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							
'JGH WEBSTER					CD482F				
b. Mailing Address (inc	lude City, State and Zip Code)	····			d. Date Filed				
208 SHADOWBRO		07/17/2012							
		e. Phone Number							
					336-514-6007				
2. Report Year	3. Period Start Date (mm/c	d. Period l (mm/dd/yy)			Treasurer Full Name				
2012	4/22/12	- 6/3	30/12	HUGH WEBSTER					
6. Type of Commit	tee (Check One)	9. Type of Report	(check on	ly one type of report f					
Candidate Camp		Municipal	State/Co		Referendum				
PAC	Referendum	Organizational		Organizational	Organizational				
Independent Expenditure Legal Expense F	Joint Fundraiser	Thirty-five day	,	Quarterly	Pre-referendum				
7. Type of Fund	(if applicable, check one)	Pre-primary		First	Final				
"Booster Fund"		Pre-election		Second	Supplemental Final				
Building Fund		Pre-runoff		Third	Annual				
		Semi-annual	. 니 .	Fourth Semi-annual	Special				
		Mid Year Year End		Mid Year	10. Special Report Name				
Other:		Final	'	Year End					
C Number of Fund	Iraisers this Report	Special		Final					
vumber of Func	il disers this report	1 .		Special					
11. Account Inform	nation	<u>.l</u>	11. Account	Information					
a. Financial Institution				titution Full Name					
SUNTRUST BAN									
b. Purpose	c. Account Code		b. Purpose		c. Account Code				
CHECKING	1								
	d. Period Begin Balanc	e	1		d. Period Begin Balance				
	\$ 1234				\$				
CERTIFICATION		· · · · · · · · · · · · · · · · · · ·	<u> </u>						
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 Broard of Elections.									
HUGH W	EBSTER	15/1/	an Inth		17JULY2012				
	Printed Name of Signer	1100	iggature/of/Appoin	ned Treasurer	Date				
FOR OFFICE USE	ONLY	,	1/	r	Delivery Method				
Date Received	7/17/12	Employee:	<u></u>	<u>5 </u>	Normal Mail Registered Mail				
Date Postmark	ed:	Employee:			Hand Delivered Electronically Filed				
Date Scanned:		Employee:			Signer has not received mandatory training				
Date Data Ente	ered:	Employee:			manager y and and				
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.

✓ Yes ✓ No

3. ID Number 2. Type of Report 1. Committee Full Name (and Fund if applicable) CD482F **HUGH WEBSTER** QTR Total this Total this 2009 January 1, **Start of Election Cycle: Election Cycle** Reporting Period 1234 \$ Cash on Hand at Start RICEIPIS \$ **Aggregated Contributions from Individuals** (CRO-1205) \$ 957 \$ 200 (CRO-1210) Contributions from Individuals 6) \$ **Contributions from Political Party Committees** (CRO-1220) \$ 7) \$ \$ **Contributions from Other Political Committees** (CRO-1230) \$ 1000 Loan Proceeds (CRO-1410) \$ (CRO-1240) Refunds/Reimbursements To the Committee 11) Other Receipt Sources \$ (CRO-1250) 11a) Interest on Bank Accounts \$ 11b) Contributions from Not-for-Profit Organizations (CRO-1250) \$ \$ 11c) Outside Sources of Income (CRO-1250) S 11d) Legal Expense Fund - Other Sources (CRO-1270) \$ \$ (CRO-1265) 11 e) Exempt Purchase Price Sales \$ 200 \$ 1957 TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e) 12) PARENDERURES ** Disbursements 13) 813 1336 (CRO-1310) 13a) Operating Expenditures \$ \$ (CRO-1310) 13b) Contributions to Candidates/Political Committees \$ (CRO-1310) 13c) Coordinated Party Expenditures \$ (CRO-1315) 14) Aggregated Non-Media Expenditures \$ (CRO-1420) 15) Loan Repayments \$ (CRO-1320) \$ Refunds/Reimbursements From the Committee \$ (CRO-1510) \$ **In-Kind Contributions** 17) S 1336 \$ 813 TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) 18) S \$ 621 621 Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) 19) ADDITIONAL INFORMATION \$ (CRO-1330) Non-Monetary Gifts Given to Other Committees 20) (CRO-1430) Outstanding Loans (incl. ones from other campaigns) 21) \$ 1000 Debts and Obligations owed By the Committee (CRO-1610) 22) Debts and Obligations owed To the Committee (CRO-1620) 23) **Account Transfers Within the Committee** (CRO-1720) 24) \$ (CRO-1710) **Administrative Support** 25) \$ (CRO-1440) Forgiven Loans 26) \$ \$ (CRO-2200) 48-Hour Notice Reports Sum \$ (CRO-1215) Contributions to be Refunded 28)

