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	c. ID Number
TEAM Stackhaus Campaign Committee	
b. Mailing Address (include City, State and Zip Code)	**d. Date Filed**
PO Box 1693 Fayetteville, NC 28302	7-11-06
	e. Phone Number
	(910) 483-5292

2. Report Year	3. Period Start Date (mm/dd/yyyy)	4. Period End Date (mm/dd/yyyy)	5. Treasurer Full Name
	April 16, 2006	June 30, 2006	Diane DeBose

6. Type of Committee *(Check one)*

- [X] Candidate Campaign
- [ ] Party
- [ ] Joint Fundraiser
- [ ] PAC
- [ ] Referendum

7. Type of Fund *(if applicable, check one)*

- [ ] Soft Money Account
- [ ] "Booster Fund"
- [ ] Building Fund
- [ ] NC Political Party Financing Fund
- [ ] Presidential Election Year Candidates Fund
- [ ] NC Public Campaign Financing Fund
- [ ] Other:

8. Type of Report *(check only one type of report from one category)*

Municipal	State/County	Referendum
[ ] Organizational	[ ] Organizational	[ ] Organizational
[ ] Thirty-five day	Quarterly	[ ] Pre-referendum
[ ] Pre-primary	[ ] First Plus	[ ] Final
[ ] Pre-election	[X] Second	[ ] Supplemental Final
[ ] Pre-runoff	[ ] Third Plus	[ ] Annual
Semi-annual	[ ] Fourth	[ ] Special
[ ] Mid Year	Semi-annual	
[ ] Year End	[ ] Mid Year	**9. Special Report Name**
[ ] Final	[ ] Year End	
[ ] Special	[ ] Final	
	[ ] Special	

10. Account Information

a. Financial Institution Full Name		b. Purpose	c. Code
Wachovia		For Campaign Expenses	1
		d. Period Begin Balance	
		$ 4807.60	

10. Account Information

a. Financial Institution Full Name		b. Purpose	c. Code
		d. Period Begin Balance	
		$	

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.

Diane DeBose	Diane DeBose	07/10/06
Printed Name of Signer	Signature of Appointed Treasurer	Date

FOR OFFICE USE ONLY

Date Received: _____ Employee: _____

Date Postmarked: _____ Employee: _____

Date Scanned: _____ Employee: _____

RECEIVED JUL 11 2006

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
TEAM Stackhouse Campaign Committee	2nd Quarter Report	

Start of Election Cycle: January 1, _____		Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start		$ 4,807.60	$ ~~4,807.60~~	2,263.1
RECEIPTS				
5) Aggregated Contributions from Individuals	(CRO-1205)	$ 215.00	$ ~~215.00~~ 2,471.00	2,471.00
6) Contributions from Individuals	(CRO-1210)	$ 150.00	$ ~~150.00~~ 10,010.00	10,010.00
7) Contributions from Political Party Committees	(CRO-1220)	$ 0	$ 0 200.00	200.00
8) Contributions from Other Political Committees	(CRO-1230)	$ 0	$ 0	
9) Loan Proceeds	(CRO-1410)	$ 7268.54	$ ~~7268.54~~	8228.5
10) Refunds/Reimbursements To the Committee	(CRO-1240)	$ 0	$ 0	
11) Other Receipt Sources	(CRO-1250)			
11a) Interest on Bank Accounts	(CRO-1250)	$ 0	$ 0	
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	$ 0	$ 0	
11c) Outside Sources of Income	(CRO-1250)	$ 0	$ 0	
12) "Goods and Services" Contributions	(CRO-1260)	$ 0	$ 0	
13) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)		12,441.14 $ ~~7,633.54~~	20,909.54 $ 7,633.54	
EXPENDITURES				
14) Disbursements	(CRO-1310)			
14a) Operating Expenditures	(CRO-1310)	$ ~~4004.37~~	$ ~~4004.37~~	13,094.9
14b) Contributions to Candidates/Political Committees	(CRO-1310)	$ 0 3994.37	$ 0	
14c) Coordinated Party Expenditures	(CRO-1310)	$ 0	$ 0	
15) Loan Repayments	(CRO-1420)	$ 0	$ 0	
16) Refunds/Reimbursements From the Committee	(CRO-1320)	$ 0	$ 0	
17) In-Kind Contributions	(CRO-1510)	$ 0	$ ~~0~~ 1631.39	
18) TOTAL EXPENDITURES (Add lines 14a, 14b, 14c, 15, 16, and 17)		3994.37 $ ~~4,004.37~~	14,726.38 $ ~~4004.37~~	
19) Cash on Hand at End (Add lines 4 and 13 together, then subtract line 18)		8446.77 $ ~~5629.17~~	8446.77 $ ~~3629.17~~	
ADDITIONAL INFORMATION				
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		$	$	

