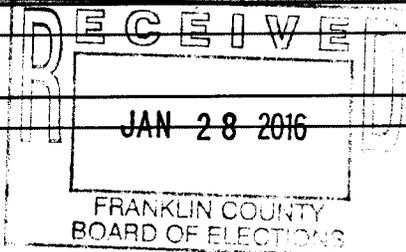


Disclosure Report Cover

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 ELECT SHELLEY DICKERSON		c. ID Number	
b. Mailing Address (include City, State and Zip Code) 230 LEONARD RD LOUISBURG, NC 27549		d. Date Filed 01/22/2016	
		e. Phone Number (919) 853-1488	



2015	07/01/2015	12/31/2015	SHELLEY DICKERSON
------	------------	------------	-------------------

<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> Referendum <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:	<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	State/County <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input 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 CCB		a. Financial Institution Full Name	
b. Purpose CAMPAIGN FINANCE	c. Account Code 1	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 5,000.00		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

Shelley Dickerson Shelley Dickerson 01/22/2016
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: _____	Employee: _____	Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input 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: _____	

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

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

Amendment

Yes No

DECLINE

1. Committee Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
ELECT SHELLEY DICKERSON		2015 Year End Semi-Annual		JAN 28 2016	
Start of Election Cycle: January 1, 2015			Total this Reporting Period		Total this Election Cycle
4) Cash on Hand at Start			\$ 0.00		\$ 0.00
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 0.00		\$ 0.00	
6) Contributions from Individuals (CRO-1210)		\$ 1,891.50		\$ 1,891.50	
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00		\$ 0.00	
8) Contributions from Other Political Committees (CRO-1230)		\$ 1,222.68		\$ 1,222.68	
9) Loan Proceeds (CRO-1410)		\$ 5,000.00		\$ 5,000.00	
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$ 0.00		\$ 0.00	
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)		\$ 8,114.18		\$ 8,114.18	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 4,314.00		\$ 4,314.00	
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)		\$ 0.00		\$ 0.00	
15) Loan Repayments (CRO-1420)		\$ 0.00		\$ 0.00	
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$ 128.10		\$ 128.10	
17) In-Kind Contributions (CRO-1510)		\$ 1,414.18		\$ 1,414.18	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 5,856.28		\$ 5,856.28	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 2,257.90		\$ 2,257.90	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0.00			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 5,000.00			
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)		\$ 0.00			
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)		\$ 128.10		\$ 128.10	

Contributions from Individuals

Amendment

Yes No

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

ELECT SHELLEY DICKERSON						RECEIVED
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments		
CONRAD BOYD STURGES II PO DRAWER 708 LOUISBURG, NC 27549		ATTORNEY		JAN 28 2016		
		c. Employer's Name/Specific Field		FRANKLIN COUNTY BOARD OF ELECTIONS		
		SELF EMPLOYED		e. Election Sum to Date		
				\$ 500.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		12/14/2015	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments		
MITCHELL G STYERS 102 N MAIN STREET FRANKLINTON, NC 27525-1315		LAWYER				
		c. Employer's Name/Specific Field		e. Election Sum to Date		
		BANZET, THOMPSON & STYERS		\$ 200.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		12/30/2015	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments		
SUSAN THOMPSON 418 FAIRVIEW ST WARRENTON, NC 27589		LAWYER				
		c. Employer's Name/Specific Field		e. Election Sum to Date		
		RETIRED		\$ 250.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		12/30/2015	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
					\$ 950.00	
					\$ 1,891.50	

Contributions from Other Political Committees Pg 1 of 1

Amendment
 Yes No

Use this form to report contributions from other candidate, referendum or PAC committees

ELECT SHELLEY DICKERSON				
<input type="checkbox"/> <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip) SHELLEY DICKERSON FOR CLERK 230 LEONARD RD LOUISBURG, NC 27549		b. Type of Committee <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum		d. Comments
		c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
		Franklin		
				e. Election Sum to Date \$ 1,222.68
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
1	In-Kind	DONATION OF FRAMES FOR SIGNS	12/28/2015	\$ 1,222.68
				\$
				\$
				\$ 1,222.68
				\$ 1,222.68

CRO-1230

NC State Board of Elections

April 2007

RECEIVED
 JAN 28 2016
 FRANKLIN COUNTY
 BOARD OF ELECTIONS

Loan Proceeds

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

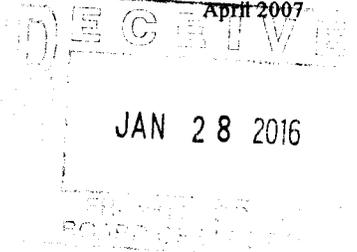
Use this form to report proceeds from a loan and loan endorser's information
 A loan proceeds statement must accompany each loan that is from an individual

ELECT SHELLEY DICKERSON				P.D. Number	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
SHELLEY DICKERSON 230 LEONARD ROAD LOUISBURG, NC 27549		LEGAL ASSISTANT		e. Start Date (mm/dd/yyyy)	
		c. Employer's Name/Specific Field		11/24/2015	
		BANZET, THOMPSON & STYERS		f. End Date (mm/dd/yyyy)	
g. Rate	h. Security Pledged	i. Account Code	j. Form of Payment	k. Amount	
%		1	Check	\$ 5,000.00	
l. Full Name of Lending Institution				m. Loan Number	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
		%		\$	
				\$ 5,000.00	

