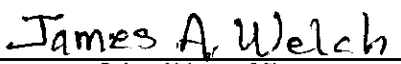
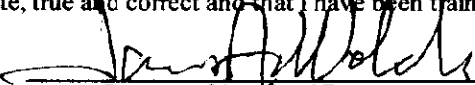
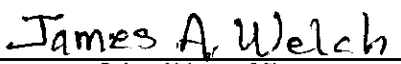
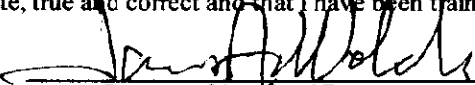
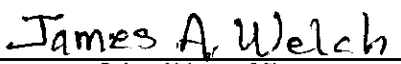
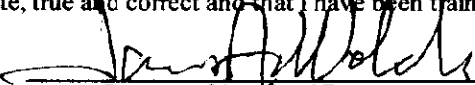


Disclosure Report Cover

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			c. ID Number																															
WILLIAM V. BELL CAMPAIGN COMMITTEE																																		
b. Mailing Address (include City, State and Zip Code)			d. Date Filed																															
1003 HUNTSMAN DR DURHAM, NC 27713-2384			08/26/2015																															
			e. Phone Number																															
			(919) 546-4333																															
2. Report Year																																		
2015																																		
3. Period Start Date (mm/dd/yy)																																		
01/01/2015																																		
4. Period End Date (mm/dd/yy)																																		
08/25/2015																																		
5. Treasurer Full Name																																		
JAMES WELCH																																		
6. Type of Committee (Check One)																																		
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund																																		
7. Type of Fund (If applicable, check one)																																		
<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:																																		
8. Number of Fundraisers this Report																																		
0																																		
9. Type of Report (check only one type of report from one category)																																		
<table border="0" style="width:100%;"> <tr> <td style="width:33%; vertical-align: top;"> Municipal <input type="checkbox"/> Organizational <input checked="" 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 </td> <td style="width:33%; vertical-align: top;"> 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 </td> <td style="width:33%; vertical-align: top;"> 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 </td> </tr> </table>					Municipal <input type="checkbox"/> Organizational <input checked="" 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																											
Municipal <input type="checkbox"/> Organizational <input checked="" 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																																
10. Special Report Name																																		
3. Account Information																																		
<table border="0" style="width:100%;"> <tr> <td style="width:50%; vertical-align: top;"> a. Financial Institution Full Name MECHANICS & FARMERS b. Purpose CAMPAIGN EXPENSES c. Account Code 1 d. Period Begin Balance \$ </td> <td style="width:50%; vertical-align: top;"> a. Financial Institution Full Name IN PERSON b. Purpose AUG 26 2015 DURHAM BOE c. Account Code d. Period Begin Balance \$ </td> </tr> </table>					a. Financial Institution Full Name MECHANICS & FARMERS b. Purpose CAMPAIGN EXPENSES c. Account Code 1 d. Period Begin Balance \$	a. Financial Institution Full Name IN PERSON b. Purpose AUG 26 2015 DURHAM BOE c. Account Code d. Period Begin Balance \$																												
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CERTIFICATION																																		
<p>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</p>																																		
<table border="0" style="width:100%;"> <tr> <td style="width:40%; text-align: center;">  Printed Name of Signer </td> <td style="width:40%; text-align: center;">  Signature of Appointed Treasurer </td> <td style="width:20%; text-align: center;"> 08/26/2015 Date </td> </tr> </table>					 Printed Name of Signer	 Signature of Appointed Treasurer	08/26/2015 Date																											
 Printed Name of Signer	 Signature of Appointed Treasurer	08/26/2015 Date																																
FOR OFFICE USE ONLY																																		
<table border="0" style="width:100%;"> <tr> <td style="width:30%;">Date Received:</td> <td style="width:20%;">8/26/2015</td> <td style="width:20%;">Employee:</td> <td style="width:20%;">MR</td> <td style="width:10%;">Delivery Method</td> </tr> <tr> <td>Date Postmarked:</td> <td></td> <td>Employee:</td> <td></td> <td><input type="checkbox"/> Normal Mail</td> </tr> <tr> <td>Date Scanned:</td> <td></td> <td>Employee:</td> <td></td> <td><input type="checkbox"/> Registered Mail</td> </tr> <tr> <td>Date Data Entered:</td> <td></td> <td>Employee:</td> <td></td> <td><input checked="" type="checkbox"/> Hand Delivered</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td><input type="checkbox"/> Electronically Filed</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td><input type="checkbox"/> Signer has not received mandatory training</td> </tr> </table>					Date Received:	8/26/2015	Employee:	MR	Delivery Method	Date Postmarked:		Employee:		<input type="checkbox"/> Normal Mail	Date Scanned:		Employee:		<input type="checkbox"/> Registered Mail	Date Data Entered:		Employee:		<input checked="" type="checkbox"/> Hand Delivered					<input type="checkbox"/> Electronically Filed					<input type="checkbox"/> Signer has not received mandatory training
Date Received:	8/26/2015	Employee:	MR	Delivery Method																														
Date Postmarked:		Employee:		<input type="checkbox"/> Normal Mail																														
Date Scanned:		Employee:		<input type="checkbox"/> Registered Mail																														
Date Data Entered:		Employee:		<input checked="" type="checkbox"/> Hand Delivered																														
				<input type="checkbox"/> Electronically Filed																														
				<input type="checkbox"/> Signer has not received mandatory training																														
<p>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.</p> <p>You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.</p>																																		

