

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 Steve Carter Campaign	c. ID Number 9D47F1
b. Mailing Address (include City, State and Zip Code) 3312 Doral Court Burlington, NC 27215	d. Date Filed 01/10/2011
	e. Phone Number 336.586.0600

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2010	07/01/2010	10/16/2010	Steven J. Carter, Treasurer

6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	Municipal	State/County	Referendum
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	Quarterly	<input type="checkbox"/> Pre-referendum
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-runoff	<input checked="" type="checkbox"/> Third	<input type="checkbox"/> Annual
<input type="checkbox"/> Building Fund		Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> Other:		<input type="checkbox"/> Mid Year	Semi-annual	
		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	
8. Number of Fundraisers this Report		10. Special Report Name		
1				

11. Account Information		11. Account Information	
a. Financial Institution Full Name Carolina Bank		a. Financial Institution Full Name	
b. Purpose Election cam	c. Account Code 1	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 2220.00		d. Period Begin Balance \$

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.

Steven J. Carter _____ 01/10/2011 _____
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: 1-11-11 Employee: JG Delivery Method Normal Mail

Date Postmarked: _____ Employee: _____ Registered Mail

Date Scanned: _____ Employee: _____ Hand Delivered

Date Data Entered: _____ Employee: _____ Electronically Filed

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.

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 Report		3. ID Number	
Steve Carter Campaign		3 rd Quarter Report		9D47F1	
Start of Election Cycle: January 1, 2007		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 2220.00		\$ 0	
<u>RECEIPTS</u>					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 1060.00	\$ 1060.00	\$ 1060.00	\$ 1060.00
6) Contributions from Individuals	(CRO-1210)	\$ 1116.95	\$ 3341.95	\$ 3341.95	\$ 3341.95
7) Contributions from Political Party Committees	(CRO-1220)	\$ 515.38	\$ 515.38	\$ 515.38	\$ 515.38
8) Contributions from Other Political Committees	(CRO-1230)	\$ 200.00	\$ 200.00	\$ 200.00	\$ 200.00
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)	\$	\$	\$	\$
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 2892.33	\$ 5117.33	\$ 5117.33	\$ 5117.33
<u>EXPENDITURES</u>					
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$ 2149.88	\$ 2149.88	\$ 2149.88	\$ 2149.88
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 456.95	\$ 456.95	\$ 456.95	\$ 456.95
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)	\$ 722.33	\$ 727.33	\$ 727.33	\$ 727.33
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 3329.16	\$ 3334.16	\$ 3334.16	\$ 3334.16
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 1783.17	\$ 1783.17	\$ 1783.17	\$ 1783.17
<u>ADDITIONAL INFORMATION</u>					
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$			
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$			
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$ 456.95			
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-2200)	\$	\$	\$	\$
28) Contributions to be Refunded	(CRO-1215)	\$	\$	\$	\$

Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Steve Carter Campaign					9D47F1	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Roger K. Parker 1617 St. Andrews Dr. Mebane, NC 27302 336.563.0446			Retired			
			c. Employer's Name/Specific Field			
			e. Election Sum to Date			
				\$ 160.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	check		10/08/2010	\$ 160.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Ricky A. Rose 1017 Georgetowne Dr. Elon, NC 27244 336.538.9603 Home			President			
			c. Employer's Name/Specific Field			
			e. Election Sum to Date			
				\$ 200.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	check		10/08/2010	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
W. Clarke Lindley 2522 Pineway Dr. Burlington, NC 27215 336.584.1288 Home 336.449.7521 Office			President			
			c. Employer's Name/Specific Field			
			e. Election Sum to Date			
				\$ 200.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	check		10/08/2010	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 560.00	
5. Total of ALL CRO-1210 Pages					\$ 1,116.95	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