CRO-1410

NC State Board of Elections

April 2007



Disbursements

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

ELECT SHELLEY DICKERSON

Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures

a. Full Name, Mailing Address & Phone (include city, state, & zip) FRANKLIN CO BOARD OF ELECTIONS NC	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 \$ 122.00	

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	O	12/01/2015	\$ 122.00	FILING FEE
				\$	

a. Full Name, Mailing Address & Phone (include city, state, & zip) PATRIOT SIGNAGE INC 1001 SECOND AVE DAYTON, KY 41074	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 \$ 4,192.00	

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	B	12/28/2015	\$ 4,192.00	YARD SIGNS
				\$	

\$ 4,314.00

(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)

\$ 4,314.00

- | | | | |
|---------------------|-----------------------|-----------------------------|--|
| 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 | | | |

RECEIVED
 JAN 28 2016
 BOARD OF ELECTIONS

Refunds/Reimbursements From the Committee Pg 1 of 1

Amendment
 Yes No

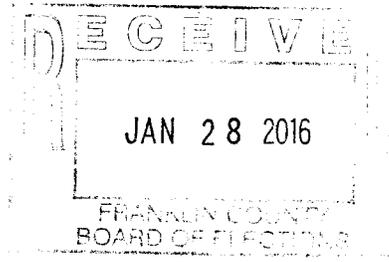
Use this form to report refunds/reimbursements, including contributions returned to the contributor

ELECT SHELLEY DICKERSON				ID Number	
<input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		g. Comments	
ALITHA G PALICH 3124 WEST RIVER ROAD FRANKLINTON, NC 27525		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party			
		e. Level Registered (Specify)		h. Original Receipt Date	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		12/01/2015	
				i. Original Receipt Amount	
				\$ 128.10	
b. Job Title/Profession	c. Employer's Name/Specific Field	f. Purpose Code		j. Election Sum to Date	
CONSULTANT	SELF EMPLOYED	P		\$ 0.00	
k. Account Code	l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount	
1	Check	MAGNETS	12/30/2015	\$ 128.10	
				\$ 128.10	
				\$ 128.10	
L - Returned to Contributor		M - Overpayment for Service		N - Exceeded Contibution Limit	
P* - Reimbursement of In-Kin		O* Other			

CRO-1320

NC State Board of Elections

July 2007

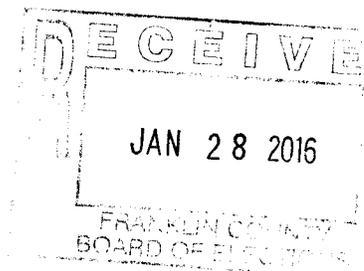


In-Kind Contributions

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.

ELECT SHELLEY DICKERSON		Z. ID Number
<input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip) SHELLEY DICKERSON 230 LEONARD ROAD LOUISBURG, NC 27549		b. Type of Contributor <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 \$ 5,191.50
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
CANDY FOR PARADES	11/23/2015	\$ 191.50
		\$
		\$
<input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip) SHELLEY DICKERSON FOR CLERK 230 LEONARD RD LOUISBURG, NC 27549		b. Type of Contributor <input type="checkbox"/> Individual <input checked="" 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 \$ 1,222.68
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
DONATION OF FRAMES FOR SIGNS	12/28/2015	\$ 1,222.68
		\$
		\$
		\$ 1,414.18
		\$ 1,414.18



Outstanding Loans

Amendment
 Yes No

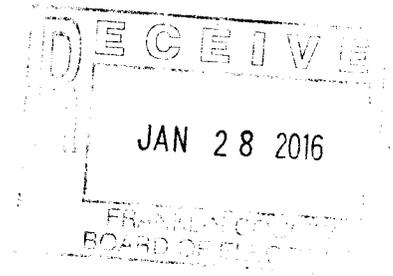
Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

ELECT SHELLEY DICKERSON			
<input type="checkbox"/> <input type="checkbox"/>			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
SHELLEY DICKERSON 230 LEONARD ROAD LOUISBURG, NC 27549		LEGAL ASSISTANT	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		BANZET, THOMPSON & STYERS	11/24/2015
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$ 5,000.00	\$ 5,000.00
k. Full Name of Lending Institution			l. Loan Number
			\$ 5,000.00
			\$ 5,000.00

CRO-1430

NC State Board of Elections

December 2007



Contributions to be Reimbursed

Amendment
 Yes No

Use this form to report Contributions under \$1,000 which will be refunded within 7 days.
 Refunds must be disclosed on the Refunds/Reimbursements Form (CRO-1320).

ELECT SHELLEY DICKERSON			
<input type="checkbox"/>		<input type="checkbox"/>	
Full Name & Mailing Address of the Payee (the original vendor)		Full Name & Mailing Address of the Reimbursee (the person to whom the campaign check is written)	
ALITHA G PALICH 3124 WEST RIVER ROAD FRANKLINTON, NC 27525		ALITHA G PALICH 3124 WEST RIVER ROAD FRANKLINTON, NC 27525	
a. Contribution Description	b. Date (mm/dd/yyyy)	c. Credit Card Y/N	d. Amount
MAGNETS	12/01/2015	N	\$ 128.10
			\$ 128.10
			\$ 128.10

CRO-1215

NC State Board of Elections

December 2007

