Disc	losure	Report	Cover
------	--------	--------	-------

Amendment	
Yes	☐ No
*.1 .1 1	

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
STEVE CAN	9D47F1				
b. Mailing Address (include City, Sta	te and Zip Code)				d. Date Filed
3312 DORAL					7-6-10
BURLINGT	ON, NC	27215			e. Phone Number
					336-586-0600
2. Report Year 3. Period Start	Date (mm/dd/yy)	4. Period I	End Date (mm/dd/yy)	5. Treasure	r Full Name
2010 4-18-			30-10		J. CARTER
6. Type of Committee (Check (type of repo	rt from one category)
Candidate Campaign Part	erendum Mi	unicipal	State/County		Referendum
	nt Fundraiser	Organizationa Thirty-five da			Organizational
Legal Expense Fund	it rundraiser	Pre-primary	y Quarterly First		Pre-referendum Final
Legar Expense Fund	li:	Pre-election	Seco		Supplemental Final
7. Type of Fund (if applicable,	check one)	Pre-runoff	Thir	200	Annual
Booster Fund		Semi-annual	Four		Special
Building Fund	l c	Mid Yea			_ specim
	I 🗆	Year End	d Mid	Year	10. Special Report Name
Other:		Final	Year	r End	
8. Number of Fundraisers this	Report	Special	☐ Final		
			☐ Special		
11. Account Information			11. Account Inform	nation	
a. Financial Institution Full Name			a. Financial Institution	Full Name	
CAROLINA BI	3NK				
b. Purpose	c. Account Code		b. Purpose		c. Account Code
Election Campaign	1				
	d. Period Begin B	alance			d. Period Begin Balance
9	\$ 100.00				\$
CERTIFICATION	100.00				
I certify that the Committee or Fu	ad is in compliance	a with all appl	ianhla provisions of Ar	#:ala 22 A 22E	9 % 22D 22M = f.Cl===4== 162
of the NC General Statutes and that					
report is complete, true and correc					inds. I further certify that this
•		1	101		
STEVEN J. CA	RTER	1/2	wast asle	4	7/6/10
Printed Name of Sign		Sig	nature of Appointed Treas	surer	Date
FOR OFFICE USE ONLY					\
Date Received:	-30-10	Employ	vee: DA		very Method Normal Mail
Date Postmarked:		Employ	/ee:		Registered Mail
Date Scanned:		Employ	vee.	_	Hand Delivered Electronically Filed
Date Data Entered:		Employ			Signer has not received
				County and the second	mandatory training
Please Note: This form ca			ittee information suc s information, or acco		
			i (CRO-2100A-E) to		
Tou must amend	Statement UI	JI Sum Zatioi	. (CICO 2100A-L) (0	make comin	nuce changes.

CRO-1000

NC State Board of Elections

August 2008

Detailed Summary

Amendment
Yes No

Use this form to summarize all disclosure reporting forms and to total monetary information 1. Committee Full Name (and Fund if applicable) 3. ID Number 2. Type of Report 2 ND QU ARTER REPORT 9047F1 STEVE CARTER CAMPAIGN Total this Total this Start of Election Cycle: January 1, 2007 Reporting Period **Election Cycle** 4) Cash on Hand at Start \$ 100,00 RECEIPTS 5) Aggregated Contributions from Individuals (CRO-1205) \$ 6) Contributions from Individuals (CRO-1210) \$ \$ 2, 120,00 2, 225.00 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 (CRQ-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) \$ \$ 11e) Exempt Purchase Price Sales \$ (CRO-1265) \$ 12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e) \$ 2.120.00 2,225,00 **EXPENDITURES** 13) Disbursements 13a) Operating Expenditures (CRO-1310) \$ 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) \$ \$ (CRO-1320) 16) Refunds/Reimbursements from the Committee \$ \$ 17) In-Kind Contributions (CRO-1510) \$ 0 5,00 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) \$ \$ Ø 5.00 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18 2,220.00 \$ 2,220,00 ADDITIONAL INFORMATION (CRO-1330) \$ 20) Non-Monetary Gifts Given to Other Committees 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) \$ (CRO-1440) \$ \$ 26) Forgiven Loans 27) 48-Hour Notice Reports Sum (CRO-2220) \$ 28) Contributions to be Refunded (CRO-1215) \$