Contributions from Individuals

Amendment

 Pg _____ of _____ Yes No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Steve Carter Campaign					9D47F1	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Robert E. Sharpe, Jr. 611 South Mebane St. Burlington, NC 27215 336.228.9682 Home 336.228.8899 Office			Attorney			
			c. Employer's Name/Specific Field			
			Robert E. Sharpe, Jr. Attorney at Law			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	1	check		10/08/2010		\$ 100.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Steven J. Carter 3312 Doral Court Burlington, NC 27215 336.586.0600			Financial & Management Conslutant		See forms 1320 and 1510 Personal Visa used	
			c. Employer's Name/Specific Field			
			Carter Associates			
					e. Election Sum to Date	
					\$ 456.95	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	1	In-Kind	flag, canopy	06/15/2010		\$ 214.51
<input type="checkbox"/>	1	In-Kind	webside, flyers	09/16/2010		\$ 242.44
<input type="checkbox"/>						\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
4. Total only this Page					\$ 556.95	
5. Total of ALL CRO-1210 Pages					\$ 1,116.95	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

Contributions from Political Party Committees

Use this form to report contributions from a political party

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Steve Carter Campaign				9D47F1	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
Alamance County Republican Party 608 N. O'Kelly Ave. Elon, NC 27244 Allen Page, Treasurer 336.449.7288					
				c. Election Sum to Date	
				\$ 515.38	
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount	
1	Check		09/07/2010	\$ 250.00	
1	In-Kind	Alamance News add candidates share	09/17/2010	\$ 265.38	
				\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
				c. Election Sum to Date	
				\$	
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount	
				\$	
				\$	
				\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
				c. Election Sum to Date	
				\$	
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount	
				\$	
				\$	
				\$	
4. Total only this Page				\$ 515.38	
5. Total of ALL CRO-1220 Pages <i>(This line must be on line 7 of Detailed Summary Page CRO-1100)</i>				\$ 515.38	

Contributions from Other Political Committees

Use this form to report contributions from other candidate, referendum or PAC committees

1. Committee Full Name (and Fund if applicable)				2. ID Number	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Johnson for Sheriff Committee Paul E. Cobb, Jr. Treasurer 3530 Cardwell Dr. Burlington, NC 27215 336.227.1495 Office		b. Type of Committee <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum		d. Comments	
		c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ 100.00	
		Alamance County			
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
1	check		10/08/2010	\$ 100.00	
				\$	
				\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Citizens for Barber David Barber 1486 N. NC Highway 87 Elon, NC 27244 336.584.8119 Home 336.570.6565 Office		b. Type of Committee <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum		d. Comments	
		c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ 100.00	
		Alamance County			
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
1	check		10/08/2010	\$ 100.00	
				\$	
				\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee <input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum		d. Comments	
		c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
				\$	
4. Total only this Page				\$ 200.00	
5. Total of ALL CRO-1230 Pages				\$ 200.00	
<i>(This line must be on line 8 of Detailed Summary Page CRO-1100)</i>					

Disbursements

Use this form to report expenditures from the committee for: operating expenses, contributions to candidate/political committees and coordinated party expenditures.

1. Committee Full Name (and Fund if applicable)					2. ID Number
Steve Carter Campaign					9D47F1
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments
Van's Advertising Items, Signs & Printing 3264 Van Drive Burlington, NC 27215 336.226.7400					
			c. Level Registered (Specify)		e. Election Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 2,149.88
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	B. printing	07/26/2010	\$1,464.32	yard signs campaign cards
1	Check	B. printing	10/04/2010	\$685.56	nail files pencils
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify)		e. Election Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify)		e. Election Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				\$	
5. Total only this Page					
					\$ 2,149.88
6. Total of ALL CRO-1310 Pages					
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>					
<i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>					\$ 2,149.88
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					
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)					

Refunds/Reimbursements From the Committee

Use this form to report refunds/reimbursements, including contributions returned to the contributor.

