

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 Yes 2 Referendum | | c. ID Number 20-5292873 |
| b. Mailing Address (include City, State and Zip Code) P.O. Box 58592 Fayetteville, NC 28305 | | d. Date Filed 8/4/06 |
| | | e. Phone Number (910) 483-1437 |

| | | | |
|-------------------------------|--------------------------------------------------------|------------------------------------------------------|-------------------------------------------------------|
| 2. Report Year 2006 | 3. Period Start Date (mm/dd/yyyy) 07/27/2006 | 4. Period End Date (mm/dd/yyyy) 08/04/2006 | 5. Treasurer Full Name Christopher G. Dixon |
|-------------------------------|--------------------------------------------------------|------------------------------------------------------|-------------------------------------------------------|

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

| | | | |
|-----------------------------------------------------------|----------------------------------------|--------------------------------------------------|------------------------------------------|
| 10. Account Information | | 10. Account Information | |
| a. Financial Institution Full Name RBC Centura | | a. Financial Institution Full Name N/A | |
| b. Purpose Checking - for receipts and expenses | c. Code 1 | b. Purpose N/A | c. Code N/A |
| | d. Period Begin Balance \$ 0 | | d. Period Begin Balance \$ N/A |

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.

Christopher G. Dixon Christopher G. Dixon 8/4/06
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: _____ Employee: _____
 Date Postmarked: _____ Employee: _____
 Date Scanned: _____ Employee: _____

RECEIVED
AUG - 4 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 | |
|---------------------------------------------------------------------------------|-------------------|-----------------------------|---------------------------|
| Yes 2 Referendum | Organizational | 20-5292973 | |
| Start of Election Cycle: January 1, <u>2006</u> | | Total this Reporting Period | Total this Election Cycle |
| 4) Cash on Hand at Start | | \$ 0 | \$ 0 |
| RECEIPTS | | | |
| 5) Aggregated Contributions from Individuals (CRO-1205) | | \$ | \$ |
| 6) Contributions from Individuals (CRO-1210) | | \$ 857.56 | \$ 857.56 |
| 7) Contributions from Political Party Committees (CRO-1220) | | \$ | \$ |
| 8) Contributions from Other Political Committees (CRO-1230) | | \$ | \$ |
| 9) Loan Proceeds (CRO-1410) | | \$ 5.00 | \$ 5.00 |
| 10) Refunds/Reimbursements To the Committee (CRO-1240) | | \$ | \$ |
| 11) Other Receipt Sources (CRO-1250) | | | |
| 11a) Interest on Bank Accounts (CRO-1250) | | \$ | \$ |
| 11b) Contributions from Not-for-Profit Organizations (CRO-1250) | | \$ | \$ |
| 11c) Outside Sources of Income (CRO-1250) | | \$ | \$ |
| 12) "Goods and Services" Contributions (CRO-1260) | | \$ | \$ |
| 13) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12) | | \$ 862.56 | \$ 862.56 |
| EXPENDITURES | | | |
| 14) Disbursements (CRO-1310) | | | |
| 14a) Operating Expenditures (CRO-1310) | | \$ | \$ |
| 14b) Contributions to Candidates/Political Committees (CRO-1310) | | \$ | \$ |
| 14c) Coordinated Party Expenditures (CRO-1310) | | \$ | \$ |
| 15) Loan Repayments (CRO-1420) | | \$ | \$ |
| 16) Refunds/Reimbursements From the Committee (CRO-1320) | | \$ | \$ |
| 17) In-Kind Contributions (CRO-1510) | | \$ 857.56 | \$ 857.56 |
| 18) TOTAL EXPENDITURES (Add lines 14a, 14b, 14c, 15, 16, and 17) | | \$ 857.56 | \$ 857.56 |
| 19) Cash on Hand at End (Add lines 4 and 13 together, then subtract line 18) | | \$ 5.00 | \$ 5.00 |
| ADDITIONAL INFORMATION | | | |
| 20) Non-Monetary Gifts Given to Other Committees (CRO-1330) | | \$ | |
| 21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430) | | \$ 5.00 | |
| 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 | | \$ | \$ |

Contributions from Individuals

| | | | | | | | |
|----------------------------------------------------------------------------------------------------|-----------------|--------------------|----------------------------------|-----------------------------------|-----------|-------------------------------|--|
| 1. Committee Full Name (and Fund if applicable) | | | | | | 2. ID Number | |
| Yes 2 Referendum | | | | | | 20-5292873 | |
| 3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| Mike Lallier 500 Willow Bend Lane Fayetteville, NC 28303 (910) 483-9577 | | | | President | | None | |
| | | | | c. Employer's Name/Specific Field | | e. Election Cycle Sum to Date | |
| | | | | Reel-Lallier Chevrolet | | \$ 596.26 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | | |
| <input type="checkbox"/> | 1 | in-kind | Postage, printing, + supplies | 7/27/06 | \$ 596.26 | | |
| <input type="checkbox"/> | | | | | \$ | | |
| <input type="checkbox"/> | | | | | \$ | | |
| 3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| Susanne Rucker 2432 Torcross Drive Fayetteville, NC 28304 (910) 484-7957 | | | | Copy editor | | None | |
| | | | | c. Employer's Name/Specific Field | | e. Election Cycle Sum to Date | |
| | | | | Self-employed | | \$ 261.30 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | | |
| <input type="checkbox"/> | 1 | in-kind | postage | 7/27/06 | \$ 261.30 | | |
| <input type="checkbox"/> | | | | | \$ | | |
| <input type="checkbox"/> | | | | | \$ | | |
| 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 Cycle Sum to Date | |
| | | | | | | \$ | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | | |
| <input type="checkbox"/> | | | | | \$ | | |
| <input type="checkbox"/> | | | | | \$ | | |
| <input type="checkbox"/> | | | | | \$ | | |
| 4. Total only this Page | | | | | | \$ 857.56 | |
| 5. Total of ALL CRO-1210 Pages | | | | | | \$ 857.56 | |
| <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | | |