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	
WILLIAM V. BELL CAMPAIGN COMMITTEE		2015 Thirty-five-day			
Start of Election Cycle: January 1, 2015			Total this Reporting Period		Total this Election Cycle
4) Cash on Hand at Start			\$ 9,066.75		\$ 7,965.09
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 25.00		\$ 25.00	
6) Contributions from Individuals (CRO-1210)		\$ 943.57		\$ 943.57	
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)		\$ 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)		\$ 968.57		\$ 968.57	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 1,450.36		\$ 1,450.36	
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)		\$ 13.17		\$ 13.17	
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)		\$ 0.00		\$ 0.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 1,463.53		\$ 1,463.53	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 8,571.79		\$ 7,470.13	
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)		\$ 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)		\$ 0.00		\$ 0.00	

Aggregated Contributions from IndividualsPage 1 of 1

Amendment

☐ Yes ☒ No

Optional form used to report NC Contributions From Individuals of \$50 or less

1. Committee Full Name (and Fund if applicable)				2. ID Number	
WILLIAM V. BELL CAMPAIGN COMMITTEE					
3. Contributor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/> Add	1	Check		07/18/2015	\$ 25.00
<input type="checkbox"/> Remove					
4. Total only this Page					\$ 25.00
5. Total of ALL CRO-1205 Pages (This line must be on line 5 of Detailed Summary Page CRO-1100)					\$ 25.00

CRO-1205

NC State Board of Elections

April 2007

IN PERSON

AUG 26 2015

DURHAM BOE

Contributions from Individuals

Pg 1 of 1

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	
WILLIAM V. BELL CAMPAIGN COMMITTEE					
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
FARAD ALI 5301 LYON FARM DRIVE DURHAM, NC 27713			BUSINESS CONSULTATT		
			c. Employer's Name/Specific Field		
					e. Election Sum to Date
					\$ 943.57
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		02/12/2015	\$ 943.57
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 943.57
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 943.57

CRO-1210

NC State Board of Elections

April 2007

IN PERSON

AUG 2 6 2015

DURHAM BOE

Disbursements

Amendment

Pg 1 of 1 ☐ Yes ☒ No

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	
WILLIAM V. BELL CAMPAIGN COMMITTEE							
3. Type of Disbursement <i>(Please use separate CRO-1310 form for each type of Disbursement)</i>							
<input checked="" 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	
CAPITOL POMOTIONS, INC. PO BOX 231 GLENSIDE, PA 19038 (800) 884-3024							
				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	
						\$ 1,208.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Check	B	07/24/2015	\$ 1,208.00	CAMPAIGN SIGNS		
				\$			
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	
DURHAM BOARD OF ELECTIONS 201 N. ROXBORO ST DURHAM, NC 27713							
				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	
						\$ 242.36	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Check	O	07/06/2015	\$ 242.36	FILING FEE		
				\$			
5. Total only this Page						\$ 1,450.36	
6. Total of ALL CRO-1310 Pages							
(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)						\$ 1,450.36	
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>							
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.)							

CRO-1310

NC State Board of Elections

December 2009

IN PERSON

AUG 26 2015

DURHAM BOE

Aggregated Non-Media Expenditures

Page 1 of 1

Amendment

☐ Yes ☒ No

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

WILLIAM V. BELL CAMPAIGN COMMITTEE						
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	1	Check	B	07/07/2015	\$ 13.17	PHOTO FOR CAMPAIGN
<input type="checkbox"/> Remove						
4. Total only this Page					\$	13.17
5. Total of ALL CRO-1315 Pages					\$	13.17
<i>(This line must be on line 14 of Detailed Summary Page CRO-1140)</i>						
E - Salaries		B* - Printing		D - To Another Candidate		
		G - Political Party				
		J - Penalties		Q* - Donations to Legal Expense Fund		
O* - Other						
* Codes require detailed explanation in required remarks field (g)						

CRO-1315

NC State Board of Elections

December 2009

IN PERSON

AUG 26 2015

DURHAM BOE