1. Committee Full Name (and Fund if applicable)			2. ID Number	
Steve Carter Campaign			9D47F1	
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date
Steven J. Carter 3312 Doral Court Burlington, NC 27215 336.586.0600		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		07/18/2010
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		e. Level Registered (Specify)		i. Original Receipt Amount
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 214.51
		f. Purpose Code	j. Election Sum to Date	
		p*	\$ 456.95	
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code
Consultant	Carter Associates	pay Visa bill		1
l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount	
check	reimburse Visa bill. see for 1210 & 1510	7/26/2010	\$ 214.51	
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date
Steven J. Carter 3312 Doral Court Burlington, NC 27215 336.586.0600		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		09/17/2010
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		e. Level Registered (Specify)		i. Original Receipt Amount
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 242.44
		f. Purpose Code	j. Election Sum to Date	
		p*	\$ 456.95	
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code
Consultant	Carter Associates	Pay Visa Bill		1
l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount	
check	Reimburse Visa bill. see 1210 and 1510	10/12/2010	\$ 242.44	
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date
		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		e. Level Registered (Specify)		i. Original Receipt Amount
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$
		f. Purpose Code	j. Election Sum to Date	
			\$	
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code
l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount	
			\$	
4. Total only this Page				\$ 456.95
5. Total of ALL CRO-1320 Pages (This line must be on line 16 of Detailed Summary Page CRO-1100)				\$ 456.95
L - Returned to Contributor M - Overpayment for Service N - Exceeded Contribution Limit P* - Reimbursement of In-Kind O* Other				
* Codes require detailed explanation in required remarks field (m)				

Disbursements

Use this form to report expenditures from the committee for: operating expenses, contributions to candidate/political committees and coordinated party expenditures.

1. Committee Full Name (and Fund if applicable)					2. ID Number
Steve Carter Campaign					9D47F1
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Van's Advertising Items. Signs & Printing 3264 Van Drive Burlington, NC 27215 336.226.7400			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
					\$ 2,149.88
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	B. printing	07/26/2010	\$1,464.32	yard signs campaign cards
1	Check	B. printing	10/04/2010	\$685.56	nail files pencils
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		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
				\$	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		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
				\$	
				\$	
5. Total only this Page					
					\$ 2149.88
6. Total of ALL CRO-1310 Pages					
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>					\$ 2149.88
<i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>					
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					
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)					

Disbursements

Use this form to report expenditures from the committee for: operating expenses, contributions to candidate/political committees and coordinated party expenditures.

1. Committee Full Name (and Fund if applicable)					2. ID Number
Steve Carter Campaign					9D47FI
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses		<input checked="" type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) BB&T Financial FSB Visa Card of Steven J. Carter P. O. Box 580435 Charlotte, NC 28258-0435 800.476.4228		b. Coordinated Committee Name 		d. Comments 	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	F&I		\$456.95	canopy, stamps flag, other
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name 		d. Comments 	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name 		d. Comments 	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				\$	
5. Total only this Page					\$ 456.95
6. Total of ALL CRO-1310 Pages					\$ 456.95
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					
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)					

Debts and Obligations Owed By the Committee

Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card payments.

