

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>Sheryl Lewis Campaign Fund</i>			c. ID Number <i>LCEA 09</i>	
b. Mailing Address (include City, State and Zip Code) <i>3011 Bankhead Dr Jaxetteville, NC 28306</i>			d. Date Filed	
			e. Phone Number <i>910-426-6999</i>	
2. Report Year <i>2008</i>	3. Period Start Date (mm/dd/yy) <i>10-19-08</i>	4. Period End Date (mm/dd/yy) <i>12-31-08</i> <i>Final Report</i>	5. Treasurer Full Name <i>DELORIS H. SEASE</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"/> Joint Fundraiser <input type="checkbox"/> Referendum <input type="checkbox"/> Party <input type="checkbox"/> PAC <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 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"/> 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 type="checkbox"/> Year End <input checked="" type="checkbox"/> Final <input type="checkbox"/> Special		
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> NC Political Party Financing Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:		Referendum <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special		
8. Number of Fundraisers this Report		10. Special Report Name		
11. Account Information				
a. Financial Institution Full Name <i>SECU</i>				
b. Purpose <i>Final Report for Campaign Receipts + Expenditure</i>		c. Account Code <i>01</i>		
		d. Period Begin Balance <i>\$ 4473.48</i>		
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 undisclosed 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>DELORIS H. SEASE</i> Printed Name of Signer		<i>Deloris H. Sease</i> Signature of Appointed Treasurer		<i>1-8-09</i> Date
FOR OFFICE USE ONLY				
Date Received:	<i>1-9-09</i>	Employee:	<i>Angie</i>	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
Date Postmarked:		Employee:		
Date Scanned:		Employee:		
Date Data Entered:		Employee:		
<p>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.</p>				

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	
Sheryl Lewis Campaign Fund		12-31-08 final		LCEA09	
Start of Election Cycle: January 1, _____			Total this Reporting Period		Total this Election Cycle
4) Cash on Hand at Start			\$ 4473.48		\$ 0
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$		\$ 1560.00	
6) Contributions from Individuals (CRO-1210)		\$ 200.00		\$ 4600.00	
7) Contributions from Political Party Committees (CRO-1220)		\$		\$	
8) Contributions from Other Political Committees (CRO-1230)		\$		\$ 200.00	
9) Loan Proceeds (CRO-1410)		\$		\$ 10,000.00	
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$		\$	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$ 7.42		\$ 20.41	
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)			\$ 207.42		\$ 16380.41
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 1109.46		\$ 12803.97	
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)		\$ 3571.44		\$ 3571.44	
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)			\$ 4680.90		\$ 16380.41
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)			\$ 0		\$ 0
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)		\$ 6428.56		\$	
27) 48-Hour Notice Reports Sum (CRO-2220)		\$		\$	
28) Contributions to be Refunded (CRO-1215)		\$		\$	

Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)					2. ID Number	
<i>Sherry Lewis Campaign Fund</i>					<i>LCFA09</i>	
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	
<i>Jack Freeman 203 Chloe Dr. Fayetteville, NC 28304 910-488-4744</i>			<i>Retired</i>			
			c. Employer's Name/Specific Field			
			<i>Retired</i>		e. Election Sum to Date	
					<i>\$ 100.00</i>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	<i>1</i>	<i>Check</i>		<i>10/22/08</i>		<i>\$ 100.00</i>
<input type="checkbox"/>						<i>\$</i>
<input type="checkbox"/>						<i>\$</i>
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	
<i>Peter A Wish 6858 Southstaff Rd. Fayetteville, NC 28306 910-425-7079</i>			<i>Retired</i>			
			c. Employer's Name/Specific Field			
			<i>Retired</i>		e. Election Sum to Date	
					<i>\$ 100.00</i>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	<i>1</i>	<i>Check</i>		<i>10/25/08</i>		<i>\$ 100.00</i>
<input type="checkbox"/>						<i>\$</i>
<input type="checkbox"/>						<i>\$</i>
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 Sum to Date	
					<i>\$</i>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>						<i>\$</i>
<input type="checkbox"/>						<i>\$</i>
<input type="checkbox"/>						<i>\$</i>
4. Total only this Page					<i>\$ 200.00</i>	
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>					<i>\$ 200.00</i>	

Other Receipt Sources

Use this form to report income not reported on another form. i.e. interest income, not for profit contributions etc.

