Do not use this form to up					THE TAX TO BE A SECURED AND A SECURED AND A SECURED ASSESSMENT ASS
1. Committee Information					
a. Full Name					c. ID Number
b. Mailing Address (include Ci	ity, State and Zip Code)	* Kel	ly Smoke	IN-PERSON	d. Date Filed
	eyetteville Ra	1 # 219	5	JUL 1 2 2012	07/12/12
	m, NC 27713			e. Phone Number	
				DURHAM BOE	
2. Report Year 3. Po	riod Start Date (mm/d	IC/VVI	l. Period End Da mm/ed/yy)	5. Tressurer Pull	Name
2012	07/05/12		07/12/12	Lavonda K	Pence Daniels
6. Type of Committee (C	heck One)	9. Type	of Report 6	heck only one type of report	from one category)
Candidate Campaign	Party	Municipal		State/County	Referendum
PAC	Referendum		rganizational	Organizational	Organizational
Independent Expenditure Legal Expense Fund	Joint Fundraiser	П	hirty-five day	Quarterly	Pre-referendum
<del></del>	pplicable, check one)	□ Pı	re-primary	☐ First	☐ Final
"Booster Fund"	A STATE OF THE PARTY OF THE PAR	1 =	re-election	Second	Supplemental Final
Building Fund		🔲 P1	re-runoff	Third	Annual
_		s	emi-annual	Fourth	Special Special
			Mid Year	Semi-annual	
Other:			Year End	Mid Year	10. Special Report Name
		Fi	nal	Year End	
8. Number of Fundraise	rs this Report		pecial	Final	
				Special	
	Charles and the Control of the Contr				
1 . Account Information				ceount Information	
11. Account Information a. Financial Institution Full No			The same of the sa	ceount information ncial Institution Full Name	Wills Farges
a. Financial Institution Full Na			a, Fina	ncial Institution Full Name	Well's Farges
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a. Financial Institution Fall Na b. Purpose	e. Account Code		s. Fina	ncial Institution Full Name	c. Aceount Code
a. Financial Institution Fall Na b. Purpose	e. Account Code  d. Period Begin Balance		s. Fina	ncial Institution Full Name	c. Account Code  2 d. Period Begin Balance
b. Purpose  Checking  CERTIFICATION  I certify that the Committee the NC General Statutes a	e. Account Code  d. Period Begin Balance  compliant that no funds are compliant that no funds are compliant.	iance with	b. Pur	Savings  visions of Article 22A, 22B or other non-disclosed funds	c. Account Code  2 d. Period Begin Balance
b. Purpose  Checking  CERTIFICATION  I certify that the Committe the NC General Statutes a is complete, true and corre	e. Account Code  d. Period Begin Balance  s  ee or Fund is in compliand that no funds are coect and that I have been Simone Smoke	iance with	all applicable pro with prohibited of	ncial Institution Full Name  Dose  Savings  evisions of Article 22A, 22B or other non-disclosed funds of Elections	c. Account Code  2 d. Period Begin Balance  \$ 0 , & 22D-22M of Chapter 163 of
b. Purpose  Checking  CERTIFICATION  I certify that the Committe the NC General Statutes a is complete. true and correct the NC General Statutes are incomplete.	e. Account Code  d. Period Begin Balance  s  ee or Fund is in compliand that no funds are coect and that I have been simple on the Name of Signer	iance with	all applicable pro with prohibited of	Savings  visions of Article 22A, 22B or other non-disclosed funds	c. Account Code  2 d. Period Begin Balance  \$ 0 , & 22D-22M of Chapter 163 of
b. Purpose  Checking  CERTIFICATION  I certify that the Committe the NC General Statutes a is complete, true and corre	e. Account Code  d. Period Begin Balance  s  ee or Fund is in compliand that no funds are coect and that I have been simple on the Name of Signer	iance with ommingled on trained by	all applicable pro with prohibited of	ncial Institution Full Name  Dose  Savings  evisions of Article 22A, 22B or other non-disclosed funds of Elections	c. Account Code  2 d. Period Begin Balance  \$ 0 , & 22D-22M of Chapter 163 of I further certify that this report  07/12/12_ Date  Delivery Method
b. Purpose  Checking  CERTIFICATION  I certify that the Committe the NC General Statutes a is complete, true and corre  Kelly Pri  FOR OFFICE USE ONLY	e. Account Code  d. Period Begin Balance  s  ee or Fund is in compliand that no funds are coect and that I have been simone Smoke interest Name of Signer	iance with ommingled on trained by	all applicable production with prohibited by the No State Bo	ncial Institution Full Name  Dose  Savings  evisions of Article 22A, 22B or other non-disclosed funds of Elections	c. Account Code  2 d. Period Begin Balance  \$ 0 , & 22D-22M of Chapter 163 of I further certify that this report  07/12/12_ Date  Delivery Method  Normal Mail Registered Mail
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b. Purpose  Checking  Checking  Certification  I certify that the Committe the NC General Statutes a is complete, true and correspond to the NC General Statutes and correspond to the NC General Stat	e. Account Code  d. Period Begin Balance  s  ee or Fund is in compliand that no funds are coect and that I have been simone Smoke interest Name of Signer	iance with ommingled in trained by	all applicable prolements with prohibited of the No State Book Signature amployee:	ncial Institution Full Name  Dose  Savings  evisions of Article 22A, 22B or other non-disclosed funds of Elections	c. Account Code  2 d. Period Begin Balance  \$ 0 , & 22D-22M of Chapter 163 of I further certify that this report  07/12/12  Date  Delivery Method  Normal Mail Registered Mail Hand Delivered Electronically Filed
b. Purpose  Checking  Chec	e. Account Code  d. Period Begin Balance  s  o  ee or Fund is in compliant that no funds are coect and that I have been simple need Name of Signer  7/ 12/12	iance with principled in trained by E	all applicable prolying the NC State Bo Signature imployee:  Imployee: Implo	ovisions of Article 22A, 22B or other non-disclosed funds of Appointed Treasurer	c. Account Code  2 d. Period Begin Balance  \$ 0 , & 22D-22M of Chapter 163 of I further certify that this report  07/12/12  Date  Delivery Method  Normal Mail Registered Mail Hand Delivered Electronically Filed Signer has not received

