

COPY

Amendment

Yes No

Disclosure Report Cover

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 COMMITTEE TO ELECT VICTOR B. STARLING FOR SHERIFF	c. ID Number CUM-000000-C-001
b. Mailing Address (include City, State and Zip Code) 5232 SPREADING BRANCH ROAD HOPE MILLS, NC 28348	d. Date Filed 07/10/2014
	e. Phone Number

2. Report Year 2014	3. Period Start Date (mm/dd/yy) 04/20/2014	4. Period End Date (mm/dd/yy) 06/30/2014	5. Treasurer Full Name JACQUELINE TART KIRBY
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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"/> Party	Municipal	State/County
<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> PAC	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Referendum	<input type="checkbox"/> Legal Expense Fund	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-election	<input checked="" type="checkbox"/> Second
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth
<input type="checkbox"/> NC Public Campaign Financing Fund		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual
<input type="checkbox"/> Other:		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End
		<input type="checkbox"/> Special	<input type="checkbox"/> Final
			<input type="checkbox"/> Special
8. Number of Fundraisers this Report 0		10. Special Report Name	

3. Account Information		3. Account Information	
a. Financial Institution Full Name PNC BANK		a. Financial Institution Full Name ANEDOT	
b. Purpose CAMPAIGN	c. Account Code 0112	b. Purpose ON LINE CONTRIBUTIONS	c. Account Code 318
	d. Period Begin Balance \$ 13.63		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

Jacqueline T Kirby Jacqueline Kirby 07/10/2014
Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: JUL 11 2014 Employee: OK **Delivery Method**

Date Postmarked: _____ Employee: _____ Normal Mail

Date Scanned: _____ Employee: _____ Registered Mail

Date Data Entered: _____ Employee: _____ 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 checked="" 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	3. ID Number	
COMMITTEE TO ELECT VICTOR B. STARLING FOR SHERIFF	2014 Second Quarter	CUM-000000-C-001	
Start of Election Cycle: January 1, <u>2013</u>		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 13.63	\$ 0.00
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 0.00	\$ 175.00
6) Contributions from Individuals	(CRO-1210)	\$ 398.55	\$ 11,713.77
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0.00	\$ 0.00
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0.00	\$ 0.00
9) Loan Proceeds	(CRO-1410)	\$ 0.00	\$ 0.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$ 128.00	\$ 128.00
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0.00	\$ 0.00
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$ 0.00	\$ 0.00
11c) Outside Sources of Income	(CRO-1250)	\$ 0.00	\$ 0.00
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$ 0.00	\$ 0.00
11e) Exempt Purchase Price Sales	(CRO-1265)	\$ 0.00	\$ 0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		\$ 526.55	\$ 12,016.77
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 261.96	\$ 10,814.12
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 0.00	\$ 0.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0.00	\$ 0.00
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 140.00	\$ 584.21
15) Loan Repayments	(CRO-1420)	\$ 0.00	\$ 0.00
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$ 0.00	\$ 0.00
17) In-Kind Contributions	(CRO-1510)	\$ 98.55	\$ 578.77
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 500.51	\$ 11,977.10
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 39.67	\$ 39.67
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 0.00	
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$ 0.00	
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$ 0.00	
24) Account Transfers Within the Committee	(CRO-1720)	\$ 288.00	
25) Administrative Support	(CRO-1710)	\$ 0.00	\$ 0.00
26) Forgiven Loans	(CRO-1440)	\$ 0.00	\$ 0.00
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$ 0.00	\$ 0.00
28) Contributions to be Refunded	(CRO-1215)	\$ 0.00	\$ 0.00

Contributions from Individuals

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Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

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	
COMMITTEE TO ELECT VICTOR B. STARLING FOR SHERIFF				CUM-000000-C-001	
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
VICTOR BURKE STARLING 5232 SPREADING BRANCH ROAD HOPE MILLS, NC 28348 (910) 364-6982			CITY OF FAYETTEVILLE POLICE OFFICER		
			c. Employer's Name/Specific Field		
			CITY OF FAYETTEVILLE NC		
					e. Election Sum to Date
					\$ 1,503.77
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		In-Kind	MATERIALS FOR SIGNS	04/20/2014	\$ 98.55
<input type="checkbox"/>	318	Electric Funds Tran		05/02/2014	\$ 300.00
<input type="checkbox"/>					\$
4. Total only this Page					\$ 398.55
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 398.55

Refunds/Reimbursements To the Committee

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report refunds received by the committee or reimbursements for a previous expenditure.