1. Committee Full Name (and Fund if applicable) Steve Carter Campaign		2. ID Number 9D47F1	
3. Creditor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip) BB&T Financial FSB Visa Card of Steven J. Carter P. O. Box 580435 Charlotte, NC 28258-0435 800.476.4228		Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor.	
		b. Description of Creditor Visa Credit Card of Candidate Steven J. Carter	
c. Beginning Balance	d. Total Amount Paid	e. Total Amount Incurred	f. Remaining Balance
\$ 0	\$ 456.95	\$ 456.95	\$ 0
g. Incurred Debts (what the committee received)			
g1. Date (mm/dd/yyyy)	g2. Amount	g1. Date (mm/dd/yyyy)	g2. Amount
6/15 & 18/2010	\$ 144.13	6/18&8/23/2010	\$ 42.03
g3. Item Description American Flag & Canopy		g3. Item Description Campaign Badges	
g4. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) Wal-Mart Super Center 3141 Garden Rd. Burlington, NC 27215 336.584.6400		g4. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) Signworxpress 2529 S. Church Street Burlington, NC 27215 336.437.9889	
3. Creditor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor.	
		b. Description of Creditor	
c. Beginning Balance	d. Total Amount Paid	e. Total Amount Incurred	f. Remaining Balance
\$	\$	\$	\$
g. Incurred Debts (what the committee received)			
g1. Date (mm/dd/yyyy)	g2. Amount	g1. Date (mm/dd/yyyy)	g2. Amount
9/16/2010	\$ 215.50	5/27&6/30/2010	\$ 55.29
g3. Item Description campaign flyer printing		g3. Item Description Website Expense	
g4. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) UPS Store 2966 S. Church St. Burlington, NC 27215 336.585.0022		g4. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) Go Daddy.com 14455 N. Hayden Rd. Suite 219 Scottsdale, AZ 85260 480.505.8899	
4. Total only this Page (This should be the sum of all item '3f' from this page)			\$ 456.95
5. Total of ALL CRO-1610 Pages (This line must be on line 22 of Detailed Summary Page CRO-1100)			\$ 456.95

Disclosure Report Cover

Amendment 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

1. Committee Information			
a. Full Name Steve Carter Campaign		c. ID Number 9D47F1	
b. Mailing Address (include City, State and Zip Code) 3312 Doral Court Burlington, NC 27215		d. Date Filed 10/25/2010	
		e. Phone Number 336.586.0600	
2. Report Year 2010	3. Period Start Date (mm/dd/yy) 07/01/2010	4. Period End Date (mm/dd/yy) 10/16/2010	5. Treasurer Full Name Steven J. Carter, Treasurer
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)	
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent <input type="checkbox"/> Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser		Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
7. Type of Fund (if applicable, check one)		State/County <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input checked="" type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:		Referendum <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special	
8. Number of Fundraisers this Report 1		10. Special Report Name	
11. Account Information		11. Account Information	
a. Financial Institution Full Name Carolina Bank		a. Financial Institution Full Name	
b. Purpose Election cam	c. Account Code 1	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 2,220.00		d. Period Begin Balance \$
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.			
Steven J. Carter Printed Name of Signer		_____ Signature of Appointed Treasurer	10/25/2010 Date
FOR OFFICE USE ONLY			
Date Received:	<u>10-25-10</u>	Employee:	<u>JG</u>
Date Postmarked:	_____	Employee:	_____
Date Scanned:	_____	Employee:	_____
Date Data Entered:	_____	Employee:	_____
Delivery Method			
<input type="checkbox"/> Normal Mail			
<input type="checkbox"/> Registered Mail			
<input checked="" type="checkbox"/> Hand Delivered			
<input type="checkbox"/> Electronically Filed			
<input type="checkbox"/> 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.			

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) Steve Carter Campaign		2. Type of Report 3 rd Quarter Report		3. ID Number 9D47F1	
Start of Election Cycle: January 1, <u>2007</u>		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 2220.00		\$	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 1060.00		\$ 1060.00	
6) Contributions from Individuals (CRO-1210)		\$ 1,116.95		\$ 3341.95	
7) Contributions from Political Party Committees (CRO-1220)		\$ 515.38		\$ 515.38	
8) Contributions from Other Political Committees (CRO-1230)		\$ 200.00		\$ 200.00	
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)		\$		\$	
11 e) Exempt Purchase Price Sales (CRO-1265)		\$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 2,892.33		\$ 5,117.33	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 2,149.88		\$ 2,149.88	
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)		\$ 456.95		\$ 456.95	
17) In-Kind Contributions (CRO-1510)		\$ 722.33		\$ 727.33	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 3,329.16		\$ 3,334.16	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 1,783.17		\$ 1,783.17	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$		\$	
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)		\$		\$	
26) Forgiven Loans (CRO-1440)		\$		\$	
27) 48-Hour Notice Reports Sum (CRO-2200)		\$		\$	
28) Contributions to be Refunded (CRO-1215)		\$		\$	

