

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 <i>Committee to Elect Charles Evans</i> | | c. ID Number <i>Q2Y6Y</i> | |
| b. Mailing Address (include City, State and Zip Code) <i>1707 Eldridge St. Fayetteville, NC 28301</i> | | d. Date Filed | |
| | | e. Phone Number <i>910 488-2975</i> | |
| 2. Report Year | 3. Period Start Date (mm/dd/yy) | 4. Period End Date (mm/dd/yy) | 5. Treasurer Full Name |
| <i>2012</i> | <i>7-1-12</i> | <i>12-31-12</i> | <i>Helen Farrior</i> |
| 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 <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> Legal Expense Fund | | 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 checked="" type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special | |
| 7. Type of Fund (if applicable, check one) <input type="checkbox"/> Booster Fund <input type="checkbox"/> Building Fund <input type="checkbox"/> Other: | | State/County <input type="checkbox"/> Organizational Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth Semi-annual <input type="checkbox"/> Mid Year <input checked="" type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special | |
| 8. Number of Fundraisers this Report | | 10. Special Report Name | |
| | | | |
| 11. Account Information | | 11. Account Information | |
| a. Financial Institution Full Name <i>BB&T</i> | | a. Financial Institution Full Name | |
| b. Purpose | c. Account Code | b. Purpose | c. Account Code |
| | | | |
| | d. Period Begin Balance <i>\$362.87</i> | | 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. | | | |
| <i>Charles Evans</i> | | <i>Charles Evans</i> | |
| Printed Name of Signer | | Signature of Appointed Treasurer | |
| | | <i>1.27.13</i> | |
| | | Date | |
| FOR OFFICE USE ONLY | | | |
| Date Received: | <i>JAN 28 2013</i> | Employee: | <i>TSK</i> |
| 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) | 2. Type of Report | 3. ID Number |
|------------------------------------------------------------------------------|-----------------------------|---------------------------|
| Committee to Elect Charles Evers | | 92Y6Y |
| Start of Election Cycle: January 1, _____ | Total this Reporting Period | Total this Election Cycle |
| 4) Cash on Hand at Start | \$ 1,098.02 | \$ 1456.72 |
| RECEIPTS | | |
| 5) Aggregated Contributions from Individuals (CRO-1205) | \$ | \$ 400.00 |
| 6) Contributions from Individuals (CRO-1210) | \$ | \$ 950.00 |
| 7) Contributions from Political Party Committees (CRO-1220) | \$ | \$ |
| 8) Contributions from Other Political Committees (CRO-1230) | \$ | \$ 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) | \$ | \$ |
| 11b) Contributions from Not-For-Profit Organizations (CRO-1250) | \$ | \$ |
| 11c) Outside Sources of Income (CRO-1250) | \$ | \$ |
| 11d) Legal Expense Fund - Other Sources (CRO-1270) | \$ | \$ |
| 11e) Exempt Purchase Price Sales (CRO-1265) | \$ | \$ |
| 12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e) | \$ 0 | \$ 1600.00 |
| EXPENDITURES | | |
| 13) Disbursements | | |
| 13a) Operating Expenditures (CRO-1310) | \$ | \$ 1958.70 |
| 13b) Contributions to Candidates/Political Committees (CRO-1310) | \$ | \$ |
| 13c) Coordinated Party Expenditures (CRO-1310) | \$ | \$ |
| 14) Aggregated Non-Media Expenditures (CRO-1315) | \$ | \$ |
| 15) Loan Repayments (CRO-1420) | \$ | \$ |
| 16) Refunds/Reimbursements from the Committee (CRO-1320) | \$ | \$ |
| 17) In-Kind Contributions (CRO-1510) | \$ | \$ |
| 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) | \$ 0 | \$ 1958.70 |
| 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) | \$ 1,098.02 | \$ 1,098.02 |
| ADDITIONAL INFORMATION | | |
| 20) Non-Monetary Gifts Given to Other Committees (CRO-1330) | \$ | \$ |
| 21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430) | \$ 4140 | \$ |
| 22) Debts and Obligations owed by the Committee (CRO-1610) | \$ 964.58 | \$ |
| 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-2220) | \$ | \$ |
| 28) Contributions to be Refunded (CRO-1215) | \$ | \$ |

Debts and Obligations Owed By the Committee

Pg ____ of ____ Amendment Yes No

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

| | | | |
|--------------------------------------------------------------------------------------------------|----------------|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| 1. Committee Full Name (and Fund if applicable) | | 2. ID Number | |
| Committee to Elect CHARLES EVANS | | 02101 | |
| 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. | |
| EBS Technology 2014 Hope Hills Rd Fayetteville, NC 28304 | | b. Description of Creditor | |
| c. Beginning Balance | | d. Total Amount Paid | e. Total Amount Incurred |
| \$ 175.00 | | \$ 0 | \$ |
| f. Remaining Balance | | | |
| \$ 175.00 | | | |
| g. Incurred Debts (what the committee received this period) | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip) | | g2. Date (mm/dd/yyyy) | g3. Amount |
| | | | \$ |
| | | g4. Purpose Code | g5. Required Remarks |
| | | | |
| 4. Total only this Page | | \$ | |
| (This should be the sum of all items 'g3.' from this page) | | | |
| 5. Total of ALL CRO-1610 Pages | | \$ | |
| (This line must be on line 22 of Detailed Summary Page CRO-1100) | | | |
| 6. Purpose Codes (List detailed expenditure code in (g4.)) | | | |
| 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 | O* - Other |
| * Codes require detailed explanation in required remarks field (g5.) | | | |