Disclosure Report Cover			
Use this form for general report and committee inc.			

Amendment ☐ Yes 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 NOTE VAUGHAN COMMISSIONER
b. Mailing Address (include City, State and Zip Code) 404JYP d. Date Filed 117 Cornwallis Court Mchane, NC 27302 e. Phone Number 1563 3359 2. Report Year 3. Period Start Date (mm/dd/yy) 4. Period End Date (mm/dd/yy) 5. Treasurer Full Name 6. Type of Committee (Check One) 9. Type of Report (check only one type of report from one category, Candidate Campaign Party Municipal State/County Referendum PAC Referendum Organizational Οτganizational Organizational Independent Expenditure

Joint Fundraiser Thirty-five day Quarterly Pre-referendum Legal Expense Fund Pre-primary First Final Pre-election Second Supplemental Final 7. Type of Fund (if applicable, check one) Pre-runoff Third Annual Booster Fund Semi-annual Fourth Special Building Fund Mid Year Semi-annual 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. Account Information a. Financial Institution Full Name a. Financial Institution Full Name o. Purpose c. Account Code **b. Ригро**ѕе c. Account Code Campaign d. Period Begin Balance 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. Printed Name of Signer Signature of Appointed Treasurer FOR OFFICE USE ONLY 4-26-12 Date Received: Delivery Method Employee: Normal Mail Date Postmarked: Registered Mail Employee: Hand Delivered Date Scanned: ☐ Electronically Filed Employee:

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.

Employee:

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

CRO-1000

Date Data Entered:

NC State Board of Elections

:-21+;2 P ::: = ;

August 2008

☐ Signer has not received

Detailed Summary Use this form to summarize all disabases and a			Amendment ☐ Yes ☐ No
Use this form to summarize all disclosure reporting forms a 1. Committee Full Name (and Fund if applicable)	2. Type of	onetary information	
1/ 1/- 1 0	2. 1ype 0.		3. ID Number
C44 CTD 44 Sec		1st atr.	404JYP
Start of Election Cycle: January 1, 3011	 -	Total this Reporting Period	Total this
4) Cash on Hand at Start		\$ 525.46	
RECEIPTS		323170	17 223,76
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$ 550.00	01\$ 550.00
7) Contributions from Political Party Committees	(CRO-1220)		0 \$ 550.00
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)		
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$ 2000.00	
11) Other Receipt Sources	(130 1240)	<u> </u>	\$
11a) Interest on Bank Accounts	(CRO-1250)	\$	
11b) Contributions from Not-For-Profit Organizations		3	\$
11c) Outside Sources of Income		\$	\$
11d) Legal Expense Fund - Other Sources	(CRO-1250)	\$	\$
11e) Exempt Purchase Price Sales	(CRO-1270)	\$	\$
	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c EXPENDITURES	,11d and 11e)	\$ 2550.00	\$ 2550.00
13) Disbursements	a		
13a) Operating Expenditures			
		\$ 506.95	\$ 506.95
13b) Contributions to Candidates/Political Committees	<u> -</u>	\$	\$
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)	\$ 450.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15	5. 16 and 17)	<u> </u>	7.00.00
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18)		\$ 956.95 \$ 2118.51
ADDITIONAL INFORMATION			4110131
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330) \$	<u> </u>	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430) \$	2200.16	
22) Debts and Obligations owed by the Committee	(CRO-1610) \$		
	(CRO-1620) \$		
	(CRO-1720) \$		
25) Administrative C	(CRO-1710) \$		\$
26) Forgiven Loons	(CRO-1440) \$		
77) 48-Hour Notice Day 4 G	CRO-2220) \$		\$
28) Contributions to be Refunded (0	CRO-1215) \$		\$
CRO-1100 NC State Board			\$

Con	tributions f	from Individu	als	Þ	. I of	1	Amendment Yes No
Use th	nis form to report	individual contributi	ons over \$50 or	contributions und	der \$50 if form C	RO	1205 is not used
1. Co	mmittee Full Na	me (and Fund if ap	plicable)		·		D Number
V۵	ite Vauc	Than Comi	n 19910ne	~			404 JYP
	ntributor Inform	ation			move		
4	Name, Mailing Addi Ide city, state, & zip			b. Job Title/Profe		d. C	Comments
				- Retir	red	1	
	ldie Sho	E 1		c. Employer's Na	me/Specific Field	1	
	2 N. Nint						
М	ehane, Ho	27302				e. E	lection Sum to Date
						\$	450.60
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descri	ption	j. Date (mm/dd/yy	yy)	k. Amount
			Web p	age	01/23/20	12	\$ 450.00
				_	,,		\$
							\$
	tributor Inform		[X]	Add 🔲 Rei	move		
	lame, Mailing Addr			b. Job Title/Profe	ssion	d. C	omments
	de city, state, & zip)			Ketir	ed		
va	via Turn	age,Jr.		c. Employer's Nar	ne/Specific Field		
50	2 Urange	Ďr.					
Elo	vid Turn 2 Orange In, NC 27	244				e. El	ection Sum to Date
		,				\$	100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yy)	/y)	k. Amount
		Check			02/22/20	12	\$ 100.00
							\$
							\$
	ributor Informa			Add Ren	nove		
	ame, Malling Addre	ss & Phone		b. Job Title/Profes	sion	d. Co	mments
(mciua	e city, state, & zip)						
				c. Employer's Nan	re/Specific Field		
						e. Ele	ection Sum to Date
						\$	
Prior	g. Account Code	h. Form of Payment	i. In-Kind Descript	tion	j. Date (mm/dd/yyy	v)	k. Amount
							\$
		<u> </u>					
							\$
	- <u>-</u>						\$
	d only this Pa	<u> </u>				\$	550.00
		O-1210 Pages				\$	
(Inis lii	ie must be on line 6	of Detailed Summary Pa	ge CRO-1100)			•	550.00

