	Amenomo
Disclosure Report Cover	☐ Yo

Amendment		
☐ Yes	$\boxtimes$	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

Do not use this form to update information						
1. Committee Infor	mation					
a. Full Name	c. ID Number					
COMMITTEE TO I	KCE4J3					
b. Mailing Address (incl	ude City, State and Zip Code)				d. Date Filed	
1826 EICHELBERG FAYETTEVILLE, 1					10/30/2017	
TATETTE VIDEE,	10 20303				e. Phone Number	
					910-488-4635	
2. Report Year	3. Period Start Date (mm/d	d/yy) 4. Period I (mm/dd/yy)	End Date	5. Treasurer Full	Name	
2017	09/27/2017	10/2	3/2017	ALVIN MARSHA	ALL	
6. Type of Committ	ee (Check One)	9. Type of Report	(check on	ly one type of report	from one category)	
Candidate Campa		Municipal	State/C	County	Referendum	
PAC	Referendum	Organizational		Organizational	Organizational	
Independent	Joint Fundraiser	Thirty-five day		Quarterly	Pre-referendum	
Expenditure				<b>4</b> ,		
Legal Expense Fu		Des asimosu		First	Final	
7. Type of Fund	(if applicable, check one)	Pre-primary  Pre-election	ᅵ님	Second	Supplemental Final	
"Booster Fund"		Pre-election Pre-runoff		Third	Annual	
Building Fund		Semi-annual	IH	Fourth	Special	
		Mid Year	.   🗀	Semi-annual	Брески	
Other:		Year End	Mid Year		10. Special Report Name	
U Outer.		Final	IH	Year End	To openin report rums	
O Number of Fund	raisars this Danart	Special	IH	Final		
8. Number of Fund	o considers this Report	эресіаі		Special		
11. Account Inform	ation		11. Account	Information		
a. Financial Institution I			The second secon	titution Full Name		
CARTER BANK &				2 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4		
b. Purpose	c. Account Code		b. Purpose c. Account Code			
CAMPAIGN ACC	CHILLIAN COLO					
FOR RECEIPTS	1					
AND	d. Period Begin Balanco	·			d. Period Begin Balance	
EXPENDITURES	\$ 2,495.88				\$	
CERTIFICATION						
		ance with all applica	ble provisions	of Article 22A, 22B,	, & 22D-22M of Chapter 163 of	
the NC General State	utes and that no funds are co	mmingled with proh	ibited or other	non-disclosed funds.	. I further certify that this report	
is complete, true and	correct and that I have been	n trained by the NC S	State Board of	Elections/	2700 STI	
ALVIN MA			like M	wikell	10/30/2017	
	Printed Name of Signer Signature of Appointed Treasurer Date					
FOR OFFICE USE C	DNLY	The second	1			
Date Received:	VECE IN E	Employee:	0	P	Delivery Method	
Date Received.	Total Sept Long U G Communication	ill III Employee.	X (		Normal Mail	
Date Postmarke	d	Employee:			Registered Mail	
Date I Ostillarke	OCT 3 0 2017	=	-		Hand Delivered	
Date Scanned:		Employee:	_		☐ Electronically Filed ☐ Signer has not received	
Date Data Enter	ed:	Employee:			mandatory training	
				4		

