

North Carolina

State Board of Elections

441 N Harrington Street Raleigh, NC 27603

Kim Westbrook Strach Executive Director Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173

Certification of Inactive Status

This certification is used by Candidate, Party, PACs and Referendum Committees to declare their intent to be inactive, which is not raising or spending any money on behalf of the campaign

FILED BY:			
Committee Name:	Cmte To Re-Elect Tony Rose For School Bd		
Treasurer Name:	Anthony Glenn Rose		
Treasurer Address:	1706 Stratford Road		
(include city, state, & zip) Burlington, NC 27217			
Treasurer Phone:	336-214-3512		

I certify that the above named candidate/political committee intends to receive no contributions, nor make any expenditures, until the committee resumes activity.

I understand that if the above circumstances change, it will be necessary for the person responsible for filing financial disclosure reports to file an amended Statement of Organization and the Certification to Return to Active Status form (CRO-3300) within ten days.

01/05/2014 Date Signed

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.

01-05-15 13:41 RCVD

01-05-15 13:40 RCVD

Amendment		
Yes	\boxtimes	No

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 Informatio	n					
a. Full Name						c. ID Number
Committee To Re-Elect T	ony Rose For School	Board				4D4JU3
b. Mailing Address (include Cit	y, State and Zip Code)			T		d. Date Filed
1706 Stratford Road Burlington, NC 27217						01/05/2014
,						e. Phone Number
						336-214-3512
2. Report Year 3. Pe	riod Start Date (mm/d	COUNTY OF THE PERSON OF THE PE	riod End Da ^{ld/yy)}	STATE OF THE STATE OF THE	5. Treasurer Full	Name
2014	10/19/2014		12/31/2014		Anthony G. Rose	4
6. Type of Committee (Cl	neck One)	9. Type of R	eport (c.		nly one type of report	from one category)
Candidate Campaign	Party	Municipal			County	Referendum
PAC	Referendum	Organiz	zational	[]	Organizational	Organizational
Independent Expenditure	Joint Fundraiser	Thirty-	five day		Quarterly	Pre-referendum
Legal Expense Fund						
	plicable, check one)	Pre-prii	nary		- First	Final
"Booster Fund"	,	Pre-ele	ction		Second	Supplemental Final
Building Fund		Pre-run	off		Third	Annual
_		Semi-a	nnual	\boxtimes	Fourth	Special
	×	M	id Year		Semi-annual	
Other:		Y	ear End		Mid Year	10. Special Report Name
		Final			Year End	
8. Number of Fundraiser	s this Report	Special			Final	
					Special	
11. Account Information			11. Ac	count	Information	Min Red Min Street Street From Fig. 1
a. Financial Institution Full Na	me		a. Finai	icial Ins	stitution Full Name	
State Employees Credit U	nion					
b. Purpose	c. Account Code		b. Purp	ose		c. Account Code
Campaign	, 1					*
	d. Period Begin Balance					d. Period Begin Balance
	\$ 647.17					s
CERTIFICATION						
I certify that the Committe	e or Fund is in compli	ance with all a	pplicable prov	visions	of Article 22A, 22B,	& 22D-22M of Chapter 163 of
the NC General Statutes ar	d that no funds are co	mmingled with	n prohibi k ed 9	r other	non-disclosed funds.	I further certify that this report
is complete, true and corre	ct and that I have been	trained by the	NC State Bb	ard of		
Anthony G. Rose			- m	W	-	01/05/2015
	ted Name of Signer		Signature o	f Appoir	nted Treasurer	Date
FOR OFFICE USE ONLY	1 = 201			,		Delivery Method
Date Received:	1-5-2015	Emplo	yee:		6	Normal Mail
Date Postmarked:		Emplo	yee:			Registered Mail Hand Delivered
Date Scanned:		Emplo	yee:			Electronically Filed Signer has not received
Date Data Entered:	-	Emplo	yee:			mandatory training
Please Note: This form		end committee				ess, treasurer, assistant treasurer,
You					-E) to make committe	ee changes.