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Sheryl Lewis Campaign Fund				LCEA09	
3. Type of Receipt Source (Please use separate CRO-1250 forms for each type of Receipt Source.)					
<input checked="" type="checkbox"/> Interest <input type="checkbox"/> Contributions from Not-for-Profit Organizations <input type="checkbox"/> Outside Sources of Income					
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #	d. Comments	
State Employees Credit Union P.O. Box 29606 Raleigh, NC 27626-0606 919-857-2000					
			c. Outside Source Explanation		
				e. Election Sum to Date	
				\$ 15.16	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
1	Interest Earned		1/20/08	\$ 2.99	
1	Interest Earned		11/19/07	\$ 2.53	
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #	d. Comments	
State Employees Credit Union P.O. Box 29606 Raleigh, NC 27626-0601 919-857-2000					
			c. Outside Source Explanation		
				e. Election Sum to Date	
				\$ 17.06	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
1	Interest Earned		12/16/08	\$ 1.90	
				\$	
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #	d. Comments	
			c. Outside Source Explanation		
				e. Election Sum to Date	
				\$	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
5. Total only this Page				\$ 7.42	
6. Total of ALL CRO-1250 Pages				\$ 7.42	
<small>(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest)</small>					
<small>(This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution)</small>					
<small>(This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)</small>					

Disbursements

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) <i>Sheryl Lewis Campaign Fund</i>						2. ID Number <i>LCEA09</i>
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input checked="" 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 <i>(include city, state, & zip)</i> <i>Moore Exposure LLC 443 Franklin Street Fayetteville, NC 28301 910-486-8021</i>			b. Coordinated Committee Name		d. Comments	
			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>\$ 1121.17</i>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
<i>1</i>	<i>Check</i>	<i>D</i>	<i>10/23/08</i>	<i>\$ 123.06</i>	<i>10 T-Shirts Digitally Printed</i>	
				<i>\$</i>		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> <i>Sums Club 1450 Skibo Rd. Fayetteville, NC 28301 910-864-7080</i>			b. Coordinated Committee Name		d. Comments	
			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>\$ 215.16</i>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
<i>1</i>	<i>Check</i>	<i>O</i>	<i>10/27/08</i>	<i>\$ 215.16</i>	<i>Good for Pole Workers on 11/4/08</i>	
				<i>\$</i>		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> <i>Sandspur/Fayetteville Publishing Co 458 Whitfield St. Fayetteville, NC 28302 910-486-3535</i>			b. Coordinated Committee Name		d. Comments	
			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>\$ 1732.50</i>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
<i>1</i>	<i>Check</i>	<i>A</i>	<i>10/31/08</i>	<i>\$ 82.50</i>	<i>Advertising in Newspaper - Thank you to Voters</i>	
				<i>\$</i>		
5. Total only this Page					<i>\$ 420.72</i>	
6. Total of ALL CRO-1310 Pages <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					<i>\$ 1109.46</i>	
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>						
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)						

Disbursements

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) <i>Sheryl Lewis Campaign Fund</i>						2. ID Number <i>LCEA09</i>
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input checked="" 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) <i>Sama Club 1450 Skibo Rd Fayetteville, NC 28301 910-864-7080</i>				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 Sum to Date <i>\$ 340.48</i>
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
<i>1</i>	<i>Check</i>	<i>0</i>	<i>11/2/08</i>	<i>\$ 125.32</i>	<i>Campaign Roadie to hand out at polls</i>	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>McDonalds 3000 N. Main Street Hope Mills, NC 28348 910-425-5329</i>				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 Sum to Date <i>\$ 116.42</i>
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
<i>1</i>	<i>Check</i>	<i>0</i>	<i>11/4/08</i>	<i>\$ 116.42</i>	<i>Breakfast + Lunch for Poll Workers</i>	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Dates-Tour Golf + c.c. 6775 Chongate Dr. Fayetteville, NC 28306 910-425-4667</i>				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 Sum to Date <i>\$ 441.00</i>
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
<i>1</i>	<i>Check</i>	<i>0</i>	<i>11/7/08</i>	<i>\$ 441.00</i>	<i>Campaign Dinner on 10/28/08 for Campaign Workers - Hand out materials to work Polls</i>	
				\$		
5. Total only this Page						<i>\$ 682.74</i>
6. Total of ALL CRO-1310 Pages <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>						<i>\$ 1109.46</i>
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)						

