Disc	losure	Report	Cover
DIDU	Ober	report	CUICI

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.

1. Committee Information							
a. Full Name c. ID Number							
RONNIE WALL CAMPAIGN						ATYYRZ	
b. Mailing Address (include City, State	d. Date Filed						
842 5. Main 51	8/6/2010						
Graham, NL 27253						e. Phone Number	
	-	Louis	1.0		£ T	(336)570-3032	
2. Report Year 3. Period Start	Date (mm/dd/yy)	4. Period H		m/dd/yy)	1	r Full Name	
	2010		6/30/2010 Kand			A STATE OF THE PARTY OF THE PAR	
6. Type of Committee (Check O					type of repo	rt from one category) Referendum	
Candidate Campaign Party	rendum Mu	nicipal Organizationa	I COLUMN	e/County Organizati	ional	Organizational	
	Fundraiser	Thirty-five day		Quarterly	ionai	Pre-referendum	
Legal Expense Fund	rulidiaisei 🔲	Pre-primary	, П	First		Final	
Legal Expense Fund	IH	Pre-election	IH	Seco	nd	Supplemental Final	
7. Type of Fund (if applicable,	check one)	Pre-runoff	ᄩ	Third	i	Annual	
Booster Fund		Semi-annual		Fourt	th	Special Special	
☐ Building Fund		Mid Yea	r —	Semi-annu	ual		
_		Year End		Mid	Year	10. Special Report Name	
Other:		Final		Year	End		
8. Number of Fundraisers this	Report	Special		Final			
				Special			
11. Account Information			11. Accour	nt Inforn	nation	Z Marie San Carlo	
a. Financial Institution Full Name			a. Financial l	nstitution	Full Name		
MidCarolina Bank							
b. Purpose	c. Account Code		b. Purpose			c. Account Code	
	1						
Campaign Expenses	d. Period Begin Balance						
Campaig 1 bupages						d. Period Begin Balance	
	\$ 262.78					\$	
CERTIFICATION							
I certify that the Committee or Fun	d is in compliance	e with all appl	icable provisi	ions of Ar	ticle 22A, 22H	3 & 22D-22M of Chapter 163	
of the NC General Statutes and tha						nds. I further certify that this	
report is complete, true and correct	t and that I have b	een trained by	the NC State	Board of	Elections.	12	
0 1 5		11	0 1	1)		Dl. lean	
Kandy C. Day		<u>'n</u>	and c	10		8/6/2010	
Printed Name of Sign	er	Sig	nature of Appo	ointed Treas	surer	Date	
FOR OFFICE USE ONLY	2 / / ^			10	ъ.		
Date Received:	3-6-10	Employ	/ee:	16	- <u>Del</u>	<u>ivery Method</u> Normal Mail	
Date Postmarked:		Employ	/ee:		- ロ ロ	Registered Mail Hand Delivered	
Date Scanned:		Employ	уее:		_ =	Electronically Filed	
Date Data Entered:	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.							

CRO-1000

NC State Board of Elections

August 2008

Detailed Summary

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

Amendment Yes No

3. ID Number 1. Committee Full Name (and Fund if applicable) 2. Type of Report RONALE WALL CAMPAIGH ATYYRZ MID YEAR Total this Total this January 1, 2010 Start of Election Cycle: **Election Cycle** Reporting Period 262.78 4) Cash on Hand at Start RECEIPTS 5) Aggregated Contributions from Individuals (CRO-1205) S 50.00 (CRO-1210) \$ 26,575.00 6) Contributions from Individuals 100.00 7) Contributions from Political Party Committees (CRO-1220) \$ 8) Contributions from Other Political Committees (CRO-1230) \$ \$ (CRO-1410) \$ 9) Loan Proceeds \$ 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) \$ \$ (CRO-1250) \$ \$ 11c) Outside Sources of Income \$ 11d) Legal Expense Fund - Other Sources (CRO-1270) (CRO-1265) \$ S 11e) Exempt Purchase Price Sales 100.00 \$ 26,725. OD 12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e) **EXPENDITURES** 13) Disbursements (CRO-1310) \$ Ø s 26,362.22 13a) Operating Expenditures 13b) Contributions to Candidates/Political Committees (CRO-1310) 13c) Coordinated Party Expenditures (CRO-1310) \$ S 14) Aggregated Non-Media Expenditures (CRO-1315) \$ \$ 15) Loan Repayments (CRO-1420) \$ (CRO-1320) S 16) Refunds/Reimbursements from the Committee S (CRO-1510) 17) In-Kind Contributions 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) Ø 5 26 262.22 362.78 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18] ADDITIONAL INFORMATION 20) Non-Monetary Gifts Given to Other Committees (CRO-1330) \$ 21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430) \$ (CRO-1610) \$ 22) Debts and Obligations owed by the Committee (CRO-1620) \$ 23) Debts and Obligations owed to the Committee 24) Account Transfers Within the Committee (CRO-1720) \$ (CRO-1710) \$ \$ 25) Administrative Support \$ (CRO-1440) \$ 26) Forgiven Loans (CRO-2220) \$ \$ 27) 48-Hour Notice Reports Sum 28) Contributions to be Refunded (CRO-1215) \$