Detailed Summary

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

Amendment

Yes No

	2. Type of Report		3. ID Number 4D4JU3
Committee To Re-Elect Tony Rose For School Board	FOURTH		404103
Start of Election Cycle: January 1,	2014	Total this	Total this Election Cycle
4) Cash on Hand at Start		Reporting Period \$ 647.14	\$ 0.00
RECEIPTS	经营业		等。特别的人的
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 155.00	\$ 3849.00
6) Contributions from Individuals	(CRO-1210)	\$ 400.00	\$ 6942.79
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0.00	\$ 250.00
9) Loan Proceeds	(CRO-1410)	\$	\$
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$	\$
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0.26	\$ 2.17
11b) Contributions from Not-for-Profit Organizatio	ns <i>(CRO-1250)</i>	\$	\$
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)	\$ 555.26	\$ 11043.96
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 1137.91	\$ 10550.93
13b) Contributions to Candidates/Political Committee	tees (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)	\$ 0.00	\$ 428.54
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15	, 16 and 17)	\$ 1137.91	\$ 10979.47
19) Cash on Hand at End (Add lines 4 and 12 together, then subtr	ract line 18)	\$ 64.49	\$ 64.49
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaign	s) (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)	\$	409 MART SHIP
25) Administrative Support	(CRO-1710)	\$	\$
26) Forgiven Loans	(CRO-1440)	\$	\$
27) 48-Hour Notice Reports Sum	(CRO-2200)	\$	s
28) Contributions to be Refunded	(CRO-1215)	\$	\$
CRO-1100 NC State Board of Elec			August 2008

Aggregated Contributions from Individuals

Page

<u>1</u> of

1

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							
Com	Committee To Re-Elect Tony Rose For School Board 4D4JU3						
3. Co	ntributor Infori	nation					
a. Ame	end	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy	y)	f. Amount
	Add Remove	- 1	Check		10/22/20)14	\$ 50.00
	Add Remove	- 1	PayPal		10/22/20	014	\$ 20.00
	Add Remove	1	Cash		10/24/20)14	\$ 10.00
	Add	1	PayPal		10/24/20)14	\$ 25.00
	Remove Add	- 1	Cash		12/17/20)14	\$ 50.00
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	Add						\$
	Remove						Ψ
	Add						\$
	Remove						
	Add						\$
	Remove						
4. To	tal only this	Page				\$	155.00
	otal of ALL C					\$	155.00
(Thi	s une must be on line	e 5 of Detailed Su	mmary Page CRO-1100)				

Amendment **Contributions from Individuals** X No Yes Pg of 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 4D4JU3 Committee To Re-Elect Tony Rose For School Board 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments Retired (include city, state, & zip) Virginia Rose c. Employer's Name/Specific Field 1810 Wellington Road N/A Burlington, NC 27217 e. Election Sum to Date 336-584-9132 400.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount 10/31/2014 \$ 400.00 Check \$ \$ 3. Contributor Information Add Remove b. Job Title/Profession d. Comments a. Full Name, Mailing Address & Phone (include city, state, & zip) c. Employer's Name/Specific Field e, Election Sum to Date \$ j. Date (mm/dd/yyyy) k. Amount f. Prior h. Form of Payment i. In-Kind Description g. Account Code \$ S \$ Add Remove 3. Contributor Information d. Comments b. Job Title/Profession a. Full Name, Mailing Address & Phone (include city, state, & zip) e. Employer's Name/Specific Field

f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount

S

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A. Total only this Page

e. Election Sum to Date

Ot

				Amendment
her Receipt Sources	Pg	1	of	1 Yes 🔀 No

Use this form to report income not reported on another form, i.e. interest income, not for profit contributions etc. 1. Committee Full Name (and Fund if applicable) 2. ID Number Committee To Re-Elect Tony Rose For School Board 4D4JU3 3. Type of Receipt Source (Please use separate CRO-1250 forms for each type of Receipt Source.) Interest Contributions from Not-for-Profit Organizations Outside Sources of Income 4. Contributor Information Add Remove b. Not-for-Profit Federal ID # a. Full Name, Mailing Address & Phone d. Comments (include city, state, & zip) State Employees' Credit Union c. Outside Source Explanation 1172 St. Mark's Church Road Burlington, NC 27215 e. Election Sum to Date 336-538-4734 \$ 2.17 h. In-Kind Description i, Date (mm/dd/yyyy) j. Amount f. Account Code g. Form of Payment Credit 11/03/2014 \$ 0.23 1 Credit 0.03 12/02/2014 \$ 4. Contributor Information Add Remove b. Not-for-Profit Federal ID # d. Comments a. Full Name, Mailing Address & Phone (include city, state, & zip) c. Outside Source Explanation e. Election Sum to Date i. Date (mm/dd/yyyy) j. Amount f. Account Code h. In-Kind Description g. Form of Payment \$ \$ Remove Add 4. Contributor Information b. Not-for-Profit Federal ID # d. Comments a. Full Name, Mailing Address & Phone (include city, state, & zip) e. Outside Source Explanation e. Election Sum to Date \$ h. In-Kind Description i. Date (mm/dd/yyyy) j. Amount f. Account Code g. Form of Payment \$ \$ \$ 0.26 5. Total only this Page 6. Total of ALL CRO-1250 Pages (This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest) 0.26 (This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution) (This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)