Aggregated Contributions from Individuals

Page

1 of 3

Amendment

Yes No

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

1. Committee Full Name (and Fund if applicable)		2. ID Number				
Steve Carter Campaign		9D47F1				
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add	1	check		10/02/2010	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	check		10/02/2010	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 40.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 10.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 10.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 10.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 10.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	check		10/02/2010	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	check		10/02/2010	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 10.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 10.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 10.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 10.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 10.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 10.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 10.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 10.00	
<input type="checkbox"/> Remove						
4. Total only this Page					\$ 450.00	
5. Total of ALL CRO-1205 Pages					\$ 1060.00	
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

Aggregated Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)		2. ID Number				
Steve Carter Campaign		9D47F1				
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 10.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 10.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 10.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 10.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	check		10/02/2010	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	check		10/02/2010	\$ 10.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	check		10/02/2010	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	check		10/02/2010	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	check		10/02/2010	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	check		10/02/2010	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 30.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 10.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 25.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		10/02/2010	\$ 20.00	
<input type="checkbox"/> Remove						
4. Total only this Page					\$ 515.00	
5. Total of ALL CRO-1205 Pages					\$ 1060.00	
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Steve Carter Campaign						9D47F1	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Roger K. Parker 1617 St. Andrews Dr. Mebane, NC 27302 336.563.0446				Retired			
				c. Employer's Name/Specific Field			
						e. Election Sum to Date	
						\$ 160.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Ricky A. Rose 1017 Georgetowne Dr. Elon, NC 27244 336.538.9603 Home				President			
				c. Employer's Name/Specific Field			
				American Furniture Warehouse, Inc.			
						e. Election Sum to Date	
						\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
W. Clarke Lindley 2522 Pineway Dr. Burlington, NC 27215 336.584.1288 Home 336.449.7521 Office				President			
				c. Employer's Name/Specific Field			
				Lindley Laboratories, Inc.			
						e. Election Sum to Date	
						\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 560.00	
5. Total of ALL CRO-1210 Pages						\$ 1,116.95	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Steve Carter Campaign					9D47F1	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Robert E. Sharpe, Jr. 611 South Mebane St. Burlington, NC 27215 336.228.9682 Home 336.228.8899 Office			Attorney			
			c. Employer's Name/Specific Field			
			Robert E. Sharpe, Jr. Attorney at Law		e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Steven J. Carter 3312 Doral Court Burlington, NC 27215 336.586.0600			Financial & Management Conslutant		See forms 1320 and 1510 Personal Visa used	
			c. Employer's Name/Specific Field			
			Carter Associates		e. Election Sum to Date	
					\$ 456.95	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 556.95	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 1,116.95	

Contributions to be Reimbursed

Use this form to report Contributions of \$1,000 or less to be reimbursed within 7 days.
Reimbursements must be disclosed on the Refunds/Reimbursements Form (CRO-1320).

