

# Disclosure Report Cover

Amendment
<input type="checkbox"/> Yes <input type="checkbox"/> 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

<b>1. Committee Information</b>	
a. Full Name <i>Greta Hawthorne</i>	c. ID Number <i>2MYF3J</i>
b. Mailing Address (include City, State and Zip Code) <i>406 Winkfield Court Juyetteville, D.C. 28303</i>	d. Date Filed <i>9/14/07</i>
	e. Phone Number <i>914/07</i>

2. Report Year <i>2007</i>	3. Period Start Date (mm/dd/yy) <i>8/20/07</i>	4. Period End Date (mm/dd/yy) <i>8/28/07</i>	5. Treasurer Full Name <i>Greta Hawthorne</i>
-------------------------------	---	---	--

<b>6. Type of Committee (Check One)</b>		<b>9. Type of Report (check only one type of report from one category)</b>		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<input type="checkbox"/> Municipal	<input type="checkbox"/> State/County	<input type="checkbox"/> Referendum
<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 checked="" type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
<b>7. Type of Fund (if applicable, check one)</b>		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First Plus	<input type="checkbox"/> Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third Plus	<input type="checkbox"/> Annual
<input type="checkbox"/> NC Political Party Financing Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
<input type="checkbox"/> NC Public Campaign Financing Fund		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	
<input type="checkbox"/> Other:		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	
<b>8. Number of Fundraisers this Report</b>		<b>10. Special Report Name</b>		

<b>11. Account Information</b>		<b>11. Account Information</b>	
a. Financial Institution Full Name <i>BB+T</i>	a. Financial Institution Full Name	b. Purpose <i>Campaign</i>	b. Purpose
b. Purpose	c. Account Code <i>01</i>	c. Account Code	c. Account Code
	d. Period Begin Balance <i>\$ 500.00</i>		d. Period Begin Balance <i>\$</i>

**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 and that I have been trained by the NC State Board of Elections according to Article 163.278.9(k).

*Greta Hawthorne*      *Greta Hawthorne*      *9/14/07*  
Printed Name of Signer      Signature of Appointed Treasurer      Date

**FOR OFFICE USE ONLY**

Date Received: *8/14/07*

Date Postmarked: \_\_\_\_\_

Date Scanned: \_\_\_\_\_

Date Data Entered: \_\_\_\_\_

Employee: \_\_\_\_\_

Employee: \_\_\_\_\_

Delivery Method

Normal Mail

Registered Mail

Hand Delivered

Electronically Filed

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	
<input type="checkbox"/> Yes	<input type="checkbox"/> 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	2. ID Number
Senta Hawthorne			2MYF35
Start of Election Cycle: January 1, 2007		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 500.00	\$ 0
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 50.00	\$ 50.00
6) Contributions from Individuals (CRO-1210)		\$	\$
7) Contributions from Political Party Committees (CRO-1220)		\$	\$
8) Contributions from Other Political Committees (CRO-1230)		\$	\$
9) Loan Proceeds (CRO-1410)		\$	\$ 524.00
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)		\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, and 11c)		\$ 50.00	\$ 574.00
<b>EXPENDITURES</b>			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$ 135.76	\$ 159.76
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$	\$
13c) Coordinated Party Expenditures (CRO-1310)		\$	\$
14) Loan Repayments (CRO-1420)		\$	\$
15) Refunds/Reimbursements From the Committee (CRO-1320)		\$	\$
16) In-Kind Contributions (CRO-1510)		\$	\$
17) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, and 16)		\$ 135.76	\$ 159.76
18) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 17)		\$ 414.24	\$ 414.24
<b>ADDITIONAL INFORMATION</b>			
19) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$	\$
20) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$	\$
21) 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) Administrative Support (CRO-1710)		\$	\$
25) Forgiven Loans (CRO-1440)		\$	\$
26) 48-Hour Notice Reports Sum		\$	\$



# Disbursements

Pg \_\_\_\_ of \_\_\_\_

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

*Marta Hawthorne*

*2MYF35*

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. Coordinated Committee Name	d. Comments
<i>staples</i> <i>5075 Morganston Rd</i> <i>Fay, N.C. 28314</i>			
c. Level Registered (Specify)		e. Election Sum to Date	
<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ <i>18.78</i>	

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
<i>01</i>	<i>Credit Card</i>	<i>B</i>	<i>7/01/07</i>	\$ <i>18.78</i>	<i>Expense Map</i>
				\$	

4. Payee Information  Add  Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name	d. Comments
<i>newport printing</i> <i>648 Kelly Rd</i> <i>Fay, N.C. 28303</i>			
c. Level Registered (Specify)		e. Election Sum to Date	
<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ <i>90.95</i>	

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
<i>01</i>	<i>Credit Card</i>	<i>B</i>	<i>7/27/07</i>	\$ <i>90.95</i>	<i>Company Cards</i>
				\$	

4. Payee Information  Add  Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name	d. Comments
<i>office box # 390</i> <i>1800 Shibo Rd.</i> <i>Fay, N.C. 28303</i>			
c. Level Registered (Specify)		e. Election Sum to Date	
<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ <i>32.03</i>	

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
<i>01</i>	<i>Credit Card</i>	<i>B</i>	<i>7/28/07</i>	\$ <i>90.95</i>	<i>Printing/copy</i>
				\$	

5. Total only this Page \$ *135.76*

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)  
 \$ *135.76*

7. Purpose Codes (List detailed expenditure code in (h.) above)

- |              |                |                      |                                     |
|--------------|----------------|----------------------|-------------------------------------|
| 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 (k)