Disbursements

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) <i>Sheryl Lewis Campaign Fund</i>					2. ID Number <i>LCEH09</i>	
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) <i>State Employees Credit Union P.O. Box 29606 Raleigh, NC 27626-0606 919-857-2000</i>				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 Sum to Date \$		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
<i>1</i>	<i>Deduction on Statement</i>	<i>0</i>	<i>6/17/08</i>	<i>\$ 1.00</i>	<i>SECU Foundation Deduction on Stmt</i>	
<i>1</i>	<i>Deduction on Statement</i>	<i>0</i>	<i>7/16/08</i>	<i>\$ 1.00</i>	<i>SECU Foundation Deduction on Stmt</i>	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>State Employees Credit Union P.O. Box 29606 Raleigh, NC 27626-0606 919-857-2000</i>				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 Sum to Date \$		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
<i>1</i>	<i>Deduction on Statement</i>	<i>0</i>	<i>8/19/08</i>	<i>\$ 1.00</i>	<i>SECU Foundation Deduction on Stmt</i>	
<i>1</i>	<i>Deduction on Statement</i>	<i>0</i>	<i>9/17/08</i>	<i>\$ 1.00</i>	<i>SECU Foundation Deduction on Stmt</i>	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>State Employees Credit Union P.O. Box 29606 Raleigh, NC 27626-0606 919-857-2000</i>				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 Sum to Date \$ <i>6.00</i>		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
<i>1</i>	<i>Deduction on Statement</i>	<i>0</i>	<i>10/20/08</i>	<i>\$ 1.00</i>	<i>SECU Foundation Deduction on Stmt</i>	
<i>1</i>	<i>Deduction on Statement</i>	<i>0</i>	<i>11/19/08</i>	<i>\$ 1.00</i>	<i>SECU Foundation Deduction on Stmt</i>	
5. Total only this Page					\$ <i>6.00</i>	
6. Total of ALL CRO-1310 Pages					\$ <i>1109.46</i>	
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>						
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)						

Loan Repayments

Pg ____ of ____ Amendment Yes No

Use this form to report payments on an existing loan.

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Sheryl Lewis Campaign Fund				LCEA09	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
Sheryl J. Lewis 3011 Bankhead Dr. Fayetteville, NC 28306 910-426-6999					
				c. Original Loan Date	
				5/29/08	
				d. Original Loan Amount	
				\$ 10,000.00	
e. Remaining Loan Balance	f. Account Code	g. Form of Payment	h. Date (mm/dd/yyyy)	i. Repayment Amount	
\$ 6428.56	1	SECU Cashier Ch	12/16/08	\$ 3571.44	
\$				\$	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
				c. Original Loan Date	
				d. Original Loan Amount	
				\$	
e. Remaining Loan Balance	f. Account Code	g. Form of Payment	h. Date (mm/dd/yyyy)	i. Repayment Amount	
\$				\$	
\$				\$	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
				c. Original Loan Date	
				d. Original Loan Amount	
				\$	
e. Remaining Loan Balance	f. Account Code	g. Form of Payment	h. Date (mm/dd/yyyy)	i. Repayment Amount	
\$				\$	
\$				\$	
4. Total only this Page				\$ 3571.44	
5. Total of ALL CRO-1420 Pages				\$ 3571.44	
<i>(This line must be on line 15 of Detailed Summary Page CRO-1100)</i>					


North Carolina
State Board of Elections
506 N Harrington Street
Raleigh, NC 27603

Kimberly Westbrook-Strach
Deputy Director – Campaign Reporting

Mailing Address
PO Box 27255
Raleigh, NC 27611-7255
(919) 733-7173
Fax: (919) 715-8047

Forgiven Loan Statement

This form is used to report a loan that has been forgiven by the lender. The lender's signature is required on this form and it must accompany the next filed report

Name of Lender: <i>Sheryl J. Lewis</i>
Committee receiving loan: <i>Sheryl Lewis Campaign Fund</i>
Date of loan: <i>5-29-08</i>
Amount of original loan: <i>\$10,000.00</i>
*Amount of loan to be forgiven: <i>\$6428.56</i>

I, *Sheryl J. Lewis*, do not wish to be reimbursed for the amount of the loan indicated above* and will consider the amount loaned a contribution to the committee.

I understand and confirm no other parties are responsible for payment of this loan. I may not forgive a loan for which there is an outstanding balance owed to any source.

Sheryl J. Lewis
Signature of Lender

Delois H. Sesse
Signature of Committee Treasurer

Note: This Statement is to be filed with the Election Board where the committee's reports are filed.

