

# Disclosure Report Cover

Amendment  
 Yes  No

Please note that this cover sheet 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 those kinds of committee changes.  
 Use the Addendum form (CRO-1010) if more entries are needed.

## 1. Committee Information

a. Full Name <b>Ed Melvin For Co, Commissioners</b>	c. ID Number <b>Y0Y027</b>
b. Mailing Address (include City, State and Zip Code) <b>3017 Ravenhill DR. Fayetteville N.C. 28303</b>	d. Date Filed <b>1-8-07</b>
	e. Phone Number

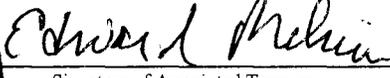
2. Report Year <b>2006</b>	3. Period Start Date (mm/dd/yyyy) <b>10-22-06</b>	4. Period End Date (mm/dd/yyyy) <b>12-31-06</b>	5. Treasurer Full Name
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6. Type of Committee (Check one)		8. Type of Report (check only one type of report from one category)		
<input type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<b>Municipal</b>	<b>State/County</b>	<b>Referendum</b>
<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> PAC	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Referendum		<input type="checkbox"/> Thirty-five day	Quarterly	<input type="checkbox"/> Pre-referendum
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First Plus	<input type="checkbox"/> Final
<input type="checkbox"/> Soft Money Account		<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 type="checkbox"/> Third Plus	<input type="checkbox"/> Annual
<input type="checkbox"/> Building Fund		Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> NC Political Party Financing Fund		<input type="checkbox"/> Mid Year	Semi-annual	
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	9. Special Report Name
<input type="checkbox"/> NC Public Campaign Financing Fund		<input type="checkbox"/> Final	<input checked="" type="checkbox"/> Year End	
<input type="checkbox"/> Other:		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	

10. Account Information		10. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
b. Purpose	c. Code	b. Purpose	c. Code
	d. Period Begin Balance		d. Period Begin Balance
	\$ 11376.74		\$

## CERTIFICATION

I certify that the Committee is in compliance with all provisions of Article 22A, including that no funds are commingled with funds for a federal or out-of-state PAC. I further say that this report is complete, true and correct.

**Ed Melvin**  **1-8-07**  
 Signature of Appointed Treasurer Date

## FOR OFFICIAL USE ONLY

Date Received: _____	Employee: _____
Date Postmarked: _____	Employee: _____
Date Scanned: _____	Employee: _____

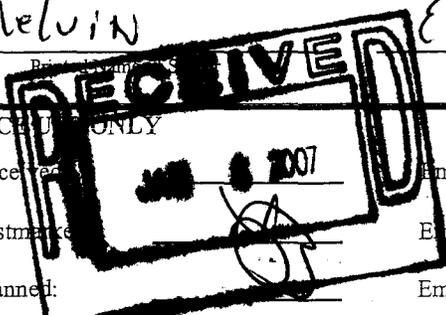
Delivery Method

Normal Mail

Registered Mail

Hand Delivered

Electronically Filed



# Detailed Summary

Amendment  
 Yes  No

1. Committee Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
Ed Melvin for Co. Commission		4 QR		Y0Y027	
Start of Election Cycle: January 1, 2006		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 11,376.74		\$ - 0 -	
<b>RECEIPTS</b>					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ -		\$ -	
6) Contributions from Individuals (CRO-1210)		\$ 2,100.00		\$ 7,000.00	
7) Contributions from Political Party Committees (CRO-1220)		\$ -		\$ 1,250.00	
8) Contributions from Other Political Committees (CRO-1230)		\$		\$	
9) Loan Proceeds (CRO-1410)		\$		\$ 21,165.00	
10) Refunds/Reimbursements To the Committee (CRO-1240)		\$		\$	
11) Other Receipt Sources (CRO-1250)					
11a) Interest on Bank Accounts (CRO-1250)		\$		\$	
11b) Contributions from Not-for-Profit Organizations (CRO-1250)		\$		\$	
11c) Outside Sources of Income (CRO-1250)		\$		\$	
12) "Goods and Services" Contributions (CRO-1260)		\$		\$	
13) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)		\$ 21,00.00		\$ 29,435.00	
<b>EXPENDITURES</b>					
14) Disbursements (CRO-1310)					
14a) Operating Expenditures (CRO-1310)		\$ 23,684.9		\$ 18,326.75	
14b) Contributions to Candidates/Political Committees (CRO-1310)		\$		\$	
14c) Coordinated Party Expenditures (CRO-1310)		\$		\$	
15) Loan Repayments (CRO-1420)		\$		\$	
16) Refunds/Reimbursements From the Committee (CRO-1320)		\$		\$	
17) In-Kind Contributions (CRO-1510)		\$		\$	
18) TOTAL EXPENDITURES (Add lines 14a, 14b, 14c, 15, 16, and 17)		\$		\$	
19) Cash on Hand at End (Add lines 4 and 13 together, then subtract line 18)		\$ 11,108.25		\$ 11,108.25	
<b>ADDITIONAL INFORMATION</b>					
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		\$		\$	