		om Individua ndividual contributio		Pg ontributions und	$\frac{1}{$50 \text{ if form CR}}$	<u></u>	Amendment Yes No 205 is not used
1. Com	mittee F <u>ull Nan</u>	e (and Fund if app	licable)			2. I	D Number
F	ROHALE W	ALL CAMPAI	64			-	atyyez
3. Cont	ributor Informa	ntion		Add 🔲 Rer	nove		
	ame, Mailing Addre	ss & Phone		b. Job Title/Profes	ssion	d. C	omments
	le city, state, & zip)			Sales			
J.	T. Lindle 110 Daklan	7, ^{Dr.}		c. Employer's Nan			
				Industria	1 Paper Prod m, NC	e. El	lection Sum to Date
	urlington, H	6 27215		Burlingto			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (nm/dd/yyy	y)	k. Amount
	11389	check			1/11/2011	<i>b</i>	\$ 100.00
							\$
						_	s
3. Cont	ributor Informa	ition		Add 🔲 Rer	nove		
	ame, Mailing Addre	ss & Phone		b. Job Title/Profes	ssion	d. C	omments
(includ	le city, state, & zip)						
				c. Employer's Nan	ne/Specific Field		
							lection Sum to Date
				1		S	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yyy	<u>y)</u>	k. Amount
				. <u> </u>			\$
							s
							\$
3. Cont	ributor Informa	tion		Add Rer	nove		
	ame, Mailing Addre	ss & Phone		b. Job Title/Profes	ssion	d. C	omments
(includ	le city, state, & zip)						
				c. Employer's Nan	ne/Specific Field		
						e. El	ection Sum to Date
						\$	ection Bain to Bate
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy	v)	k. Amount
	B. Metodile Code	or in or a symbolic			<u> </u>	± /	\$
							S
							S
4 Tot	lal only this Pa	age			<u> </u>	\$	100.60
		O-1210 Pages					100.60 100.60
	(This line must be on line 6 of Detailed Summary Page CRO-1100)						

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.						
1. Committee Information a. Full Name			c. ID Number			
	ATYYRZ					
RONNIE WALL CAMPAI6 b. Mailing Address (include City, State and Zip Coo	N (10)		d. Date Filed			
842 5. Main Street			7/22/2010			
Graham, N.L. 27253			e. Phone Number			
Graham, N.C. 21233			(336) 570-3032			
2. Report Year 3. Period Start Date (mm/d	d/yy) 4. Period H	End Date (mm/dd/yy)	5. Treasurer Full Name			
2010 1/1/2010	6/3	10/2010	Randy C. Day			
6. Type of Committee (Check One)	9. Type of Rep	ort (check only one	type of report from one category)			
Candidate Campaign Party	Municipal	State/County	Referendum			
PAC Referendum	Organizationa					
☐ Independent Expenditure ☐ Joint Fundraiser	Thirty-five day		Pre-referendum			
Legal Expense Fund	Pre-primary	First	Final			
TO SEE A COUNTY IN A SECOND	Pre-election	Seco Third				
7. Type of Fund (if applicable, check one) Booster Fund	Pre-runoff Semi-annual	Four				
☐ Booster Fund ☐ Building Fund	Mid Yea	_				
Building Fund	Year End					
Other:	Final	Year				
8. Number of Fundraisers this Report	Special	Final				
or remove or removed this step see	- '	☐ Special				
11. Account Information		11. Account Inform	nation			
a. Financial Institution Full Name		a. Financial Institution				
Mid Carolina Bank			Fine			
b. Purpose c. Account C	ode	b. Purpos	Account Code			
		7	1			
C. S. Engagine	' D.L.		d Davied Davin Polance			
Campaign Expenses d. Period Be			d. Period Begin Balance			
\$ 262	.77		\$			
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.						
0.100	(V	0	7/22/2010			
Kandy C. Day		nature of Appointed Treas				
Printed Name of Signer	Sig	nature of Appointed Iseas	surer Date			
FOR OFFICE USE ONLY		10	Dalissam Mathad			
Date Received: $7-22-10$	<u>)</u> Employ	/ee: <u>JG</u>	Delivery Method ☐ Normal Mail			
Date Postmarked:	Employ	lee:	Registered Mail			
Date I ostilitiked.			Hand Delivered			
Date Scanned:	Employ	/ee:	Electronically Filed			
Date Data Entered:	Employ	/ee:	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.						
accietant traccirer						

