

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 <u>Committee to Elect Shirley Beeson</u>	c. ID Number
b. Mailing Address (include City, State and Zip Code) <u>132 Mill Creek Road SE Bolnic NC 28422</u>	d. Date Filed <u>12-4-2015</u>
	e. Phone Number

2. Report Year <u>2016</u>	3. Period Start Date (mm/dd/yy) <u>1-1-2016</u>	4. Period End Date (mm/dd/yy) <u>2-29-2016</u>	5. Treasurer Full Name <u>Anthony Wayne Street</u>
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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	Referendum
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	Quarterly	<input type="checkbox"/> Pre-referendum
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input checked="" type="checkbox"/> First	<input type="checkbox"/> Final
		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
<input type="checkbox"/> Booster Fund		Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Mid Year	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	
8. Number of Fundraisers this Report		<input type="checkbox"/> Special	<input type="checkbox"/> Final	10. Special Report Name
			<input type="checkbox"/> Special	

11. Account Information		11. Account Information	
a. Financial Institution Full Name <u>BB&T Banking Trust</u>	a. Financial Institution Full Name	b. Purpose <u>Campaign</u>	c. Account Code <u>MAPL</u>
b. Purpose	c. Account Code	d. Period Begin Balance \$	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.

Anthony Wayne Street Printed Name of Signer Anthony Wayne Street Signature of Appointed Treasurer 3-2-2016 Date

FOR OFFICE USE ONLY

Date Received: _____ Employee: _____

Date Postmarked: _____ Employee: MAR 4 2016

Date Scanned: _____ Employee: _____

Date Data Entered: _____ Employee: _____

RECEIVED
BRUNSWICK COUNTY BOARD OF ELECTIONS

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

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number
Committee to Elect Shirley Beeson	First Quarter	
Start of Election Cycle: January 1, <u>2016</u>	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	\$ <u>300.57</u>	\$
RECEIPTS		
5) Aggregated Contributions from Individuals (CRO-1205)	\$ <u>1200.00</u>	\$
6) Contributions from Individuals (CRO-1210)	\$	\$
7) Contributions from Political Party Committees (CRO-1220)	\$	\$
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)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)	\$	\$
EXPENDITURES		
13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$ <u>1,304.68</u>	\$
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)	\$	\$
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)	\$	\$
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ <u>195.89</u>	\$
ADDITIONAL INFORMATION		
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$ <u>500.00</u>	
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-2220)	\$	\$
28) Contributions to be Refunded (CRO-1215)	\$	\$

Contributions from Individuals

Pg ____ of ____ Amendment Yes 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 Shirley Babson							
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	
Carolyn Roberts Cogdell PO Box 3097 Bald Head Island, NC 28461				Retired Teacher			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				Brunswick County Schools		\$ 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"/>	MAPL	Check		Jan 11, 2016	\$ 500.00		
<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	
Donna Vereen - Curtin 317 Palmer Way Wilmington, NC 28412				Retired Teacher			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				Brunswick County Schools		\$ 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"/>	MAPL	Check		January 8, 2016	\$ 200.00		
<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	
Shirley Babson 132 Mill Creek Road Bolivia, NC 28422				Vice-Chair Brunswick County School Board		Personal loan to Campaign	
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				Brunswick County Schools		\$ 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"/>	MAPL	Check	Personal loan	2-23-2016	\$ 500.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 1200.00	
5. Total of ALL CRO-1210 Pages						\$ 1,200.00	
(This line must be on line 6 of Detailed Summary Page CRO-1100)							

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)						2. ID Number
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 <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
Capitol Promotions Inc. PO Box 231 Glenridge, PA 19038				c. Level Registered (Specify)		Campaign Signs e. Election Sum to Date \$ 425.00
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
MAPL	Debit Card	B	2-26-2016	\$ 425.00		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
Office Dept 2 Shalotte Crossing Parkway Shalotte, NC 28459				c. Level Registered (Specify)		e. Election Sum to Date \$ 149.68
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
MAPL	Debit Card		2-29-2016	\$ 149.68		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
Marco Rubio for President Online Payment				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:		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
MAPL	Debit Card	D	2-29-2016	\$ 50.00	50.00	
5. Total only this Page						\$ 624.68
6. Total of ALL CRO-1310 Pages						\$ 1,304.68
(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)						
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	Q* - Donation to Legal Expense Fund			
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)						2. ID Number
Committee to Elect Shirley Babson						
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)						
<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)			b. Coordinated Committee Name		d. Comments	
Brunswick County Republican Party 971 Old Ocean Highway Bolivia, NC			c. Level Registered (Specify)		Committee of 100	
			<input type="checkbox"/> Federal <input 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	
MAPL	Check	G	1-15-2016	\$ 100.00	Donation	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Brunswick County Republican Party 971 Old Ocean Highway Bolivia, NC 28422			c. Level Registered (Specify)		Lincoln Reagan Pay Dinner	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
					e. Election Sum to Date	
					\$ 600.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
MAPL	Check	G	2-11-2016	\$ 500.00	Donation	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Brunswick County Sheriff's Charitable Foundation Old Ocean Highway Bolivia NC 28422			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	
					\$ 80.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
MAPL	Check	O	2-22-2016	\$ 80.00	Donation	
				\$		
5. Total only this Page					\$ 680.00	
6. Total of ALL CRO-1310 Pages					\$	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)					1304.68	
(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)						
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		Q* - Donation to Legal Expense Fund
O* Other						
* Codes require detailed explanation in required remarks field (k)						



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

Kim Westbrook Strach
 Executive Director

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

Loan Proceeds Statement

This Statement is used to report detailed information about a new loan and is required to accompany the Loan Proceeds Form in the report for which the loan is initially disclosed. If the loan is from an individual, the lender's signature is required on this form.

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

- Name of committee to receive loan: Committee to Elect Shirley Babson
- Person or committee to make loan: Mrs. Shirley Babson
- Date of loan to committee: February 23, 2016
- Name of lending institution and account number (source):

- Amount of loan: \$500.00
- Description (if in-kind loan): _____
- Names of all parties responsible for payment of loan (guarantors):

- Period of loan: _____
- Rate of interest of loan: _____
- Security pledged for loan: _____

I, _____, acknowledge that all of the information
(Person lending money to committee)
 provided is complete, true, and accurate. I further understand I may not forgive a loan that has an outstanding balance to any source.

Signature of Lender

Date Signed

Anthony Wayne Street
Signature of Treasurer of Committee

March 4, 2016
Date Signed