

Disclosure Report Cover

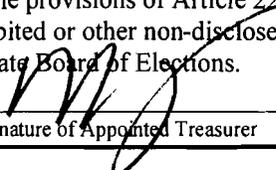
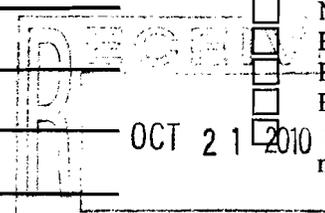
Amendment

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 Linda Priest Campaign		c. ID Number 000000	
b. Mailing Address (include City, State and Zip Code) PO Box 87167 Fayetteville, NC 28304		d. Date Filed 10/21/10	
		e. Phone Number 910-323-1040	
2. Report Year 2010	3. Period Start Date (mm/dd/yy) 07/01/10	4. Period End Date (mm/dd/yy) 10/16/10	5. Treasurer Full Name A. Johnson Chestnutt
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"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser		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 type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
7. Type of Fund (if applicable, check one)		State/County	
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:		<input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input checked="" type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input 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 BB&T		a. Financial Institution Full Name	
b. Purpose For campaign expenses & receipts	c. Account Code 01	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 174.00		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.			
A. Johnson Chestnutt		 _____ Signature of Appointed Treasurer	
Printed Name of Signer		Date	
FOR OFFICE USE ONLY			
Date Received: _____	Employee: _____	Delivery Method	
Date Postmarked: _____	Employee: _____	<input type="checkbox"/> Normal Mail <input checked="" type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed	
Date Scanned: _____	Employee: _____	Signer has not received mandatory training	
Date Data Entered: _____	Employee: _____		
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	
Linda Priest Campaign	3rd Quarter	000000	
Start of Election Cycle: January 1, 2010		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 174.00	\$ 0.00
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)		\$	\$
6) Contributions from Individuals (CRO-1210)		\$	\$
7) Contributions from Political Party Committees (CRO-1220)		\$ 36.34	\$ 36.34
8) Contributions from Other Political Committees (CRO-1230)		\$	\$
9) Loan Proceeds (CRO-1410)		\$	\$ 1,200.00
10) Refunds/Reimbursements To the Committee (CRO-1240)		\$	\$ 100.00
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)		\$	\$
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)		\$ 36.34	\$ 1336.34
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$ 0.00	\$ 1,126.00
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)		\$ 36.34	\$ 36.34
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$	\$
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 174.00	\$ 174.00
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 (CRO-2200)		\$	\$
28) Contributions to be Refunded (CRO-1215)		\$	\$

Contributions from Political Party Committees

Use this form to report contributions from a political party

1. Committee Full Name (and Fund if applicable) Linda Priest Campaign						2. ID Number 000000	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) NC Democratic Party 220 Hillsborough St. Raleigh, NC 27601						b. Comments	
						c. Election Sum to Date	
						\$ 7.98	
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)		h. Amount		
		Printing	10/2/2010		\$ 7.98		
					\$		
					\$		
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) NC Democratic Party 220 Hillsborough St. Raleigh, NC 27601						b. Comments	
						c. Election Sum to Date	
						\$ 28.36	
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)		h. Amount		
		Newspaper Ad	10/13/2010		\$ 36.34		
					\$		
					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)						b. Comments	
						c. Election Sum to Date	
						\$	
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)		h. Amount		
					\$		
					\$		
					\$		
4. Total only this Page						\$ 36.34	
5. Total of ALL CRO-1220 Pages <i>(This line must be on line 7 of Detailed Summary Page CRO-1100)</i>						\$ 36.34	

In-Kind Contributions

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.
Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Linda Priest Campaign		000000	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
NC Democratic Party 220 Hillsborough St. Raleigh, NC 27601		<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input checked="" type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			d. Election Sum to Date
			\$ 7.98
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Printing		10/02/10	\$
			\$
			\$
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
NC Democratic Party 220 Hillsborough St. Raleigh, NC 27601		<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input checked="" type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			d. Election Sum to Date
			\$ 36.34
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Newspaper Ad		10/13/10	\$
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
		<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			d. Election Sum to Date
			\$
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
			\$
			\$
			\$
4. Total only this Page			\$ 36.34
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>			\$ 36.34