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**

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 Peport

Amendment

Yes No

1. Committee Full Name (and Fund if applicable)	t 3. ID Number		
COMMITTEE TO ELECT CHALMERS L. MCDOUGALD	REPORT	KCE4J3	
Start of Election Cycle: January 1,	2017	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 4,215.50	\$ 1,007.68
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 90.00	\$ 1,070.00
6) Contributions from Individuals	(CRO-1210)	\$ 1,700.00	\$ 6,350.00
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0	\$ 0
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0	\$ 0
9) Loan Proceeds	(CRO-1410)	\$ 0	\$ 0
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$ 0	\$ 0
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0	\$ 0
11b) Contributions from Not-for-Profit Organization	ons <i>(CRO-1250)</i>	\$ 0	\$ 0
11c) Outside Sources of Income	(CRO-1250)	\$ 0	\$ 0
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$ 0	\$ 0
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$ 0	\$ 0
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11d	c, 11d and 11e)	\$ 1,790.00	\$ 7,420.00
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 2,428.90	\$ 4,851.08
13b) Contributions to Candidates/Political Commit	tees (CRO-1310)	\$ 0	\$ 0
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0	\$ 0
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 0	\$ 0
15) Loan Repayments	(CRO-1420)	\$ 0	\$ 0
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$ 0	\$ 0
17) In-Kind Contributions	(CRO-1510)	\$ 0	\$ 0
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1.	5, 16 and 17)	\$ 2,428.90	\$ 4,851.08
19) Cash on Hand at End (Add lines 4 and 12 together, then sub-	tract line 18)	\$ 3,576.60	\$ 3,576.60
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0	
21) Outstanding Loans (incl. ones from other campaign	rs) (CRO-1430)	\$ 0	
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$ 0	
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$ 0	
24) Account Transfers Within the Committee	(CRO-1720)	\$ 0	
25) Administrative Support	(CRO-1710)	\$ 0	\$ 0
26) Forgiven Loans	(CRO-1440)	\$ 0	\$ 0
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$ 0	\$ 0
28) Contributions to be Refunded	(CRO-1215)	\$ 0	\$ 0
CRO-1100 NC State Board of Elec	ctions		August 2008

## **Aggregated Contributions from Individuals**

Page

1 of 1

Amendment Yes

No

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

	ommittee Full N				2	2. ID Number	16
COMMITTEE TO ELECT CHALMERS L. MCDOUGALD						KCE4J3	
3. Cc	ontributor Infor	rmation					
a. Am		b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
-	Add Remove	1	Check 10926		09/25/2011	7 \$ 25.00	
Ħ	Add						
П	Remove	1	Cash		10/16/201	7 \$ 20.00	
Ħ	Add				10/15/2014		
	Remove	- 1	Cash		10/16/201	7 \$ 25.00	
	Add	1	Cash		10/16/201	7 \$ 20.00	
	Remove	1	Casii		10/10/201	7 \$ 20.00	
	Add					\$	
	Remove					Ψ	
$\sqcup$	Add					\$	
H	Remove						
$\vdash$	Add	_				\$	
H	Remove						
Η	Add Remove	-				\$	
H	Add		<del> </del>				
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H	Remove	-				\$	
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井	Add	4				\$	
H	Remove Add						
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H	Remove	1				\$	
Ħ	Add						
Ħ	Remove					\$	
Ħ	Add						
	Remove					\$	
	Add					\$	
	Remove						
4. T	otal only this	Page				\$ 90.00	
5. T	otal of ALL (	CRO-1205 P	ages			6 00.00	
(This line must be on line 5 of Detailed Summary Page CRO-1100)						\$ 90.00	

Contr	ibutions fro	m Individuals		ì	Pg _1 o	f2_	Ye Ye	
	and the second second second second	lividual contributions		0 or contributions un	nder \$50 if form C		The second secon	
1. Comn	nittee Full Name	(and Fund if applica	ble)			2. ID No	umber	
COMMI	TTEE TO ELECT	Γ CHALMERS L. MC	DOUG	GALD			KCE4J3	
3. Contr	ibutor Informati	on		Add 🔲 R	Remove			
a. Full Name, Mailing Address & Phone				b. Job Title/Professi	on	d. Comme	ents	
	city, state, & zip)		-372	Retired				
5613 Ca	EON D WATSON	li .		c. Employer's Name	/Specific Field	_		
	ille, NC 28303-27	05		c. Employer s Name.	specific Field	-		
						e. Election	Sum to Date	
						\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-	Kind Description	j. Date (mm/dd/	уууу)	k. Amount	
	1	Check 3232			09/27/	2017	\$	100.00
							\$	
							\$	
3. Contr	ibutor Informati	on		Add □ R	Remove			
a. Full Na	me, Mailing Address	& Phone		b. Job Title/Profession	on	d. Comme	ents	
	city, state, & zip)			Broker/Realtor				
Security (Security )	B GLADNEY			2.4	2800			
7030 Da				c. Employer's Name/	Specific Field			
rayettev	ille, NC 28314			Self Employed	e Election	Sum to Date		
						\$	100.00	
f, Prior	g. Account Code	h. Form of Payment	i. In-l	 Kind Description	j. Date (mm/dd/y	/vvv)	k, Amount	
	1	Check 1623			10/01/		\$	100.00
							\$	
							\$	
3. Contr	ibutor Informati	on		Add 🔲 R	temove			
and the second second	ne, Mailing Address	& Phone		b. Job Title/Profession	on	d. Comme	nts	
	city, state, & zip)			Retired				
RUTH S	MITH ANSFIELD DRIV	/E		c. Employer's Name/	Cneelfie Field	_		
	TEVILLE, NC 283			c. Employer's Name/	Specific Field	-		
910-822-		703				e. Election	Sum to Date	
a production victorialisms					\$	500.00		
f. Prior	g. Account Code	h. Form of Payment	i, In-l	 Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
	1	Check 8314			10/14	/17	\$	500.00
							\$	
							\$	
4. Tota	l only this Pag	e				\$		700.00
5. Tota	of ALL CRO	)-1210 Pages				\$		1,700.00
(This lin	e must be on line 6 of	Detailed Summary Page C	CRO-1100	9)		φ		1,700.00