Dis	bu	ırs	em	ents
פוע	υı	113		CIII CO

				Amendment	
Pg	1	of	<u>3</u>	Yes	\boxtimes

No

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								
	Committee To Re-Elect Tony Rose For School Board 4D4JU3							
3. Type of Disbu			RO-1310 forms for each ty	vpe of Disbursen	rent.)			
Operating E:			ndidates/Political Committees		pordinated Party Expenditures			
4. Payee Inform		To Cal	Add	Remove				
			b. Coordinated Committee Na		d. Comments			
	ng Address & Phone		D. Coordinated Committee Na	ame	u, comments			
(include city, state,]			
Elon College Po					_			
105 South Willia			c. Level Registered (Specify)	<u> </u>	_			
Elon, NC 27244			Federal 🖂	County:	7			
2.011, 130 6/244			State	Municipality:	e. Election Sum to Date			
226 401 55			State	municipality.	V. Z. CENOR OWN TO DATE			
336-584-5943					\$ 37.22			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks			
1	Check Card	I	10/20/2014	\$4.42	Stamps			
	-			\$				
A Pavas Info	ation	·	Add	Remove				
4. Payee Inform		<u> </u>			d. Comments			
i	ng Address & Phone		b. Coordinated Committee Na	ише	u, Comments			
(include city, state,	& zip)]		ļ			
Alamance News								
114 West Elm S			c. Level Registered (Specify)		-1			
			Federal 🖂	County:	7			
Graham, NC 27	233				e. Election Sum to Date			
			State	Municipality:	C. Election Sum to Date			
336-228-7851					\$ 900.00			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks			
1	Check	A	10/22/2014	\$150.00	Ad			
1	Charle		10/27/2014	\$350.00	Ad + Color for			
1	Check	A	10/27/2014	\$350.00	previous week			
4. Payee Inform	ation		Add	Remove				
		· <u> </u>	b. Coordinated Committee No		d. Comments			
	ng Address & Phone		a, Coordinated Committee N.					
(include city, state,	& zip)		4		I			
PayPal.com					4			
			c. Level Registered (Specify)		_			
			Federal 🖂	County:	<u> </u>			
			State	Municipality:	e. Election Sum to Date			
				РУ	\$ 43.83			
F Assert C 1	g Form of D	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k, Required Remarks			
f. Account Code	g. Form of Payment	a. a as post Code	i, Date (miniad/yyyy)	1. wingant				
1	Debit	0	10/22/2014	\$0.88	PayPal Fee			
1	Debit	0	10/24/2014	\$1.03	PayPal Fee			
		<u> </u>	<u> </u>					
5. Total only thi				<u></u>	\$ 506.33			
	CRO-1310 Pages			•	1			
		ımary Page CRO-110	00 if Operating Expenses)		112701			
			00 if Contrib to Candidates/Politic	cal Comm)	\$ 1137.91			
			0 if Coordinated Party Expenditu					
				1 2				
	es (List detailed ex			The Part	hou Condidata			
A* - Media	B* - Printing	C* - Fun			her Candidate			
E - Salaries	F* - Equipment				g Public Office Expenses			
I - Postage	J - Penalties	K* - Offi	ce Expenses	Q* - Donati	on to Legal Expense Fund			
O* - Other	ing programme and the second	in the second						
* Codes requir	e detailed explanati	ion in required r	emarks field (k)	<u>articles de la companya del companya de la companya del companya de la companya </u>				

