mong Orde	Carchela	<u> </u>	7/0/03	\$ 122,40
	, and the second	-			S
4. Payee Inform	nation			nove	
	ling Address & Phone	·	b. Coordinated Co	mmittee Name	d. Comments
(include city, stat			4		
OFFic	e Depot	ı	c. Level Registered	d (Specify)	
110011	Chapel His	11 0/1/	Federal	County:	
' '	•		State	Municipality:	e. Election Cycle Sum to Date
Dunhe	m, N.C. 27	7707			s
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	cash	PRINTO	, W (	7/12/0:	3 5 23,60
,	!		J	1	\$
4. Payee Inform	nation		Add Ren	move	
	ling Address & Phone		b. Coordinated Co	mmittee Name	d. Comments
(include city, stat	te, & zip)	<u> </u>			
DE	- Do not	ı	c. Level Registered	d (Specify)	
DITIC	e Depol	/ // DILA		County:	
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Durch	Am, NC2	7707			\$
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	Cash	PRINTIN	<b>1</b>	7/14/6	3 5 35.44
				<u> </u>	s /
5. Total only	<del>-</del>				\$ 181,44
6. Total of A	LL CRO-1310 Page	:S			· //
	n line 14a of Detailed Summary n line 14b of Detailed Summary	s 181.44			