CRO-1000

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes. NC State Board of Elections

August 2008

Amendment

Amendment ☐ Yes □ No

Detailed Summary Use this form to summarize all disclosure reporting forms and	to total mor	netary information	Amendment Yes No		
	2. Type of		3. ID Number		
RONNIE WALL CAMPAIGH	MID	YEAR	ATYYRZ		
Start of Election Cycle: January 1, 2008	•	Total this Reporting Period	Total this Election Cycle		
4) Cash on Hand at Start		\$ 262.78	s 6		
<u>RECEIPTS</u>					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$ 5D		
6) Contributions from Individuals	(CRO-1210)	S 100,00	S 26,679'.00		
7) Contributions from Political Party Committees	(CRO-1220)	S	\$		
8) Contributions from Other Political Committees	(CRO-1230)	S	S		
9) Loan Proceeds	(CRO-1410)	S	S		
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	S		
11) Other Receipt Sources		·			
11a) Interest on Bank Accounts	(CRO-1250)	S	S		
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	S	S		
11c) Outside Sources of Income	(CRO-1250)	\$	S		
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	S		
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	S		
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,	lld and lle)	\$ 362.78	S Z6,725.00		
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	s Ø	\$ 26,362.22		
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	S		
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$		
14) Aggregated Non-Media Expenditures	(CRO-1315)	S	\$		
15) Loan Repayments	(CRO-1420)	S	S		
16) Refunds/Reimbursements from the Committee	(CRO-1320)	S	S		
17) In-Kind Contributions	(CRO-1510)	\$	S		
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15	5, 16 and 17)	s D	\$ 26,762.22		
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18;	s 362.78	\$ 362.78		
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	<u> </u>			
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	S			
22) Debts and Obligations owed by the Committee	(CRO-1610)	S			
23) Debts and Obligations owed to the Committee	(CRO-1620)	S			
24) Account Transfers Within the Committee	(CRO-1720)	\$			
25) Administrative Support	(CRO-1710)	\$	\$		
26) Forgiven Loans	(CRO-1440)	\$	S		
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$	\$		
28) Contributions to be Refunded	(CRO-1215)	\$	\$		

		om Individua ndividual contribution		Pg	of	<u> </u>	Amendment Yes No
		ne (and Fund if app		ontributions und	er 350 ir form Ci	_	D Number
		L Chonpai					TYYRZ
3. Con	tributor Informa	ation	阗	Add Rei	move		
a. Full N	ame, Mailing Addro	ess & Phone	•	b. Job Title/Profe	ssion	d. C	omments
(includ	le city, state, & zip)			54/25			
J,	T. Lindle	y, Jr.		c. Employer's Nar	ne/Specific Field	-	
24	110 Dakwo	od Dr.					
ス	Alinton, N	L 27215		Industrial Paper Prod			lection Sum to Date
	XI IIIgwii ji			Burlington, NL		\$ IDD. OD	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yy	yy)	k. Amount
	11389	check			1/11/20:	<i>b</i>	S 100, 60
							S
							s
	tributor Informa				nove		
	ame, Mailing Addro	ess & Phone		b. Job Title/Profe	ssion	d. C	omments
(includ	le city, state, & zip)						
1				c. Employer's Na	ne/Specific Field	1	
							1 d 0 1 D 1
				e. Election Sum to Date			
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yy	yy)	k. Amount
							S
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	ributor Informa				nove	1	
	ame, Mailing Addre le city, state, & zip)	ess & Phone		b. Job Title/Profe	ssion	d. C	omments
(meruo	ie eng, state, te zip)						
				c. Employer's Nar	ne/Specific Field		
						e. E	lection Sum to Date
						S	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yy	(y)	k. Amount
							s
							S
							S
4. Tot	al only this P	age				S	
5. Total of ALL CRO-1210 Pages							
(This line must be on line 6 of Detailed Summary Page CRO-1100)							