Disburse	ments		P	g of _	Amendment Yes No	lo
1. Committee F	ull Name (and Fund if applical	ole)			2. ID Number	
Vote 3. Type of Di		mmission			404JYP	-
Operating E		separate CRO-1310 form autions to Candidates/Poli	s for each type of D			
4. Payee Info		duous to Candidates/Poli			ated Party Expenditures	
	ailing Address & Phone	<u>_</u> _	b. Coordinated (omnittee Name	Ta Committee	
(include city,	state, & zip)		Di Coordinateu (outuittee ivanje	d. Comments	 -
Times			c. Level Register	od (Crosify)		
P.O. BOX	481		Federal	County:	-	
Burling	ton, NC 27216		State	Municipality:	e. Election Cycle Sum to Da	ate
f. Account Code					\$ 506.95	
1. Account Code	g. Form of Payment	h. Purpose		i. Date (mm/dd/yy	yy) j. Amount	
	Check	advertisi	ing	04/13/20	12 \$ 506.95	•
4 D = 7.6					\$	
4. Payee Infor	mation iling Address & Phone			move		
(include city, st			b. Coordinated Co	ommittee Name	d. Comments	
			c. Level Registere Federal State	d (Specify) County: Municipality:	e. Election Cycle Sum to Dat	te
f. Account Code	g. Form of Payment	h. Purpose		i. Date (mm/dd/yyy	y) j. Amount	
					\$	
1.5	<u> </u>				\$	
4. Payee Inform	nation ling Address & Phone			nove		
include city, stall)			b. Coordinated Co	mmittee Name	d. Comments	
			c. Level Registered Federal State	County:	e. Election Cycle Sum to Date \$	e
. Account Code	g. Form of Payment	h. Purpose		i. Date (mm/dd/yyyy	y) j. Amount	\dashv
					\$	
					\$	一
. Total only				I	\$ 506.95	\dashv
i. Total of Al	LL CRO-1310 Pages				200.12	\dashv
(This line goes in	line 14a of Detailed Summary line 14b of Detailed Summary line 14c of Detailed Summary	Page CRO-1100 if Conti	rib to Candidates/Pa	olitical Comm)	s 506.95	

Loan Proceeds			Pg (of	. 1	Amendment
Use this form to report proceeds from a loan and loan	endorse	er's informa			L Yes L No
A loan proceeds statement must accompany each loan	that is f	from an ind	ividual		
1. Committee Full Name (and Fund if applicable)					2. ID Number
Vote Vaughan Commissi	Dnev	,			404JYP
3. Lender Information		Add 🔲	Remove		
a. Full Name, Mailing Address & Phone		b. Job Title/		d	l. Comments
(include city, state, & zip)		, ہے. ا	: :		
Ann G. Vaughan 117 Comwallis G:		Ket	hired	e	. Start Date (mm/dd/yyyy)
117 Commallis Ct.		c. Employer'	's Name/Specific Fie	ld	02/22/2012
Melsane, NC 27302				T.	. End Date (mm/dd/yyyy)
g. Rate h. Security Pledged	i. Accour	nt Code	j. Form of Paymen	ıt	k. Amount
0% none			Check	,	\$ 2000.00
l. Full Name of Lending Institution				n	n. Loan Number
4. Endorsers/Makers (The people who guarantee the loan	n. l	·····		- 1	
a. Full Name, Mailing Address & Phone		b. Job Title/P	Profession	Ic. Emi	ployer's Name/Specific Field
(include city, state, & zip)			I transpir		projet a transcripterite ricid
	1			<u> </u>	
		d. Percentage	B	e. Am	ount
			%	\$	
a. Full Name, Mailing Address & Phone		b. Job Title/P	Facriou	- Trans	1
(include city, state, & zip)	[D. JON TIME.T	Tolession	լ . բա <u>ւ</u>	ployer's Name/Specific Field
]		,		
	Ĺ			l	
	1	d. Percentage		e. Amo	nunt
			%	\$	
a. Full Name, Mailing Address & Phone		b. Job Title/P			lloyer's Name/Specific Field
(include city, state, & zip)	ľ	D. JUD IIGG.	101699100	Մ. բուր	noyer's Namezopeeme Frem
	1				
	<u> </u>	d. Percentage	:	e. Amo	unt
			%	\$	
. Full Name, Mailing Address & Phone	1	b. Job Title/P	rofession	c Emn	loyer's Name/Specific Field
(include city, state, & zip)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Ultobion	t. Linp	noyer a transcraptenic Field
	L				
	<u> </u>	l. Percentage		e. Amo	unt
			%	\$	
Total of ATT CDO 1410 Bogos				- 	
5. Total of ALL CRO-1410 Pages] \$	2000.00
(This line must be on line 9 of Detailed Summary Page CRO-11	(00)			Ì	400000

