

Disclosure Report Cover

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.

Amendment

☐ Yes ☒ No

1. Committee Information

a. Full Name

Committee to Elect Wayland Burton

c. ID Number

b. Mailing Address (include City, State and Zip Code)

PO Box 12
Rougemont, North Carolina 27572

d. Date Filed

03/10/2016

e. Phone Number

919-321-2981

2. Report Year

2016

3. Period Start Date (mm/dd/yy)

12/30/2016

4. Period End Date (mm/dd/yy)

02/29/2016

5. Treasurer Full Name

Wayland Burton

6. Type of Committee (Check One)

- ☒ Candidate Campaign ☐ Party
☐ PAC ☐ Referendum
☐ Independent Expenditure ☐ Joint Fundraiser
☐ Legal Expense Fund

9. Type of Report (check only one type of report from one category)

Municipal

- ☐ Organizational
☐ Thirty-five day
☐ Pre-primary
☐ Pre-election
☐ Pre-runoff
☐ Semi-annual
☐ Mid Year
☐ Year End
☐ Final
☐ Special

State/County

- ☒ Organizational
Quarterly
☒ First
☐ Second
☐ Third
☐ Fourth
☐ Semi-annual
☐ Mid Year
☐ Year End
☐ Final
☐ Special

Referendum

- ☐ Organizational
☐ Pre-referendum
☐ Final
☐ Supplemental Final
☐ Annual
☐ Special

7. Type of Fund (if applicable, check one)

- ☐ Booster Fund
☐ Building Fund
☐ Other:

8. Number of Fundraisers this Report

0

10. Special Report Name

11. Account Information

a. Financial Institution Full Name

Carter Bank & Trust

b. Purpose

Campaign Funds

c. Account Code

d. Period Begin Balance

\$ 36.30

11. Account Information

a. Financial Institution Full Name

b. Purpose

IN PERSON

MAR 10 2016

c. Account Code

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.

Wayland Burton

Printed Name of Signer

Signature of Appointed Treasurer

02/29/2016

Date

FOR OFFICE USE ONLY

Date Received:

3/10/16

Employee:

[Signature]

Delivery Method

- ☐ Normal Mail
☐ Registered Mail
☒ Hand Delivered
☐ Electronically Filed

Date Postmarked:

Employee:

Date Scanned:

Employee:

Date Data Entered:

Employee:

☐ 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.

Loan Proceeds

Pg 1 of 1

Amendment

☐

Yes

☒

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

1. Committee Full Name (and Fund Name, if any)					2. ID Number				
Committee to Elect Waylad Burton									
3. Lender Information									
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession			d. Comments		
Wayland Burton 313 Shetland Road Rougemont, North Carolina 27572				International Business Specialist			e. Start Date (mm/dd/yyyy)		
				c. Employer's Name/Specific Field					
				Defense Contract Management Agency			f. End Date (mm/dd/yyyy)		
g. Rate		h. Security Pledged		i. Account Code		j. Form of Payment		k. Amount	
0 %		0				Cash		\$ 975.00	
l. Full Name of Lending Institution								m. Loan Number	
N/A									
4. Endorser/Endorser									
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		
							\$		
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									
(This line must be on line 5 of Detailed Summary Page CRO-1410)								\$	

Detailed Summary

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

Amendment

☐ Yes ☒ No

Committee to Elect Wayland Burton		Organizational	
Start of Election Cycle: January 1, 2015		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 36.60	\$ 2182.58
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 253.53	\$ 253.53
6) Contributions from Individuals	(CRO-1210)	\$ 927.45	\$ 927.45
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$ 975.00	\$ 975.00
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)	\$	\$
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 2155.98	\$ 2182.58
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 2083.28	\$ 2083.28
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)		\$ 2083.28	\$ 2083.28
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 99.30	\$ 99.30
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)	\$	\$

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

1 of 1

☐ Yes ☒ No

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[illegible]

\$ 253.53

\$ 253.53

(This line must be on line 5 of Detailed Summary Page CRO-1100)

Contributions from Individuals

Pg 1 of 2 Amendment ☐ Yes ☒ No

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

1. Contributor Information						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments		
JoAnn Parker 712 Saratoga Drive Durham, North Carolina 27704			IT Specialist			
			c. Employer's Name/Specific Field			
			GTE			
			e. Election Sum to Date			
			\$ 100.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		Check		01/12/2016	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
2. Contributor Information						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments		
Barbara Hayes 1204 Red Ashe Circle Durham, North Carolina 27704			Minister			
			c. Employer's Name/Specific Field			
			Self - Employed			
			e. Election Sum to Date			
			\$ 100.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		Check		01/14/2016	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments		
Benita Wall Johnson 6720 Calais Drive Durham, North Carolina 27712			Laboratory Support Supervisor			
			c. Employer's Name/Specific Field			
			DUHS			
			e. Election Sum to Date			
			\$ 189.95			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		EFT		03/10/2016	\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 389.95	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$	