Aggregated Contributions from Individuals

Page ____ of ____ Amendment ☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)	2. ID Number
TEAM Stackhaus Campaign Committee	

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove	1	Check		04-21-06	$ 25.00
☐ Add ☐ Remove	1	Check		04-21-06	$ 15.00
☐ Add ☐ Remove	1	Check		04-21-06	$ 25.00
☐ Add ☐ Remove	1	Check		05-02-06	$ 25.00
☐ Add ☐ Remove	1	Check		05-02-06	$ 50.00
☐ Add ☐ Remove	1	Check		05-02-06	$ 25.00
☐ Add ☐ Remove	1	Check		05-22-06	$ 50.00
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
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☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$

4. Total only this Page	$ 215.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$

Contributions from Individuals

Pg ____ of ____

Amendment ☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)	2. ID Number
TEAM Stackhaus Campaign Committee	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
Jerry Lamont Johnson 316 Post Ave Fayetteville, NC 28301	Minister c. Employer's Name/Specific Field Ingold First Baptist Church	e. Election Cycle Sum to Date $ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Check		05-02-06	$100.00
☒	1	Check	already	02-25-06	$ 50.00
☒	1	Check	[illegible]	02-08-06	$100.00

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
Ernie Odom PO Box 287 Irmo, SC 29063	Retired c. Employer's Name/Specific Field FBI	e. Election Cycle Sum to Date $ 50.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Check		05/22/2006	$ 50.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ 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
☐					$
☐					$
☐					$ 150.00

4. Total only this Page	$ 300.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 300.00

Disbursements

Pg ____ of ____ Amendment ☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)	2. ID Number
TEAM Stackhaus Campaign Committee	

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	c. Level Registered (Specify)	d. Comments	e. Election Cycle Sum to Date
Fayetteville Observer 1158 Whitfield St. Fayetteville, NC 28306		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 1,363.66

f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount
1	Check	Advertisement	04-18-2006	$ 1,363.66
				$

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Cycle Sum to Date
New Life Bible Church 1420 Hoke Loop Road Fayetteville, NC 28314		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 50.00

f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount
1	Check	Donation to Youth Center	04-19-2006	$ 50.00
				$

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Cycle Sum to Date
Walker-Spivey School 500 Fisher St. Fayetteville, NC 28301		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 100.00

f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount
1	Check	Donation to the Students for the Prom	04-27-2006	$ 100.00
				$

5. Total only this Page	$ 1,513.66
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)*	3994.37 $ 4,004.37

Disbursements

Pg ____ of ____ Amendment ☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)	2. ID Number
TEAM Stackhaus Campaign Committee	

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
Cover Our Children 420 Ralph Street Fayetteville, NC 28301	c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Cycle Sum to Date $ 500.00

f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount
1	Check	Donation for 10 Rain Coats	05-10-2006	$ 500.00
				$

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
Board of Election 301 E. Russell St. Fayetteville, NC 28301	c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Cycle Sum to Date $ 118.50

f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount
1	Check		06-01-2006	$ 118.50
				$

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
Steve Hunt for Sheriff 2425 N. Center St. Box 225 Hickory, NC 28601	c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Cycle Sum to Date $ 100.00

f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount
1	check	Donation to Campaign	06-20-2006	$ 100.00
				$

5. Total only this Page	$ 718.50
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
TEAM Stackhaus Campaign Committee	

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	c. Level Registered (Specify)	d. Comments	e. Election Cycle Sum to Date
CitiCard PO Box 753 Sioux City, IA		☐ Federal ☐ County: ☐ State ☐ Municipality:		$1,762.21

f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount
1	Check		06-28-2006	$1,000.00
1	Check		02-21-2006	$762.21

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Cycle Sum to Date
		☐ Federal ☐ County: ☐ State ☐ Municipality:		$

f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount
				$
				$

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Cycle Sum to Date
		☐ Federal ☐ County: ☐ State ☐ Municipality:		$

f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount
				$
				$

5. Total only this Page	$1,762.21
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)*	$

Loan Proceeds

Pg ____ of ____ Amendment ☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)	2. ID Number
TEAM Stackhaus Campaign Committee	

3. Lender Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
Julian Stackhaus 3445 Bennett Dr. Fayetteville, NC 28301		
	c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		f. End Date (mm/dd/yyyy)

g. Rate	h. Security Pledged	i. Account Code	j. Form of Payment	k. Amount
%	NO		Check	$ 7,268.54

l. Full Name of Lending Institution	m. Loan Number

4. Endorsers/Makers *(The people who guarantee the loan.)*

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field
	d. Percentage	e. Amount
	%	$

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field
	d. Percentage	e. Amount
	%	$

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field
	d. Percentage	e. Amount
	%	$

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field
	d. Percentage	e. Amount
	%	$

5. Total of ALL CRO-1410 Pages *(This line must be on line 9 of Detailed Summary Page CRO-1100)* $ 7,268.54