Disbursements

Pg <u>2</u>

of <u>3</u>

Amendment Yes

No

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								
Committee To I	Re-Elect Tony Rose	For School Board						4D4JU3
3. Type of Disb	ursement <i>(Plea</i>	se use separate C	RC)-1310 forms for e	ach ty	pe of Disbursem	ent.)	
Operating E				lates/Political Committe				Party Expenditures
4. Payee Inform	ation	П.	A	Add	П	Remove		
	ng Address & Phone		-	. Coordinated Commi	ttee Na		d. Co	nments
(include city, state,	-						1	· · · · · · · · · · · · · · · · · · ·
State Emp Cred			1					
1172 St. Mark's			C.	. Level Registered (Sp	ecify)		1	
Burlington, NC			1	Federal	\boxtimes	County:	1	
Durmigion, 110	2,213		╽┝	State	H	Municipality:	e Ele	ction Sum to Date
336-538-4734			╠		.Ш.	Maincipanty.	C. Ele	tion Sam to Date
330-336-4734							\$ 1	7.00
f. Account Code	a Form of Bormant	h. Purpose Code	I	1 Data (mm/dd/mm		i Amount	I. Day	quired Remarks
r. Account Code	g. Form of Payment	in I ai pose Code		i. Date (mm/dd/yyy	0	j. Amount	1	thly Account
1	Debit	0		11/03/2014		\$1.00	Fee	tiny Account
ļ				<u></u>				the last Assessment
1	Debit	0		12/02/2014		\$1.00	1	thly Account
4 15 7 6		<u> </u>		11	\vdash	·D	Fee	
4. Payee Inform		Ц	_	.dd	<u> </u>	Remove		
	ng Address & Phone		b.	. Coordinated Commi	ttee Na	me	d. Co	nments
(include city, state,	& zip)		-					
Facebook.com							}	
			c.	. Level Registered (Sp			-	
			L	Federal	\boxtimes	County:		
				State		Municipality:	e. Ele	ction Sum to Date
							S 2	83.22
			L.				2 ك	65.22
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)		j. Amount	k. Red	quired Remarks	
1	Check Card	О		11/03/2014		\$232.83 Facel		book Ads
1	Check Card			11/03/2014		\$232.63		
1	Charle Cand	0		12/01/20141		\$50.39	Face	book Ads
1	Check Card	0	12/01/20141 \$		\$30.39			
4. Payee Inform	ation		Add Remove					
a. Full Name, Maili	ng Address & Phone		b, Coordinated Committee Name			d. Co	nments	
(include city, state,	=							
International Mi			1					
1143-F St. Mark			c. Level Registered (Specify)			1		
Burlington, NC			Federal County:					
Burmigion, 110						Municipality:	e. Elec	ction Sum to Date
336-270-4426			State Numerparity.					
330 270 1420			Ì				\$ 8	47.00
f. Account Code	g. Form of Payment	h. Purpose Code	Ь	i. Date (mm/dd/yyyy	<u>., 1</u>	j. Amount	k. Rec	quired Remarks
n Account Code	g. I of in of I nyment			I. Date (IIIIII adiyyy)	,			Cards
1	Check	В		10/27/2014		\$247.00	1 41111	Cards
						\$		
5. Total only thi	s Dogo	·	<u>_</u>					532.22
	CRO-1310 Pages						Ψ	332.22
		Paga CPO 110	n : r	Onavatina Evnancas				
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)								
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Continuo Cananades/Foldica: Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)								
							<u> </u>	
7. Purpose Code A* - Media	es (List detailed exp B* - Printing	C* - Fund				D - To Anothe	ar Cand	idate
A - IVIEUIA E - Salaries	B* - Printing F* - Equipment	G - Politic						Office Expenses
I - Postage	J - Penalties	K* - Offic						gal Expense Fund
O* - Other	o tollation	12 O IIIC				2 20111110		aL
	e detailed explanati	on in required re	ma	arks field (k)				

Disbursements	Þσ
	LE

				Amendr	nent		
Pg	<u>3</u>	of	<u>3</u>		Yes	\boxtimes	No

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								
Committee To Re-Elect Tony Rose For School Board								4D4JU3
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)								
Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures								
4. Payee Information Add Remove								
a. Full Name, Mailing Address & Phone				b. Coordinated Committee Name			d. Co	mments
(include city, state, & zip)								
GoDaddy.com								
				c. Level Registered (Specify)				
			Federal County:			County:	1	
				State		Municipality:	e. Ele	etion Sum to Date
							6 (20.26
			<u> </u>				\$ 9	99.36
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy) j. Amount		j. Amount	k. Required Remarks		
1	Charle Cand		12/29/2014		-	¢00.26	Web	site Domain
1	Check Card		12/29/2014		\$99.36	Regi	istration	
						\$		
4. Payee Inform	ation		Add			Remove		<u> </u>
a. Full Name, Mailing Address & Phone				b. Coordinated Committee Name			d. Co	mments
(include city, state,								
							_	
			c. Level Registered (Specify)					
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				State		Municipality:	e. Ele	ection Sum to Date
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f. Account Code	g. Form of Payment	h. Purpose Code	i,	i, Date (mm/dd/yyyy) j. Amount		k. Re	quired Remarks	
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4. Payee Information				Add Remove				·
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(include city, state, & zip)								
				c. Level Registered (Specify)				
			Federal County:					
			State Municipality:			e. Ele	ection Sum to Date	
						\$		
			- ,					
f. Account Code	g. Form of Payment	h. Purpose Code	i.	Date (mm/dd/yyyy	/)	j. Amount	k. Re	quired Remarks
						\$		
	·					Ψ		
						\$		
				:		,		
5. Total only this Page							\$	99.36
	CRO-1310 Pages					•		
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)							8	1137.91
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)								
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)								
7. Purpose Codes (List detailed expenditure code in (h.) above)								
A* - Media	B* - Printing	C* - Fund G - Politic				D - To Another Candidate H* - Holding Public Office Expenses		
E - Salaries F* - Equipment G - Politica I - Postage J - Penalties K* - Office					Q* - Donation to Legal Expenses			
O* - Other								
* Codes require detailed explanation in required remarks field (k)								