		rom Individua		Pg			Amendment Yes No
		individual contributione (and Fund if appl		ontributions und	er \$50 if form CI		
ի Նա						T	D Number
		CARTER CAM	- Frank			<u> </u>	9047F1
	tributor Informa				move	1, 6	
	lame, Mailing Addre de city, state, & zip)			b. Job Title/Profe		d. C	Comments
	PALPH M.			RETIR	ied		
	000 E. L			c. Employer's Nar	me/Specific Field	1	
•	•	TON, NC 272	10			e. E	lection Sum to Date
) W K L 174 ~ .						200,00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yyy	yy)	k. Amount
]	CHECK			5-25-10		\$ 200,00
							\$
							\$
	tributor Informa				move		<u> </u>
	ame, Mailing Addre			b. Job Title/Profes		d. Comments	
-	le city, state, & zip)			PRESID	ENT		
		WESTCOTT		c. Employer's Nar	c. Employer's Name/Specific Field		
		FAIRWAY DR.		WESTCOTT	Buick		
î	BURLING	TON, NC 2	.7215	7	1" 🗸 .		lection Sum to Date
L						1	100,00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yyy	/y)	k. Amount
	1	CHECK	<u> </u>		5-26-10		\$ 100.00
							\$
							\$
	ributor Informa				move		
	ame, Mailing Addre le city, state, & zip)		ļ	b. Job Title/Profes	ssion	d. Co	onments
				MANA	GER		
	rustin H		Ī	c. Employer's Nan	ne/Specific Field		
		62 EAST	I	Wist ONS	DRILLING	EI	lection Sum to Date
5	<i>SURLINGT</i>	ron, NC 27	1215	• • •	1		
		·	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy		250.00
	g. Account		In Illi-Italic 2	tion ——			
		CHECK			5-28-10		\$ 250,00
							\$
							\$
4. Tota	al only this Pa	age				\$	550.00
		RO-1210 Pages				\$	2,120,00
(Thic lie	no must he on line 6	of Detailed Summary Pa	200 CRO.1100\		,	1	<u> </u>

Amendment

Disc	losure	Report	Cover
	TOD CLE	THENDER	

Am	endi	ment			
	Ye	S		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.

1. Committee Information								
a. Full Name	a. Full Name							
Steve Carter Campaigh 6. Mailing Address (include City, State and Zip Code) 9 0 47 F1 d. Date Filed								
b. Mailing Address (inc	clude City, State	and Zip Code)					d. Date Filed	
33	12 Dor	ton, N	rt	_			7-6-10	
Bu	rling	ton, N	C 27	215			e. Phone Number	
							336-586-0600	
2. Report Year 3.	Period Start	Date (mm/dd/yy)	4. Period I	End Date (m	m/dd/yy)	5. Treasure	r Full Name	
2010						OF REAL PROPERTY AND PERSONS ASSESSED.	en J. Carter	
6. Type of Commit							rt from one category)	
Candidate Campaig		1000017	unicipal		e/County		Referendum	
PAC Independent Expendent			Organizationa Thirty-five da		Organizati Quarterly	ionai	Organizational Pre-referendum	
Legal Expense Fund			Pre-primary		First		Final	
Legar Expense i and	u .		Pre-election		Secon	nd	Supplemental Final	
7. Type of Fund	(if applicable, o		Pre-runoff		Third	l	Annual	
Booster Fund			Semi-annual		Fourt	th	☐ Special	
Building Fund			Mid Yea	r	Semi-annu	ıal		
		⊑	Year End	i 🔲	Mid '	100000000000000000000000000000000000000	10. Special Report Name	
Other:			Final	님	Year	End		
8. Number of Fund	iraisers this l	Report	Special	1	Final			
				_	Special			
11. Account Inform				11. Accoun				
a. Financial Institution				a. Financial I	nstitution	Full Name		
	ina B			1 D			10.1	
b. Purpose		c. Account Code		b. Purpose			c. Account Code	
Election Cam		1						
		d. Period Begin B	alance				d. Period Begin Balance	
		\$ 100,00					\$	
CERTIFICATION	Į .							
I certify that the Con	mmittee or Fun	d is in complianc	e with all appl	icable provisi	ons of Art	ticle 22A, 22E	3 & 22D-22M of Chapter 163	
			0	1			nds. I further certify that this	
report is complete, t	rue and correct	and that I have b	been trained by	the NC State	Board of	Elections.		
Steven 3	Ji Cart	er	1	toen-	1 Ou	Œ.	7/6//0	
Printe	ed Name of Signe	er	$ V_{\rm Sig}$	nature of App	inted Treas	urer	Date	
FOR OFFICE USI	E ONLY			-				
Date Received:	7-	-6-10	Employ	/ee:	G		ivery Method Normal Mail	
Date Postmarke	ed:		Employ	/ee:			Registered Mail Hand Delivered	
Date Scanned:			Employ	/ee:		_ 🗂	Electronically Filed	
Date Data Enter	red:		Employ	/ee:			Signer has not received mandatory training	
Please Note:							mittee address, treasurer,	
**		treasurer, custo						
You	must amend t	he Statement of	Organization	1 (CRO-210	UA-E) to	make comm	ittee changes.	