1. Committee Full Name			2. ID Number		
Steve Carter Campaign			9D47F1		
3. Contributor Information		<input type="checkbox"/>	Add	<input type="checkbox"/>	Remove
Full Name & Mailing Address of the Payee (the original vendor)			Full Name & Mailing Address of the Reimbursee (the person to whom the campaign check is written)		
BB&T Financial, FSB Visa P. O. Box 580435 Charlotte, NC 28258-0435			Steven J. Carter 3312 Doral Court Burlington, NC 27215 336.586.0600		
a. Contribution Description		b. Date (mm/dd/yyyy)		c. Credit Card Y/N	d. Amount
Visa purchase of flag, canopy, website cost, stamps & badges		06/15/2010		Y	\$ 214.51
3. Contributor Information		<input type="checkbox"/>	Add	<input type="checkbox"/>	Remove
Full Name & Mailing Address of the Payee (the original vendor)			Full Name & Mailing Address of the Reimbursee (the person to whom the campaign check is written)		
BB&T Financial, FSB Visa P. O. Box 580435 Charlotte, NC 28258-0435			Steven J. Carter 3312 Doral Court Burlington, NC 27215 336.586.0600		
a. Contribution Description		b. Date (mm/dd/yyyy)		c. Credit Card Y/N	d. Amount
Visa purchase of addi website cost, flyers, name badges		09/16/2010		Y	\$ 242.44
3. Contributor Information		<input type="checkbox"/>	Add	<input type="checkbox"/>	Remove
Full Name & Mailing Address of the Payee (the original vendor)			Full Name & Mailing Address of the Reimbursee (the person to whom the campaign check is written)		
a. Contribution Description		b. Date (mm/dd/yyyy)		c. Credit Card Y/N	d. Amount
					\$
3. Contributor Information		<input type="checkbox"/>	Add	<input type="checkbox"/>	Remove
Full Name & Mailing Address of the Payee (the original vendor)			Full Name & Mailing Address of the Reimbursee (the person to whom the campaign check is written)		
a. Contribution Description		b. Date (mm/dd/yyyy)		c. Credit Card Y/N	d. Amount
					\$
4. Total only this Page					\$ 456.95
5. Total of ALL CRO-1215 Pages					\$ 456.95
<i>(This line goes in line 28 of Detailed Summary Page CRO-1100)</i>					

Contributions from Political Party Committees

Use this form to report contributions from a political party

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Steve Carter Campaign				9D47F1	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
Alamance County Republican Party 608 N. O'Kelly Ave. Elon, NC 27244 Allen Page, Treasurer 336.449.7288					
				c. Election Sum to Date	
				\$ 515.38	
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount	
1	Check		09/07/2010	\$ 250.00	
1		Alamance News add candidates share	09/17/2010	\$ 265.38	
				\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
				c. Election Sum to Date	
				\$	
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount	
				\$	
				\$	
				\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
				c. Election Sum to Date	
				\$	
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount	
				\$	
				\$	
				\$	
4. Total only this Page				\$ 515.38	
5. Total of ALL CRO-1220 Pages				\$ 515.38	
<i>(This line must be on line 7 of Detailed Summary Page CRO-1100)</i>					

Contributions from Other Political Committees

Use this form to report contributions from other candidate, referendum or PAC committees

1. Committee Full Name (and Fund if applicable)				2. ID Number	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee		d. Comments	
Johnson for Sheriff Committee Paul E. Cobb, Jr. Treasurer 3530 Cardwell Dr. Burlington, NC 27215 336.227.1495 Office		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC			
		<input type="checkbox"/> Referendum			
		c. Level Registered (Specify)			
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County:		e. Election Sum to Date	
		<input type="checkbox"/> State <input type="checkbox"/> Municipality:			
		Alamance County		\$ 100.00	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
				\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee		d. Comments	
Citizens for Barber David Barber 1486 N. NC Highway 87 Elon, NC 27244 336.584.8119 Home 336.570.6565 Office		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC			
		<input type="checkbox"/> Referendum			
		c. Level Registered (Specify)			
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County:		e. Election Sum to Date	
		<input type="checkbox"/> State <input type="checkbox"/> Municipality:			
		Alamance County		\$ 100.00	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
				\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee		d. Comments	
		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC			
		<input type="checkbox"/> Referendum			
		c. Level Registered (Specify)			
		<input type="checkbox"/> Federal <input type="checkbox"/> County:		e. Election Sum to Date	
		<input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				\$	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
				\$	
4. Total only this Page				\$ 200.00	
5. Total of ALL CRO-1230 Pages				\$ 200.00	
<i>(This line must be on line 8 of Detailed Summary Page CRO-1100)</i>					

Disbursements

Use this form to report expenditures from the committee for: operating expenses, contributions to candidate/political committees and coordinated party expenditures.