Contributions from Individuals

Pg 2 of 2 Amendment ☐ Yes ☒ No

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

CRO-1210 Individual Contribution Report						Page Number
a. Full Name, Mailing Address & Phone (include city, state, & zip) Robyn Blount 14224 Summer Breeze Drive Jacksonville, FL 32218				b. Job Title/Profession FSO	d. Comments	
				c. Employer's Name/Specific Field Department of State		
				e. Election Sum to Date \$ 237.50		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		EFT		01/27/2016	\$ 237.50	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip) George Miller, Jr. 3862 Somerset Drive Durham, North Carolina 27707				b. Job Title/Profession Attorney	d. Comments	
				c. Employer's Name/Specific Field Self - Employed		
				e. Election Sum to Date \$ 300.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		Check		01/29/2016	\$ 300.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession	d. Comments	
				c. Employer's Name/Specific Field		
				e. Election 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"/>				03/10/2016	\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 537.50	
5. Total of ALL CRO-1210 Pages					\$ 927.45	

Disbursements

Pg 1

of 3

Amendment

☐ 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)					
Committee to Elect Wayland Burton					
2. Type of Disbursement					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
3. Party Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Staples 1710 East Franklin Chapel Hill, North Carolina 27514					
		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	
				\$ 25.78	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	Credit Card	B	01/04/2016	\$25.78	Banner
				\$	
4. Party Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Staples 3600 North Duke Street Durham, North Carolina 27704					
		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	
				\$ 161.74	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	Credit Card	K	01/12/2016	\$161.74	Ink Cartridges
				\$	
5. Party Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Staples 1710 East Franklin Durham, North Carolina 27514					
		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	
				\$ 14.76	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	Credit Card	B	01/19/2016	\$14.76	Business Cards
				\$	
6. Total only this Page				\$ 202.28	
6. Total of ALL CRO-1100 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)					
7. Purpose Codes (List detailed expenditure code in (f.) above)					
A* - Media		B* - Printing		C* - Fundraising	
E - Salaries		F* - Equipment		G - Political Party	
I - Postage		J - Penalties		K* - Office Expenses	
O* - Other				D - To Another Candidate	
				H* - Holding Public Office Expenses	
				Q* - Donation to Legal Expense Fund	
* Codes require detailed explanation in required remarks field (k)					

Disbursements

Pg 2 of 3

Amendment

☐ 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)					
Committee to Elect Wayland Burton					
2. Type of Disbursement (Please check one)					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
3. Expense Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Sir Speedy Printing 3312 Guess Road Durham, North Carolina 27705					
		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	
				\$ 1,204.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	Credit Card	B	01/20/2016	\$1,204.00	Signs
				\$	
4. Expense Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Dirt Cheap Signs 7301 Bar K Ranch Road Lago Vista, TX 78645					
		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	
				\$ 256.83	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	Credit Card	B	02/05/2016	\$256.83	Signs
				\$	
5. Expense Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Dirt Cheap Signs 7301 Bar K Ranch Road Lago Vista, TX 78645					
		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	
				\$ 179.91	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	Credit Card	B	02/16/2016	\$179.91	Signs
				\$	
6. Total only this Page				\$ 1640.74	
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)					
7. Purpose Codes (List detailed expenditure code in (k.) above)					
A* - Media		B* - Printing		C* - Fundraising	
E - Salaries		F* - Equipment		G - Political Party	
I - Postage		J - Penalties		K* - Office Expenses	
O* - Other				D - To Another Candidate	
				H* - Holding Public Office Expenses	
				Q* - Donation to Legal Expense Fund	
* Codes require detailed explanation in required remarks field (k.)					

Disbursements

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Amendment

☐ Yes ☒ No

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

Committee to Elect Wayland Burton					
<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) Dirt Cheap Signs 7301 Bar K Ranch Road Lago Vista, TX 78645		b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		d. Comments e. Election Sum to Date \$ 225.50	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	Credit Card	B	02/03/2016	\$225.50	Signs
				\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Staples 1710 East Franklin Chapel Hill, North Carolina 27514		b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		d. Comments e. Election Sum to Date \$ 14.76	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	Credit Card	B	01/14/2016	\$14.76	Business Cards
				\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		d. Comments 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
				\$	
				\$	
				\$ 240.26	
(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)				\$ 2083.28	
7. Purpose Codes (List detailed expenditure code in (f.) above)					
A* - Media E - Salaries I - Postage O* - Other		B* - Printing F* - Equipment J - Penalties		C* - Fundraising G - Political Party K* - Office Expenses	
				D - To Another Candidate H* - Holding Public Office Expenses Q* - Donation to Legal Expense Fund	
* Codes require detailed explanation in required remarks field (k)					