CRO-1000

NC State Board of Elections

August 2008

Detailed SummaryUse 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	Report	3. ID N	Number
Steve Carter Campaigh	2nd 91	vartar Report	9	D47FI
Start of Election Cycle: January 1, 2007	_	Total this Reporting Perio	d	Total this Election Cycle
4) Cash on Hand at Start		\$ /00,0		
<u>RECEIPTS</u>		·		
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$	
6) Contributions from Individuals	(CRO-1210)	\$ 2120.0	ა \$	2,220,0)
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)	\$	\$	
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10.11a.11b,11c,	11d and 11e)	\$ 2120.0	0 \$	2 220,00
<u>EXPENDITURES</u>				
13) Disbursements				10.74
13a) Operating Expenditures	(CRO-1310)	\$	\$	
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)	\$ 0	\$	5,01
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 13	5, 16 and 17)	\$ 0	\$	5.00
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18)	\$ 21/20,0	1) \$	2220,00
ADDITIONAL INFORMATION	•	···	IIS ESE	
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	2.0	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$		
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$		To the state of
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$	3	
24) Account Transfers Within the Committee	(CRO-1720)	\$	2	
25) Administrative Support	(CRO-1710)	\$	\$	
26) Forgiven Loans	(CRO-1440)	\$	\$	
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$	\$	
28) Contributions to be Refunded	(CRO-1215)	\$	\$	

		rom Individua ndividual contributio		Pg ontributions und		
1. Com	mittee Full Nam	e (and Fund if appl	icable)		· · · · · · · · · · · · · · · · · · ·	2. ID Number
	STEVE	CARTER CA	tmpaign			9D47F1
3. Con	tributor Informa	ation		Add 🔲 Rei	nove	
	ame, Mailing Addre	ess & Phone		b. Job Title/Profe	ssion	d. Comments
	le city, state, & zip)			Retired		
1	lalphm.Hul	+170		c. Employer's Nar	ne/Specific Field	
	000 E.L					
3	Burlingt	UN, NC 27	215			e. Election Sum to Date
	336-226	-8850				\$ 200,00
		it. Form of Payment	i. In-Kind Descrip	otion	j, Date (mm/dd/yyy	y) k. Amount
	1	Check			5-25-10	\$ 200.00
					!	\$
						\$
3. Cont	tributor Informa	ation		Add 🔲 Rer	nove	
ł	ame, Mailing Addre	ess & Phone		b. Job Title/Profes	ssion	d. Comments
	le city, state, & zip)			Presiden	.t	
D	avid W·W	estcott		c. Employer's Nar		
	3004 S. F	Fairway Dr.	c	westcott (
(Burlingto	in, NC 2161	7	0000000	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	e. Election Sum to Date
	336-584	-0399				\$ 100,00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yyy	y) k. Amount
	i	Check			5-26-10	\$ 100.00
						\$
				•		\$
3. Cont	ributor Informa	tion		Add 🔲 Rei	nove	•
	ame, Mailing Addre	ss & Phone		b. Job Title/Profes	ssion	d. Comments
	le city, state, & zip)					
U	nark Ha	11 ? Robin H	tall ?	c. Employer's Nar	ne/Specific Field	
	Justin H	all		Mark Hal	1 Electric	
	3462, n	all by East.	215			e. Election Sum to Date
	336- F	70-4621				\$ 250.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy	v) k. Amount
		Check			5-28-10	\$ 250,00
						\$
						\$

4. Total only this Page

5. Total of ALL CRO-1210 Pages

(This line must be on line 6 of Detailed Summary Page CRO-1100)