1. Committee Full Name (and Fund if applicable)					2. ID Number
Steve Carter Campaign					9D47F1
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments
Van's Advertising Items. Signs & Printing 3264 Van Drive Burlington, NC 27215 336.226.7400					
			c. Level Registered (Specify)		e. Election Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$ 2,149.88
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	signs cards	07/26/2010	\$1,464.32	
1	Check	files pencil	10/04/2010	\$685.56	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify)		e. Election Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify)		e. Election Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				\$	
5. Total only this Page					\$ 2,149.88
6. Total of ALL CRO-1310 Pages					\$ 2,149.88
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>					
<i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>					
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					
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)					

Refunds/Reimbursements From the Committee

Use this form to report refunds/reimbursements, including contributions returned to the contributor.

1. Committee Full Name (and Fund if applicable)			2. ID Number	
Steve Carter Campaign			9D47F1	
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date
Steven J. Carter 3312 Doral Court Burlington, NC 27215 336.586.0600		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		07/18/2010
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		e. Level Registered (Specify)		i. Original Receipt Amount
<input type="checkbox"/> Federal <input type="checkbox"/> County:		\$ 214.51		
<input type="checkbox"/> State <input type="checkbox"/> Municipality:				
f. Purpose Code			j. Election Sum to Date	
P*			\$ 456.95	
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code
Consultant	Carter Associates	pay Visa bill		1
l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount	
check	reimburse Visa bill, see for 1210 & 1510	7/26/2010	\$ 214.51	
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date
Steven J. Carter 3312 Doral Court Burlington, NC 27215 336.586.0600		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		09/17/2010
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		e. Level Registered (Specify)		i. Original Receipt Amount
<input type="checkbox"/> Federal <input type="checkbox"/> County:		\$ 242.44		
<input type="checkbox"/> State <input type="checkbox"/> Municipality:				
f. Purpose Code			j. Election Sum to Date	
P*			\$ 456.95	
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code
Consultant	Carter Associates	Pay Visa Bill		1
l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount	
check	Reimburse Visa bill, see 1210 and 1510	10/12/2010	\$ 242.44	
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date
		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		e. Level Registered (Specify)		i. Original Receipt Amount
<input type="checkbox"/> Federal <input type="checkbox"/> County:		\$		
<input type="checkbox"/> State <input type="checkbox"/> Municipality:				
f. Purpose Code			j. Election Sum to Date	
			\$	
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code
l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount	
			\$	
4. Total only this Page				\$ 456.95
5. Total of ALL CRO-1320 Pages (This line must be on line 16 of Detailed Summary Page CRO-1100)				\$ 456.95
L - Returned to Contributor M - Overpayment for Service N - Exceeded Contribution Limit P* - Reimbursement of In-Kind O* Other				
* Codes require detailed explanation in required remarks field (m)				

In-Kind Contributions

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.
Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Steve Carter Campaign		9D47F1	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
Steven J. Carter 3312 Doral Court Burlington, NC 27215 336.586.0600		<input type="checkbox"/> Individual <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			d. Election Sum to Date \$ 456.95
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Personal Visa purchase of flag, canopy, website cost, stamps & name badge, several dates		06/15/2010	\$ 214.51
Personal Visa purchase of additional website cost, flyers, name badges, several dates		09/16/2010	\$ 242.44
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
Alamance County Republican Party 608 N. O'Kelly Ave. Elon, NC 27244 Allen Page, Treasurer 336.449.7288		<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input checked="" type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	prorated share of Alamance News add cost
			d. Election Sum to Date \$ 265.38
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Prorata share of Alamance News add cost		9/17/2010	\$ 265.38
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
		<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			d. Election Sum to Date \$
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
			\$
			\$
			\$
4. Total only this Page		\$ 722.33	
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		\$ 722.33	