Amendment

		m Individuals		P			Yes No
		lividual contributions of				RO 1205 is r	not used
1. Comm	nittee Full Name (	(and Fund if applica	ble)			2. ID Nu	ımber
		Γ CHALMERS L. MC		iALD			KCE4J3
	ibutor Informatio				emove		
	me, Mailing Address & city, state, & zip)	& Phone		b. Job Title/Profession	857	d. Comme	nts
	OOD BRYAN		<u>12., 75 LO</u>	SELF EMPLOYE	3ED		
MARY L	LYNN BRYAN			c. Employer's Name/S	Specific Field		
P.O. BOX		······································					
FAYETT 910-484-	ΓEVILLE, NC 283 -1817	02				e. Election	Sum to Date
710-701	1017					\$	500.00
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/y	/yyy)	k. Amount
	1	CHECK13990			10/16/2	2017	\$ 500.00
							\$
							\$
Marine Marine Marine	ibutor Informatio			Add  Re	emove		
F 11.2511.0	me, Mailing Address &	& Phone		b. Job Title/Profession	n	d. Commer	nts
	city, state, & zip)		130	PASTOR			
	CDOUGALD CHELBERGER DE	D		c. Employer's Name/S	Specific Field		
and the comment of th	TEVILLE, NC 283			Self Employed			
910-488-4	4635					e. Election	Sum to Date
						\$	1,525.00
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount
	1	Check 4882			10/16/2	2017	\$ 500.00
							\$
							\$
-	ibutor Informatio				emove		
	ne, Mailing Address &	k Phone		b. Job Title/Profession	A	d. Commen	its
(include o	city, state, & zip)			+			
				c. Employer's Name/S	specific Field		
						e. Election	Sum to Date
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Kind Description	j. Date (mm/dd/yy	ууу)	k. Amount
							\$
							\$
							\$
4. Total	l only this Page	e		A Design		\$	1000.00
5. Total	of ALL CRO-	-1210 Pages				\$	1 700 00
(This line must be on line 6 of Detailed Summary Page CRO-1100)				)		Þ	1,700.00