550.00

Contributions from Individuals Pg 2 of 3 Pves No Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Com	mittee Full Nam		2. I	D Number			
	Steve Co		1	9047FI			
3. Cont	ributor Informa	ation		Add 🔲 Ren	move		
a. Fult Ne	ame, Mailing Addre	ss & Phone		b. Job Title/Profes	ssion	d. Cr	omments
	e city, state, & zip)			Execut	tire !		·
	Samuel	C. Powell	!				
		+ Lake Pri	v-e	c. Employer's Nan			
			_	Powell =	interprises	E E	ection Sum to Date
	_	gton, NC 2	-1010	1			
	336-27	29-6201	ı	1		\$ 1	500.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy		k. Amount
	١	Check			6-1-10 \$ 50		\$ 500.00
							\$
							\$
3. Cont	ributor Informa	tion		Add 🔲 Ren	nove		
	ame, Mailing Addres	ss & Phone		b. Job Title/Profes	ssion	d. Cr	omments
	e city, state, & zip)		. 1	Preside	ent !		
F	D. Hori	naday III	!			1	
		,	Ī	c. Employer's Name/Specific Field			
Cide	71103 COD	ole mill Rd.	. !	Knitwe	x, Inc.	e. El	ection Sum to Date
	Snow Ca	mp, NC	!				
,	336-376	- 8979	!	1		\$	50.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy	/y)	k. Amount
		Check			6-3-10		\$ 50, 00
							\$
							\$
3. Conti	ributor Informa	ition		Add 🔲 Ren	nove		
	anie, Mailing Addre	ss & Phone		b. Job Title/Profession d. Comments			omments
(include	e city, state, & zip)		!	Chairma	in		
i	John M.	Jordan	!	c. Employer's Nan		ł	1
		rdan Prive	l	l- —————		1	
i		haw, NC 2	7340	Joraan r	Properties	e. El	ection Sum to Date
ļ	•		- 1	1	1	1	
		76-3132				<u> </u>	200.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy	y)	k. Amount
	l	Check			6-10-1	<u>0</u>	\$ 200,00
							\$
							\$
4. Tota	al only this Pa	age				\$	750,00
5. Tota	al of ALL CR	O-1210 Pages				¢	
	(This line must be on line 6 of Detailed Summary Page CRO-1100)						

Contributions from Individuals Pg 3 of 3 Pyes No Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

	1						
1. Committee Full Name (and Fund if applicable)						2. I	D Number
	Steve Carter Campaigh					(9047F1
	ributor Informa	tion		Add 🔲 Rei	nove		
	ame, Mailing Addre	ss & Phone		b. Job Title/Profe	ssion	d. Co	omments
	e city, state, & zip)			ceo			
	Beth C.	Powell		c. Employer's Nar	ne/Specific Field		
	2300 U	ork Rd		1			
	Burling	ton NC 2	7215	omnika	esources	e. El	ection Sum to Date
	336~ 5	84-0166				\$	50,00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy	(y)	k. Amount
	1	Check			6-10-10		\$ 50.00
							\$
							\$
	ributor Informa				nove		
	nne, Mailing Addre	ss & Phone		b. Job Title/Profe	ssion	d. Co	omments
	e city, state, & zip)			President	<u> </u>		
	romas L.			c. Employer's Nar	ne/Specific Field		
2	NOD FIC	uning Court		Coble Trench			
B	urling to	n, NC 272	-15	Safty		e. Election Sum to Date	
U	336-584						750.00
f, Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy	/y)	k. Amount
	(Check			6-30-1	o	\$ 750.00
							\$
							\$
3. Cont	ributor Informa	tion		Add 🔲 Rei	nove		
	nme, Mailing Addre	ss & Phone		b. Job Title/Profe		d. Co	omments
	e city, state, & zip)			Technical So			
00	= 50 = 50 1	c. I howans h	D.1	c. Employer's Name/Specific Field			
3	021 7110	arlborough on, NC 27	KW VE	Manufacti	rers	a Fi	ection Sum to Date
6	jurlingt	on, NC 21	から	Chemica			
	336-586	1-8263				\$ 7	20.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy	/y)	k. Amount
	}	Cash			6-19-10	,	\$ 20.00
							\$
							\$
4. Tota	al only this Pa	age				\$	820,00
5. Tota	al of ALL CR	O-1210 Pages				\$	7 . 1 d da
(This li	(This line must be on line 6 of Detailed Summary Page CRO-1100)						