

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

a. Full Name Committee to Elect Cedric K. Jones, Sr. for Commissioner		c. ID Number 8CR851
b. Mailing Address (include City, State and Zip Code) 482 Phelps Road Franklinton, NC 27525		d. Date Filed 10-20-2014
		e. Phone Number 9194963626

2014	7/1/2014	9/30/2014	Fannie W. Brown
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<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:	<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	State/County <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	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
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a. Financial Institution Full Name First Citizens Bank		a. Financial Institution Full Name	
b. Purpose Campaign contribution and disbursement	c. Account Code 001	b. Purpose OCT 20 2014	c. Account Code
d. Period Begin Balance \$ 1,249.06 1102.06 <i>FNB</i>		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.

Fannie W. Brown

Printed Name of Signer

Fannie W. Brown

Signature of Appointed Treasurer

10-20-2014

Date

FOR OFFICE USE ONLY

Date Received: _____	Employee: _____
Date Postmarked: _____	Employee: _____
Date Scanned: _____	Employee: _____
Date Data Entered: _____	Employee: _____

Delivery Method

- Normal Mail
- Registered Mail
- 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 Yes No

Use this form to summarize all disclosure reporting forms and to total monetary information.

Committee to Elect Cedric Jones for Commissioner		3 rd Quarter	8CR851
Start of Election Cycle: January 1, 2014		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 1,249.06 1102.06	\$ 1,249.06 1102.06
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$ 250.00 200.00	\$ 250.00 200.00
7) Contributions from Political Party Committees	(CRO-1220)	\$ FNB	\$ FNB
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$	\$
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$	\$
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)	\$	\$
11e) Exempt Purchase Price Sales	(CRO-1265)	\$ FNB	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 250.00 200.00	\$ 250.00
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 810.20 801.20	\$ 801.20
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 125.00	\$ 125.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ OCT 20 2014	\$
15) Loan Repayments	(CRO-1420)	\$	\$
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	\$
17) In-Kind Contributions	(CRO-1510)	\$ FNB 926.20	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 935.20 375.86	\$ 926.20
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 562.86 FNB	\$ 375.86
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 Individuals

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

Committee to Elect Cedric K. Jones, Sr. for Commissioner						8CR851
a. Full Name, Mailing Address & Phone (include city, state, & zip) Rev. Diane F. Dozier 454 S. Main Street Franklinton, NC 27525		b. Job Title/Profession Retired Educator		d. Comments		
		c. Employer's Name/Specific Field Durham County Schools				
		e. Election Sum to Date \$ 20.00				
		f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Cynthia Terrell Kittrell, NC 27544		b. Job Title/Profession Engineer		d. Comments		
		c. Employer's Name/Specific Field NC DOT				
		e. Election Sum to Date \$ 50.00				
		f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip) ANONYMOUS		b. Job Title/Profession		d. Comments		
		c. Employer's Name/Specific Field				
		e. Election Sum to Date \$ 5.00				
		f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total for this Page					\$ 75.00	
5. Total for ALL CRO-1210 Pages (This total must be reported on the General Summary Page CRO-1100)					\$ 200.00	

Contributions from Individuals

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

Committee to Elect Cedric K. Jones, Sr. for Commissioner						8CR851
a. Full Name, Mailing Address & Phone (include city, state, & zip) Phyllis Alston 3649 W. River Road Franklinton, NC 27525		b. Job Title/Profession Retired Educator		d. Comments e. Election Sum to Date \$ 25.00		
		c. Employer's Name/Specific Field Franklin County Schools				
		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"/>					\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Armenta Eaton 1844 Mays Crossroads Road Louisburg, NC 27544 919-556-4375		b. Job Title/Profession Retired Social Worker		d. Comments e. Election Sum to Date \$ 25.00		
		c. Employer's Name/Specific Field Franklin County DSS				
		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"/>					\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Alitha Palich 3124 W. River Road Franklinton, NC 27525		b. Job Title/Profession Retired		d. Comments e. Election Sum to Date \$ 25.00		
		c. Employer's Name/Specific Field				
		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"/>					\$	
					\$ 75.00	
					\$ 200.00	

Contributions from Individuals

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

Committee to Elect Cedric K. Jones, Sr. for Commissioner						8CR851			
1. Contribution Information									
a. Full Name, Mailing Address & Phone (include city, state, & zip) Richie Duncan 25 Argent Ct. Youngsville, NC 27596		b. Job Title/Profession Asst. Economic Developer		d. Comments e. Election Sum to Date \$ 50.00					
		c. Employer's Name/Specific Field Franklin County Govt.							
		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"/>								\$	
2. Contribution Information									
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments e. Election Sum to Date \$					
		c. Employer's Name/Specific Field OCT 20 2014							
		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"/>								\$	
3. Contribution Information									
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments e. Election Sum to Date \$					
		c. Employer's Name/Specific Field							
		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"/>								\$	
Total for this form: \$ 50.00									
Total for all CRO-1210 forms: \$ 200.00									

Disbursements

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

Committee to Elect Cedric K. Jones, Sr. for Commis					8CR851
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Cedric K. Jones 482 Phelps Road Franklinton, NC 27525 919-496-3626		b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		d. Comments e. Election Sum to Date \$ 517.94	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	CHECK	SUPPLIES	08/05/2014	\$220.46	
001	CHECK	SIGNS/COPIES	09/24/2014	\$297.48	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Geraldine Manley Lumpkin Blvd Louisburg, NC 27549 919-426-5405		b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		d. Comments e. Election Sum to Date \$ 133.26	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	CHECK	SUPPLIES	08/05/2014	\$133.26	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Bridges of Hope Outreach Minis PO BOX 457 Franklinton, NC 27525 919-494-2826		b. Coordinated Committee Name COMMITTEE TO ELECT CEDRIC K. JONES, SR.		d. Comments DONATION	
c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ 100.00			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	CHECK	DONATION	08/05/2014	\$100.00	
					\$ 751.20
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)					\$ 751.20 89.20 JKB
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	Q* - Donation to Legal Expense Fund		
O* - Other					

Disbursements

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

Committee to Elect Cedric K. Jones, Sr. for Commis					8CR851
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures	
a. Full Name, Mailing Address & Phone (include city, state, & zip) FRANKLINTON RECREATION TOWN OF FRANKLINTON Franklinton, NC 27525		b. Coordinated Committee Name _____		d. Comments _____	
		c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ 50.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	CHECK	DONATION	08/05/2014	\$50.00	
				\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		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
				\$	
				\$	OCT 20 2014
a. Full Name, Mailing Address & Phone (include city, state, & zip)		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
				\$	
				\$	
					\$ 50.00
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)					\$ 200.00 JWB 801.20
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	Q* - Donation to Legal Expense Fund		
O* - Other					

Disbursements

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

Committee to Elect Cedric K. Jones, Sr. for Commis					8CR851
<input type="checkbox"/> Operating Expenses		<input checked="" type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Franklin County PAC Nash Street Louisburg, NC 27549		b. Coordinated Committee Name FRANKLIN COUNTY PAC		d. Comments \$ 125.00	
		c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" 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
001	CHECK	POLITICAL PA	08/05/2014	\$125.00	
				\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		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
				\$	
				\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		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
				\$	
				\$	
					\$ 125.00
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)					\$ 125.00
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	Q* - Donation to Legal Expense Fund		
O* - Other					