Amendment

Disbursem	ents		Pg	1 of 2	Amendment  Yes No		
Use this form to	report expenditures	from the committ	ee for; operating expenses,	contributions to c	andidate/political		
committees and coordinated party expenditures.							
	ull Name (and Fun		10.11.0		2. ID Number		
	TO ELECT CHALM				KCE4J3		
3. Type of Disbu	Contract of the Contract of th		RO-1310 forms for each t				
Operating E		Contributions to Car	ndidates/Political Committees		rdinated Party Expenditures		
4. Payee Inform	ng Address & Phone		Add	Remove	d. Comments		
(include city, state,	Age of the second secon		b. Coordinated Committee 14	anic	u. Comments		
ADAMS PROD							
957 COUNTRY			c. Level Registered (Specify)				
<b>FAYETTEVILI</b>	LE, NC 28301		Federal	County:			
910-488-4120			State 🖂	Municipality:	e. Election Sum to Date		
					\$ 149.80		
	·						
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	DEBIT CARD	О	10/13/2017	\$149.80	Ladder wire for		
					Campaign signs		
				\$			
4. Payee Inform	ation		Add	Pamaya			
	ng Address & Phone		b. Coordinated Committee Na	Remove	d. Comments		
(include city, state,	The second secon		b, coordinated committee ive	ame	u, comments		
SPEEDI PRINT							
201 FRANKLIN			c. Level Registered (Specify)				
FAYETTEVILI			Federal	County:			
910-483-2553	5 (1977) 🗣 - 1975 (1975) (1976) (1975) (197		State 🖂	Municipality:	e. Election Sum to Date		
					e 1.706.24		
					\$ 1,796.34		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	DEBIT CARD	В	10/24/2017	\$749.10	CAMPAIGN MAILER		
			10/21/2017	47 17.10			
				\$			
4. Payee Inform	2412		Add	Danisana			
			b. Coordinated Committee Na	Remove	d. Comments		
	ng Address & Phone		b. Coordinated Committee 14	ame	u. Comments		
(include city, state, THE FAYETTE							
P.O. BOX 9166			c. Level Registered (Specify)				
FAYETTEVILI			Federal	County:			
910-323-3120	,		State	Municipality:	e. Election Sum to Date		
					6		
					\$		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	CHECK 2013	В	10/18/2017	\$150.00	CAMPAIGN		
	CHECK 2013		10/10/2017	\$150.00	ADVERTISEMENT		
				\$			
5. Total only thi	s Page			1.64 MAINER	\$ 1,048.90		
Control of the Contro	CRO-1310 Pages						
	\$50.00 miles		0 if Operating Expenses)		\$ 2,428.90		
		(40) (100) (10)	0 if Contrib to Candidates/Politic	× ×	\$ 2,420.70		
		THE RESERVE THE PERSON NAMED IN	0 if Coordinated Party Expenditu	res)			
	es (List detailed exp				0 "1		
A* - Media	B* - Printing	C* - Fund		D - To Anothe			
E - Salaries I - Postage	F* - Equipment J - Penalties	G - Politic K* - Offic	cal Party ce Expenses		Public Office Expenses 1 to Legal Expense Fund		
O* - Other	o i cinditios	IL - Office		Zonation			
* Codes require	e detailed explanati	on in required re	emarks field (k)				

Disbursem	ents		P <sub>a</sub>	3 of	Amendment 2 Yes No	
Use this form to	report expenditures	from the committ	Pg ee for; operating expenses,			
committees and	coordinated party ex	kpenditures.			• ;	
	Full Name (and Fun				2. ID Number	
The state of the s	TO ELECT CHALM			2011	KCE4J3	
3. Type of Dish			CRO-1310 forms for each t	NAME OF TAXABLE PARTY.		
Operating I  4. Payee Inform		Contributions to Ca	ndidates/Political Committees Add		oordinated Party Expenditures	
	ling Address & Phone		b. Coordinated Committee N	Remove	d. Comments	
(include city, state,			o. Coordinated Committee 14.	anic	u. Comments	
WIDU RADIO			1			
1388 BRAGG	BLVD		c. Level Registered (Specify)			
<b>FAYETTEVIL</b>	LE, NC 28301		Federal	County:	7	
910-486-9438			State 🖂	Municipality:	e. Election Sum to Date	
					\$ 800.00	
	T =	h Boomer Code		T		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	DEBIT CARD	A	10/19/2017	\$800.00	CAMPAIGN ADVERTISEMENT	
				\$		
4. Payee Inform			Add	Remove		
	ing Address & Phone		b. Coordinated Committee Na	ame	d. Comments	
(include city, state,						
WFNC RADIO			a I and Desistant (See 16)	_		
FAYETTEVIL			c. Level Registered (Specify)	-		
910-864-6400	DD, NC 20303		Federal County:  State Municipality:		e. Election Sum to Date	
310 001 0100				vpy.	\$ 580.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
n Account Cour	g. Form of Fayment	m i ui pose code	i. Date (iiiii/dwyyyy)	J. Amount	CAMPAIGN	
1	DEBIT CARD	A	10/19/2017	\$580.00	ADVERTISEMENT	
				\$		
4. Payee Inforn			Add	Remove		
	ing Address & Phone		b. Coordinated Committee Na	ime	d. Comments	
(include city, state,	& zip)					
			a Lavel Degistered (Specify)		-	
			c. Level Registered (Specify)  Federal	County:	-	
			State	Municipality:	e. Election Sum to Date	
				- Trainspandy	\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
			33337	\$		
				\$		
f Total - Lett	is Door				f 1290.00	
5. Total only th	CRO-1310 Pages				\$ 1,380.00	
(This line goes in	line 13a of Detailed Sun			-I.Comm	\$ 2,428.90	