Amenament

**Disclosure Report Cover** 

## **Detailed Summary**

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

Use this form to summarize all disclosure reporting forms and to total monetary information.							
1. Committee Full Name (and Fund (applicable) 2. Ty	ne of Report	natarra justor izasir izas	O Number				
The Committee to exect Kelly Smoke	Organiz	ational					
Start of Election Cycle: January 1, 2	012	Total this Reporting Period	Total this Election Cycle				
4) Cash on Hand at Start		S O	\$ O				
		<u> </u>					
5) Aggregated Contributions from Individuals	(CRO-1205)	S	\$				
6) Contributions from Individuals	(CRO-1210)	\$ 205.00	\$ 205.00				
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)	<u> </u>	\$				
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$				
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d a	ind He)	\$ 205.00	\$ 205.00				
13) Disbursements							
		l					
13a) Operating Expenditures	(CRO-1310)	s 5.00	\$ 5.00				
<ul><li>13a) Operating Expenditures</li><li>13b) Contributions to Candidates/Political Committees</li></ul>	(CRO-1310) (CRO-1310)	\$ 5.00 \$	\$ 5.00				
, , , , , , , , , , , , , , , , , , , ,	,		J. 5. 5.				
13b) Contributions to Candidates/Political Committees	(CRO-1310)	S	\$				
<ul><li>13b) Contributions to Candidates/Political Committees</li><li>13c) Coordinated Party Expenditures</li></ul>	(CRO-1310) (CRO-1310)	\$ \$	\$				
<ul> <li>13b) Contributions to Candidates/Political Committees</li> <li>13c) Coordinated Party Expenditures</li> <li>14) Aggregated Non-Media Expenditures</li> </ul>	(CRO-1310) (CRO-1310) (CRO-1315)	\$ \$ \$	\$ \$ \$				
<ul> <li>13b) Contributions to Candidates/Political Committees</li> <li>13c) Coordinated Party Expenditures</li> <li>14) Aggregated Non-Media Expenditures</li> <li>15) Loan Repayments</li> </ul>	(CRO-1310) (CRO-1310) (CRO-1315) (CRO-1420)	\$ \$ \$	\$ \$ \$				
<ul> <li>13b) Contributions to Candidates/Political Committees</li> <li>13c) Coordinated Party Expenditures</li> <li>14) Aggregated Non-Media Expenditures</li> <li>15) Loan Repayments</li> <li>16) Refunds/Reimbursements From the Committee</li> </ul>	(CRO-1310) (CRO-1310) (CRO-1315) (CRO-1420) (CRO-1320) (CRO-1510)	\$ \$ \$ \$ \$ \$	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$				
<ul> <li>13b) Contributions to Candidates/Political Committees</li> <li>13c) Coordinated Party Expenditures</li> <li>14) Aggregated Non-Media Expenditures</li> <li>15) Loan Repayments</li> <li>16) Refunds/Reimbursements From the Committee</li> <li>17) In-Kind Contributions</li> </ul>	(CRO-1310) (CRO-1315) (CRO-1420) (CRO-1320) (CRO-1510)	\$ \$ \$ \$ \$ \$ \$ \$	\$ \$ \$ \$ \$				
<ul> <li>13b) Contributions to Candidates/Political Committees</li> <li>13c) Coordinated Party Expenditures</li> <li>14) Aggregated Non-Media Expenditures</li> <li>15) Loan Repayments</li> <li>16) Refunds/Reimbursements From the Committee</li> <li>17) In-Kind Contributions</li> <li>18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 12c)</li> </ul>	(CRO-1310) (CRO-1315) (CRO-1420) (CRO-1320) (CRO-1510)	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$				
<ul> <li>13b) Contributions to Candidates/Political Committees</li> <li>13c) Coordinated Party Expenditures</li> <li>14) Aggregated Non-Media Expenditures</li> <li>15) Loan Repayments</li> <li>16) Refunds/Reimbursements From the Committee</li> <li>17) In-Kind Contributions</li> <li>18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 at 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract lines)</li> </ul>	(CRO-1310) (CRO-1315) (CRO-1420) (CRO-1320) (CRO-1510)	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$				
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28) Contributions to be Refunded