1. Committee Full Name (and Fund if applicable)				2. ID Number	
COMMITTEE TO ELECT VICTOR B. STARLING FOR SHERIFF				CUM-000000-C-001	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Type of Committee		g. Comments
PNC BANK 454 RAMSEY ST FAYETTEVILLE, NC 28301			<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
			<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
			e. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		h. Original Expenditure Date
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		05/02/2014
					i. Original Expenditure Amt
					\$ 36.00
b. Job Title/Profession		c. Employer's Name/Specific Field		f. Purpose	
				OVERDRAFT FEE REFUNDED	
				j. Election Sum to Date	
				\$ 0.00	
k. Account Code	l. Form of Payment	m. In-Kind Description		n. Date (mm/dd/yyyy)	o. Amount
0112	Electric Funds Tran			05/08/2014	\$ 36.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Type of Committee		g. Comments
PNC BANK 454 RAMSEY ST FAYETTEVILLE, NC 28301			<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
			<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
			e. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		h. Original Expenditure Date
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		05/05/2014
					i. Original Expenditure Amt
					\$ 36.00
b. Job Title/Profession		c. Employer's Name/Specific Field		f. Purpose	
				OVERDRAFT FEE REIMBURSED	
				j. Election Sum to Date	
				\$ 0.00	
k. Account Code	l. Form of Payment	m. In-Kind Description		n. Date (mm/dd/yyyy)	o. Amount
0112	Draft			05/08/2014	\$ 36.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Type of Committee		g. Comments
PNC BANK 454 RAMSEY ST FAYETTEVILLE, NC 28301			<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
			<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
			e. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		h. Original Expenditure Date
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		05/09/2014
					i. Original Expenditure Amt
					\$ 7.00
b. Job Title/Profession		c. Employer's Name/Specific Field		f. Purpose	
				DAILY OVERDRAFT FEE REFUND	
				j. Election Sum to Date	
				\$ 0.00	
k. Account Code	l. Form of Payment	m. In-Kind Description		n. Date (mm/dd/yyyy)	o. Amount
0112	Draft			05/14/2014	\$ 7.00
4. Total only this Page					\$ 79.00
5. Total of ALL CRO-1240 Pages <i>(This line must be on line 10 of Detailed Summary Page CRO-1100)</i>					\$ 128.00

Refunds/Reimbursements To the Committee

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report refunds received by the committee or reimbursements for a previous expenditure.

1. Committee Full Name (and Fund if applicable)				2. ID Number	
COMMITTEE TO ELECT VICTOR B. STARLING FOR SHERIFF				CUM-000000-C-001	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Type of Committee		g. Comments
PNC BANK 454 RAMSEY ST FAYETTEVILLE, NC 28301			<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
			<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
			e. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		h. Original Expenditure Date
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		05/08/2014
					i. Original Expenditure Amt
					\$ 7.00
b. Job Title/Profession		c. Employer's Name/Specific Field		f. Purpose	
				DAILY OVERDRAFT FEE REFUND	
				j. Election Sum to Date	
				\$ 0.00	
k. Account Code	l. Form of Payment	m. In-Kind Description		n. Date (mm/dd/yyyy)	o. Amount
0112	Draft			05/14/2014	\$ 7.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Type of Committee		g. Comments
PNC BANK 454 RAMSEY ST FAYETTEVILLE, NC 28301			<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
			<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
			e. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		h. Original Expenditure Date
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		05/07/2014
					i. Original Expenditure Amt
					\$ 7.00
b. Job Title/Profession		c. Employer's Name/Specific Field		f. Purpose	
				DAILY OVERDRAFT FEE REFUND	
				j. Election Sum to Date	
				\$ 0.00	
k. Account Code	l. Form of Payment	m. In-Kind Description		n. Date (mm/dd/yyyy)	o. Amount
0112	Draft			05/14/2014	\$ 7.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Type of Committee		g. Comments
PNC BANK 454 RAMSEY ST FAYETTEVILLE, NC 28301			<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
			<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
			e. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		h. Original Expenditure Date
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		05/06/2014
					i. Original Expenditure Amt
					\$ 7.00
b. Job Title/Profession		c. Employer's Name/Specific Field		f. Purpose	
				DAILY OVERDRAFT FEE REFUND	
				j. Election Sum to Date	
				\$ 0.00	
k. Account Code	l. Form of Payment	m. In-Kind Description		n. Date (mm/dd/yyyy)	o. Amount
0112	Draft			05/14/2014	\$ 7.00
4. Total only this Page					\$ 21.00
5. Total of ALL CRO-1240 Pages <i>(This line must be on line 10 of Detailed Summary Page CRO-1100)</i>					\$ 128.00

Refunds/Reimbursements To the Committee

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report refunds received by the committee or reimbursements for a previous expenditure.