Amendment

	anding Loans		Pg of	Amendment Yes No
Use this fo	orm to report any outstanding loans received during	ng a previo	ous reporting period an	d until the loan is paid in full
1. Comm	ittee Full Name (and Fund if applicable)			2. ID Number
VOTE	2 Vaughan Commissioner			404 JYP
3. Lender	Information	Add	Remove	101011
	e, Mailing Address & Phone		itle/Profession	d. Comments
	ity, state, & zip)			
Ann (j. Vauqhan	Keti	ired	
117 Cc	G. Vaughan ornwallis Ct.	c. Emplo	yer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
111100	Milmonia Ci	<u> </u>	/ti s ivaince/openie	02/23/10
Meba	ne, NC 27302			f. End Date (mm/dd/yyyy)
,	61706			
g. Rate	h. Security Pledged		riginal Loan Amount	t non-thing range natural
n %				j. Remaining Loan Balance
V	110116	\$	2200.16	\$ 2200.16
K. Fun (vanic	of Lending Institution			l. Loan Number
<u></u>				
	Information	Add [Remove	
a. Full Name,	Mailing Address & Phone		Lle/Profession	d. Comments
	y, state, & zip)	-	C/F 1 O1C35A011	d. Comments
ĺ		7		
İ				e. Start Date (mm/dd/yyyy)
		c. Employ	er's Name/Specific Field	
		1		f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	li. Ori	ginal Loan Amount	I D I -ne Bolomea
%			iliai Luan Amoun	j. Remaining Loan Balance
		\$		\$
k. Full Name o	of Lending Institution			l. Loan Number
3. Lender In		Add	Remove	
a. Full Name, N	Mailing Address & Phone		Remove e/Profession	d. Comments
	, state, & zip)	0.00	/I Toression	d. Comments
		1	,	1
		<u></u>	<i></i>	e. Start Date (mm/dd/yyyy)
		c. Employer	r's Name/Specific Field	
	1		1	
	,	1		f. End Date (mm/dd/yyyy)
 _		1	1	
. Rate h	h. Security Pledged	i, Orig	inal Loan Amount	j. Remaining Loan Balance
%		\$		
Full Name of	Lending Institution			\$
	rename maritanon			l. Loan Number

4. Total only this Page

2200.16

2200,16

Use CRO-1215 if In-Kind Contributions were or will be refu	ods or ser unded w	vices prov	/ided to the commi	ittee o	or fund.
1. Committee Full Name (and Fund if applicable)	HILLOW	IUIII I WW	ya.	12.	ID Number
Vote Vaughan Commissione	V		·	1 .	-04JYP
3. Contributor Information	Add	☐ Re	emove	<u></u>	01011
a. Full Name, Mailing Address & Phone	b. Туре	e of Contril		c. C	Comments
(include city, state, & zip)	Inc	idividual		+	
Eddie Shoe	1=	andidate			
212 N. 9th Street	☐ PA	arty AC			
Mebane, NC 2730Z		eferendum		d. E	Election Sum to Date
61007	LIO	ther Receipt	. Source	\$	450.00
e. Description			f. Date (mru/dd/yy)		g. Fair Market Amount
web site design and set u			j)	99) 912	<i>i</i> .
<i>U</i>	۲		01,,	1 -	\$
					\$
3. Contributor Information	Add	Rem	nove		<u></u>
a. Full Name, Mailing Address & Phone	b. Type	of Contrib		c. C	comments
(include city, state, & zip)	Ind:	dividual	;		
		ındidate			
	Part Part	-	!		
İ		C ferendum	!	- TO	D-4a
	1=	ferendum her Receipt S	Cource		dection Sum to Date
		DI 10	Bouled	\$	
e. Description	 -		f. Date (mm/dd/yyy	/ y)	g. Fair Market Amount
					\$
					\$
					\$
3. Contributor Information	Add	Rem			
		of Contribu	utor	c. Co	numents
(include city, state, & zip)		ividual adidate		ĺ	
	Can	ndidate tv		i	
•	Party		ļ	i	
,		crendum	†	त. E I	ection Sum to Date
!	1 =	er Receipt S			Status Desir to Day
e. Description	<u> </u>			\$	···
. Description		- 1	f. Date (mm/dd/yyyy	<u>a)</u>	g. Fair Market Amount
				4	\$
				_	\$
					\$
4. Total only this Page				\$	450,00
5. Total of ALL CRO-1510 Pages					450.00 450.00
(This line must be on line 17 of Detailed Summary Page CRO-1100)				\$	45/1/11

In-Kind Contributions

Amendment

□ No

Pg ____ of ___ Yes