(CRO-1215)

Amendment

No

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	27.40.00	vidual contributions o	Commence of the Commence of th	or contributions unde	r \$50 if form CRO	2. <b>ID</b> Num	
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3. Conti	ואנט או / <u>או</u> Ibutor Informatio	mittee to Elect	· Kel	// <i>MoCk</i> Add Rem			
	ne, Mailing Address &	3772 Market Market 1977 - 1		b. Job Title/Profession		d. Comment	
	city, state, & zip)			Specially Sale	. D. a		filing fee &
	Kelly Simone		_	c. Employer's Name/Spe	cific Field		ied acets
5842 Fayetterille Rd # 215			Publicis Tou	nchpoint	e. Election Sum to Date		
Durham, NC 27713			Solutions		\$ 205.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Kind Description	j. Date (mm/dd/yy	<u> </u> yy)	k. Amount
		check	fil	ling for	07/05/	2012	\$ 5.00
	1	transfer		pen Checking	07/11/20		s 100
	2	transfer		nen savings	07/11/20	_	\$ 100
3. Contr	ibutor Informatic			Add 11 E Ren	**************************************		
	ne, Mailing Address & city, state, & zip)	& Phone		b. Job Title/Profession		d. Comment	5
(III)CIUUC	city, state, or zip)						
				c. Employer's Name/Spo	cific Field		
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3. Contra a. Full Nan (include	ibutor Informatione, Mailing Address & city, state, & zip)	& Phone  h. Form of Payment		b. Job Title/Profession  c. Employer's Name/Spa	ove	d. Comment  e. Election S  \$	k. Amount  S  S  S  S  S  S  S  S  S  S  S  S  S

Amendment

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)  2.10 Number							
The Committe & Elect Kelly Smoke							
3. Type of Disb				110 toms for each i	ne of Disbursem		
Operating E				ates/Political Committees		rdinated Party Expenditures	
4. Payee Inform	iation		A	d	Remove		
a. Full Name, Mailing Address & Phone				Coordinated Committee No	ıme	d. Comments	
(include city, state, & zip)						paid for filing	
						-	
Kelling Styloge Snylle 5872 Fagetherille Da #215			c.	Level Registered (Specify)		fer	
5892 Fagetherite Do # 255			Federal County:			B) 4 6 . D 4	
Durham County BOE				State <u></u>	Municipality:	e. Election Sum to Date	
	ison country	NUC				\$ 5.00	
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
					<u> </u>	prut far	
	check	0		01/05/2012	\$ 5.00	filing fee	
					\$	<del></del>	
			2.5				
4. Payee Inforn			7.4		Remove		
	ng Address & Phone		b.	Coordinated Committee N	ame	d. Comments	
(include city, state,	& zip)						
			_	Level Registered (Specify)			
				Federal Federal	County:		
			╎┌	State	Municipality:	e. Election Sum to Date	
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	ing Address & Phone	20. 10. 10. 10. 10. 10. 10. 10. 10. 10. 1	W-10/10	. Coordinated Committee N	VEN. 10.79	d. Comments	
(include city, state,	· ·				-		
<u>, , , , , , , , , , , , , , , , , , , </u>		_					
		c. Level Registered (Specify)					
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I. Account Code	g. For in Ort ayment	257 45 9000 5000		i. Date (min/ud/yyyy)	J. Alloudi	R. Required Remarks	
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5. Total only th	The state of the s		1 1 5 5			\$ 5.00	
_	· ·		-	if Operating Expenses) if Contrib to Candidates/Political Comm)		\$	
				Commo to Canataates Politic Coordinated Party Expenditi	•	5.00	
	es (List detailed ex		_				
A* - Media	B* - Printing	C* - Fund	lra	ising	D - To Anothe	er Candidate	
E - Salaries	F* - Equipment					Public Office Expenses	
I - Postage O* - Other	J - Penalties	K* - Offic	e E	Expenses	Q* - Donatio	n to Legal Expense Fund	
and the second s	a Antallal arababas	مَن لَمْ مُنْ الْمُعَالِّدُ مُنْ الْمُعَالِّدُ الْمُعَالِّدُ الْمُعَالِّدُ الْمُعَالِّدُ الْمُعَالِّ	أغثاه	nrke neld (kg) salalis a	HTB 13 4 - 4 7 T 3 2 FA	要自己在後衛衛衛門 (400 Trans) (200 July 1963 4 4 5 4 4 1 4 5 1 1 1 1 1 1 1 1 1 1 1 1	

**Disbursements**