Contributions from Individuals

1. Committee Full Name (and Fund if applicable) <b>Ed Melvin For Co. Commissioner</b>						2. ID Number <b>Y0Y027</b>	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>486 4491</b> <b>Seanayl Hedgepeth</b> <b>P.O. Box 126</b> <b>Fayetteville N.C.</b> <b>28302</b>				b. Job Title/Profession <b>C.C. Tax Dept</b>		d. Comments	
				c. Employer's Name/Specific Field <b>Cumberland Co</b> <b>Tax Dept.</b>		e. Election Cycle 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"/>	1	CK		11/3/06	\$ 500.00		
<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>423 6400</b> <b>James Robert Smith</b> <b>1100 Clarendon St</b> <b>APT 612</b> <b>Fayetteville N.C. 28305</b>				b. Job Title/Profession <b>Retired</b>		d. Comments	
				c. Employer's Name/Specific Field <b>Retired</b>		e. Election Cycle 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"/>	1	CK		11/2/06	\$ 500.00		
<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>867-8311</b> <b>Timothy Dunn</b> <b>331 Glenburney Dr</b> <b>Fayetteville N.C. 28303</b>				b. Job Title/Profession <b>Attorney</b>		d. Comments	
				c. Employer's Name/Specific Field <b>Tim Dunn</b> <b>Attorney AT LAW</b>		e. Election Cycle 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"/>	1	CK		11/7/06	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page					\$ 1,100.00		
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$		

Contributions from Individuals

1. Committee Full Name (and Fund if applicable) <b>Ed Melius for Co. Commissioners</b>						2. ID Number <b>Y0Y0Z7</b>	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>Keith Allison 321-7700 2604 Fort Bragg Rd. Fayetteville N.C. 28303</b>				b. Job Title/Profession <b>OWNER</b>		d. Comments	
				c. Employer's Name/Specific Field <b>System INC Office Machines</b>		e. Election Cycle 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"/>	1	CK		11/2/06	\$ 1,000.00		
<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	
				c. Employer's Name/Specific Field		e. Election Cycle 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"/>					\$		
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 Cycle 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						\$ 1,000.00	
5. Total of ALL CRO-1210 Pages						\$ 2100.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

Disbursements

1. Committee Full Name (and Fund if applicable)			2. ID Number	
Ed Melvin For Co. Commissioners			404027	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)				
<input 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
485-7955 International Minute 1327 Robeson St. Press Fayetteville N.C. 28305				
		c. Level Registered (Specify)		e. Election Cycle 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	i. Date (mm/dd/yyyy)	j. Amount
1	CK # 118	Adv.	11/1/06	285.59
				\$
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
486 2024 Beasley Broadcasting Group P.O. Box 2563 Fayetteville N.C. 28302 486-2024				
		c. Level Registered (Specify)		e. Election Cycle 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	i. Date (mm/dd/yyyy)	j. Amount
1	CK # 116	Adv.	11/1/06	\$ 500.00
				\$
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
486 2024 WKML Radio P.O. Box 2563 Fayetteville N.C. 28302 486-2024				
		c. Level Registered (Specify)		e. Election Cycle 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	i. Date (mm/dd/yyyy)	j. Amount
1	CK # 117	Adv.	11/1/06	\$ 498.00
				\$
5. Total only this Page				\$ 1283.59
6. Total of ALL CRO-1310 Pages				\$ 2368.49
(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)				

Disbursements

1. Committee Full Name (and Fund if applicable) <b>Ed Melvin for Co. Commissioner</b>	2. ID Number
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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 (include city, state, & zip) <b>WIDU Radio P.O. Box 2247 Fayetteville, NC 28302</b>	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 Cycle Sum to Date \$

f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount
1	CK# 119	Adm.	11/2/06	\$ 525.00
				\$

4. Payee Information     Add     Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>Fayetteville Observer 458 Whitfield St. Fayetteville NC 28306</b>	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 Cycle Sum to Date \$

f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount
1	CK# 120	Adm.	11/10/06	\$ 414.90
				\$

4. Payee Information     Add     Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>Fayetteville Press 3635 STE 101C Sycamore Dairy Rd Fayetteville NC 28303</b>	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 Cycle Sum to Date \$

f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount
1	CK# 121	Adm.	11/13/06	\$ 50.00
				\$

5. Total only this Page    \$ 989.90

6. Total of ALL CRO-1310 Pages  
*(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)*  
*(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)*  
*(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)*  
 \$

Disbursements

Pg \_\_\_\_\_ of \_\_\_\_\_ Amendment  Yes  No

1. Committee Full Name (and Fund if applicable)				2. ID Number	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input 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
UP + COMING 208 ROWAN ST. FAYETTEVILLE NC 28302			c. Level Registered (Specify)		e. Election Cycle 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		i. Date (mm/dd/yyyy)	j. Amount
1	CK # 122	Adm.		12/26/06	95.00
					\$
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)		e. Election Cycle 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		i. Date (mm/dd/yyyy)	j. Amount
					\$
					\$
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)		e. Election Cycle 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		i. Date (mm/dd/yyyy)	j. Amount
					\$
					\$
5. Total only this Page					\$ 95.00
6. Total of ALL CRO-1310 Pages <i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					\$