1. Committee Full Name (and Fund if applicable)				2. ID Number	
COMMITTEE TO ELECT VICTOR B. STARLING FOR SHERIFF				CUM-000000-C-001	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Type of Committee		g. Comments
PNC BANK 454 RAMSEY ST FAYETTEVILLE, NC 28301			<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
			<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
			e. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		h. Original Expenditure Date
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		05/05/2014
					i. Original Expenditure Amt
					\$ 7.00
b. Job Title/Profession		c. Employer's Name/Specific Field		f. Purpose	
				DAILY OVERDRAFT FEE REFUND	
				j. Election Sum to Date	
				\$ 0.00	
k. Account Code	l. Form of Payment	m. In-Kind Description		n. Date (mm/dd/yyyy)	o. Amount
0112	Draft			05/14/2014	\$ 7.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Type of Committee		g. Comments
PNC BANK 454 RAMSEY ST FAYETTEVILLE, NC 28301			<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
			<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
			e. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		h. Original Expenditure Date
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		05/12/2014
					i. Original Expenditure Amt
					\$ 21.00
b. Job Title/Profession		c. Employer's Name/Specific Field		f. Purpose	
				DAILY OVERDRAFT FEE REFUND	
				j. Election Sum to Date	
				\$ 0.00	
k. Account Code	l. Form of Payment	m. In-Kind Description		n. Date (mm/dd/yyyy)	o. Amount
0112	Draft			05/14/2014	\$ 21.00
4. Total only this Page					\$ 28.00
5. Total of ALL CRO-1240 Pages (This line must be on line 10 of Detailed Summary Page CRO-1100)					\$ 128.00

Aggregated Non-Media Expenditures

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Optional form used to report NC Non-Media Expenditures of \$50 or less.

1. Committee Full Name (and Fund if applicable)						2. ID Number
COMMITTEE TO ELECT VICTOR B. STARLING FOR SHERIFF						CUM-000000-C-001
3. Payee Information						
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
<input type="checkbox"/> Add <input type="checkbox"/> Remove	318	Draft	C	05/02/2014	\$ 12.00	BANK CHARGES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	0112	Draft	O	05/02/2014	\$ 36.00	OVERDRAFT ITEM FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	0112	Draft	O	05/05/2014	\$ 7.00	DAILY OVERDRAFT FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	0112	Draft	O	05/05/2014	\$ 36.00	OVERDRAFT FEES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	0112	Draft	O	05/06/2014	\$ 7.00	DAILY OVERDRAFT FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	0112	Draft	O	05/07/2014	\$ 7.00	DAILY OVERDRAFT FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	0112	Draft	O	05/08/2014	\$ 7.00	DAILY OVERDRAFT FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	0112	Draft	O	05/09/2014	\$ 7.00	DAILY OVERDRAFT FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	0112	Draft	O	05/12/2014	\$ 21.00	DAILY OVERDRAFT FEE
4. Total only this Page					\$	140.00
5. Total of ALL CRO-1315 Pages					\$	140.00
<i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>						
6. Purpose Codes (List detailed expenditure code in (d) above)						
	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	Q* - Donations to Legal Expense Fund			
O* - Other						
* Codes require detailed explanation in required remarks field (g)						

In-Kind Contributions

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

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	
COMMITTEE TO ELECT VICTOR B. STARLING FOR SHERIFF		CUM-000000-C-001	
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	
VICTOR BURKE STARLING 5232 SPREADING BRANCH ROAD HOPE MILLS, NC 28348 (910) 364-6982		<input checked="" 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	
		c. Comments	
		d. Election Sum to Date	
		\$ 1,503.77	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
MATERIALS FOR SIGNS		04/20/2014	\$ 98.55
			\$
			\$
4. Total only this Page		\$ 98.55	
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		\$ 98.55	

Account Transfers Within the Committee Page 1 of 1

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Use this form to transfer money between multiple bank, depository or credit accounts.

1. Committee Full Name (and Fund if applicable)			2. ID Number	
COMMITTEE TO ELECT VICTOR B. STARLING FOR SHERIFF			CUM-000000-C-001	
3. Transfer Information				
a. Amend	b. Account Code Transferred From	c. Account Code Transferred To	d. Date (mm/dd/yyyy)	e. Amount
<input type="checkbox"/> Add <input type="checkbox"/> Remove	318	0112	05/02/2014	\$ 288.00
4. Total only this Page				\$ 288.00
5. Total of ALL CRO-1720 Pages <i>(This line must be on line 24 of Detailed Summary Page CRO-1100)</i>				\$ 288.00

CRO-1720

NC State Board of Elections

December 2007