		m Individuals vidual contributions o	over \$50	0 or cont	ribution	Pg is unde	of \$50 if form CR	O 1205 is no	Amendment Yes ot used	No.	
		and Fund if applical					<u></u>	2. ID Nun			
HUGH WEBSTER						CD482F					
3. Contr	ibutor Informatio	on .		Add		Ren	nove				
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	city, state, & zip)	o C NC IBIA/ (2		AUTO	DEA:	LER					
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3. Contr	butor Informatio	on .		Add		Ren	iove				
	ie, Mailing Address é	& Phone		b. Job Title/Profession				d. Comments			
(include	city, state, & zip)			-							
				c. Employer's Name/Specific Field							
						e. Election Sum to Date					
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4. Total only this Page								\$		200.00	
5. Total of ALL CRO-1210 Pages						•	\$		200.00		

Disburseme	ents			Pg	of 2	Yes No				
Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.										
	coordinated party ex ull Name (and Fund				<u> </u>	2. ID Number				
HUGH WEBST		u ii applicabic)				CD482F				
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)										
Operating E				ates/Political Committees	Cool	rdinated Party Expenditures				
4. Payee Inform	ation			.dd 🔲	Remove					
	ng Address & Phone		b.	Coordinated Committee N	ame	d. Comments				
(include city, state,										
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VAN'S ADVER	TISING, BURLIN,	NC	C.	Level Registered (Specify) Federal	County:					
			-	State	Municipality:	e. Election Sum to Date				
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						\$ 593				
f. Account Code	g. Form of Payment	b. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks				
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1	CK	В		05/18/12	\$281	VINYL SIGNS				
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	, 825 S MAIN ST,		1							
	N, NC 27215		c.	Level Registered (Specify)						
336-222-0717	ŕ			Federal	County:					
				State	Municipality:	e. Election Sum to Date				
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		h Burnana Cada		[1 T) (17 14	1	k. Required Remarks				
. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	PRINT CALENDARS				
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(include city, state,			4							
OFFICE DEPOT, 1825 S CHURCH ST				175 14 145 150						
BURLINGTO	N, NC 27215		c.	Level Registered (Specify) Federal	County:					
				State	Municipality:	e. Election Sum to Date				
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(This line goes in	line 13a of Detailed Sun	nmary Page CRO-110	00 if	Operating Expenses)		813				
(This line goes in	line 13b of Detailed Sun	nmary Page CRO-116	00 if	Contrib to Candidates/Polit	ical Comm)	\$ 313				
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)										
	es (List detailed ex	penditure code in	ι (h.) above)						
A* - Media B* - Printing C* - Fun						her Candidate g Public Office Expenses				
E - Salaries F*-Equipment G-Politi I - Postage J - Penalties K*-Offi				-	n to Legal Expense Fund					
I - Postage O* - Other	a - Lenanies	K" + OIII	1CE 1	Dapolisos	Z Donatio					
* Codes require detailed explanation in required remarks field (k)										

Disbursements

No

Disbursem					Pg		of <u>2</u>		No No	
	o report expenditures I coordinated party ex		nmitte	ee for; operating e	xpenses,	, contributions	to candio	late/political		
	Full Name (and Fun		ole)					2. ID Numbe	r	
HUGH WEBS			,					CD4		
3. Type of Dish	oursement (Plea	ise use separ	ate Ci	RO-1310 forms fo	or each i	tvne of Disbur	sement.)			
Operating I				didates/Political Com	_			ed Party Expenditure	es	
4. Payee Inform				Add		Remove				
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	line 13a of Detailed Sum	mary Paga CRI	7-1100	0 if Ongrating Evagness						
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I - Postage						n to Legal Expense Fund				
O* - Other				-		_		-		
* Codes require	e detailed explanati	on in requir	ed rei	narks field (k)						