In-Kind Contributions

| | | | |
|-------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|
| 1. Committee Full Name (and Fund if applicable) | | 2. ID Number | |
| Yes 2 Referendum | | 20-5292873 | |
| 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 | |
| Mike Lallier 500 Willow Bend Lane Fayetteville, NC 28303 | | <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 None | |
| | | d. Election Cycle Sum to Date \$ 596.26 | |
| e. Description | | f. Date (mm/dd/yyyy) | g. Fair Market Amount |
| Postage for mailings | | 7/27/06 | \$ 261.30 |
| Printing for mailings | | 7/27/06 | \$ 166.92 |
| Supplies for mailings | | 7/27/06 | \$ 168.04 |
| 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 | |
| Suzanne Rucker 2432 Torcross Drive Fayetteville, NC 28304 | | <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 None | |
| | | d. Election Cycle Sum to Date \$ 261.30 | |
| e. Description | | f. Date (mm/dd/yyyy) | g. Fair Market Amount |
| Postage for mailings | | 7/27/06 | \$ 261.30 |
| | | | \$ |
| | | | \$ |
| 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 | |
| | | <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 | |
| | | c. Comments | |
| | | d. Election Cycle Sum to Date \$ | |
| e. Description | | f. Date (mm/dd/yyyy) | g. Fair Market Amount |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| 4. Total only this Page | | \$ 857.56 | |
| 5. Total of ALL CRO-1510 Pages <small>(This line must be on line 17 of Detailed Summary Page CRO-1100)</small> | | \$ 857.56 | |

Outstanding Loans

| | | | |
|-----------------------------------------------------------------------------------------------------------|---------------------|-----------------------------------|----------------------------|
| 1. Committee Full Name (and Fund if applicable) | | 2. ID Number | |
| Yes 2 Referendum | | 20-5292873 | |
| 3. Lender Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | b. Job Title/Profession | d. Comments |
| Mike Lallier 500 Willow Bend Lane Fayetteville, NC 28303 | | President | None |
| | | c. Employer's Name/Specific Field | e. Start Date (mm/dd/yyyy) |
| | | Reed-Lallier Chevrolet | 8/2/06 |
| f. End Date (mm/dd/yyyy) | | | |
| g. Rate | h. Security Pledged | i. Original Loan Amount | j. Remaining Loan Balance |
| 0 % | None | \$ 5.00 | \$ 5.00 |
| k. Full Name of Lending Institution | | l. Loan Number | |
| N/A | | N/A | |
| 3. Lender 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 |
| | | | e. Start Date (mm/dd/yyyy) |
| | | c. Employer's Name/Specific Field | f. End Date (mm/dd/yyyy) |
| | | | |
| g. Rate | h. Security Pledged | i. Original Loan Amount | j. Remaining Loan Balance |
| % | | \$ | \$ |
| k. Full Name of Lending Institution | | l. Loan Number | |
| | | | |
| 3. Lender 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 |
| | | | e. Start Date (mm/dd/yyyy) |
| | | c. Employer's Name/Specific Field | f. End Date (mm/dd/yyyy) |
| | | | |
| g. Rate | h. Security Pledged | i. Original Loan Amount | j. Remaining Loan Balance |
| % | | \$ | \$ |
| k. Full Name of Lending Institution | | l. Loan Number | |
| | | | |
| 4. Total only this Page | | \$ 5.00 | |
| 5. Total of ALL CRO-1430 Pages <i>(This line must be on line 21 of Detailed Summary Page CRO-1100)</i> | | \$ 5.00 | |

Loan Proceeds

| | | | | | |
|-----------------------------------------------------------------------------------------------|---------------------|-----------------------------------|--------------------|-----------------------------------|--|
| 1. Committee Full Name (and Fund if applicable) | | | | 2. ID Number | |
| Yes 2 Referendum | | | | 20-5292873 | |
| 3. Lender Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | b. Job Title/Profession | | d. Comments | |
| Mike Lallier 500 Willow Bend Lane Fayetteville, NC 28303 | | President | | None | |
| | | c. Employer's Name/Specific Field | | e. Start Date (mm/dd/yyyy) | |
| | | Reel-Lallier Chevrolet | | 8/2/06 | |
| f. End Date (mm/dd/yyyy) | | | | | |
| g. Rate | h. Security Pledged | i. Account Code | j. Form of Payment | k. Amount | |
| 0 % | None | 1 | Cash | \$ 5.00 | |
| l. Full Name of Lending Institution | | | | m. Loan Number | |
| N/A | | | | N/A | |
| 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 | | | | \$ 5.00 | |
| <i>(This line must be on line 9 of Detailed Summary Page CRO-1100)</i> | | | | | |