Disclosure 1	Report Cover
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L O	iena	mei	Ì
		Yes	

X	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 Infor	mation						
a. Full Name	III K (108			1		·	c. ID Number
	Illiams Campaign Committe	e					C III I I I I I I I I I I I I I I I I I
b. Mailing Address (inc	lude City, State and Zip Code)				_		d. Date Filed
404 Sparella Street Durham, North Car	olina, 27703						1/27/2012
,	, -						e. Phone Number
							919-596-2682
2. Report Year	3. Period Start Date (mm/d	ld/yy)	4. Period En (mm/dd/yy)	d Da	te	5. Treasurer Full	<u> </u>
2011	10/25/2011		12/31/	2011		Sylvester William	S
6. Type of Commit	tee (Check One)	9. Typ	e of Report	(c	heck on	ly one type of report	from one category)
Candidate Camp	aign Party	Munici			State/C	ounty	Referendum
☐ PAC	Referendum	🗅	Organizational		Ü	Organizational	Organizational
Independent Expenditure	Joint Fundraiser		Thirty-five day		(Quarterly	Pre-referendum
Legal Expense F	und						
7. Type of Fund	(if applicable, check one)		Pre-primary			First	Final
"Booster Fund"			Pre-election			Second	Supplemental Final
Building Fund			Pre-runoff			Third	Annual Annual
			Semi-annual			Fourth	Special
<u></u>		밁	Mid Year			Semi-annual	40.6
Other:			Year End			Mid Year	10. Special Report Name
O Manhau at Tanad			Final		⊠[Year End	
8. Number of Fund	raisers this Report	╽┖┈┚	Special		=	Final	
			<u> </u>			Special	
11. Account Inform			1	4		information	
a. Financial Institution			2	. Fina	_	itution Full Name	
First Citizens Bank b. Purpose	c. Account Code			. Parp	RE	CEIVED	c. Account Code
checking acc	c. Account Code				nose .	+	e. Account Code
checking dec	1		_	}		1 2 7 REC'D	
	d. Period Begin Balance	<u> </u>		11,	DURH	AM COUNTY	d. Period Begin Balance
	\$ 396.16				BOAR	OF ELECTIONS	\$
CERTIFICATION							
I certify that the Cor	nmittee or Fund is in compli	ance wi	th all applicabl	e pro	visions (of Article 22A, 22B,	& 22D-22M of Chapter 163 of
							I further certify that this report
is complete, true and	f correct and that I have been	trained	by the NC Sta	te Bo	ard of E	Elections.	
-			-	-			1/27/2012
TOP OFFICE VICE	Printed Name of Signer		Sign	ature o	of Appoint	ted Treasurer	Date
FOR OFFICE USE O					- 0		Delivery Method
Date Received:	127/2012		Employee:		$\overline{\mathcal{W}}_{\mathbf{A}}$	\rightarrow	Normal Mail
Date Postmarke	d:		Employee:				Registered Mail Hand Delivered
Date Scanned:	·		Employee:				Electronically Filed Signer has not received
Date Data Enter	red:		Employee:				mandatory training
Please Note: Th			nmittee inform				ess, treasurer, assistant treasurer,
	You must amend the State			ľ			ee changes.
	m man winding till Deschi		~~p=+++++++++++++++++++++++++++++++++++		~ . ~ ~	-, w many willillill	www.imwu.

Amendment

Yes

No

X

Detailed Summary
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 Re	eport		3. ID Nu	mber
Pastor Sylvester Williams Campaign Committee	Year End	•		<u>-</u>	
Start of Election Cycle: January 1,	_		Total this		Total this
4) Cash on Hand at Start		\$	Reporting Period 396.16	\$	Election Cycle 0
5) Aggregated Contributions from Individuals	(CRO-	1205) \$	150	\$	320
6) Contributions from Individuals	(CRO-1	1210) \$	60	\$	60
7) Contributions from Political Party Committees	(CRO-	1220) \$		\$	
8) Contributions from Other Political Committees	(CRO-)	1230) \$		\$	_
9) Loan Proceeds	(CRO-1	1410) \$	2765.33	\$	8128.88
10) Refunds/Reimbursements To the Committee	(CRO-1	1240) \$		\$	
11) Other Receipt Sources					
11a) Interest on Bank Accounts	(CRO-)	1250) \$		\$	
11b) Contributions from Not-for-Profit Organizat	ions <i>(CRO-1</i>	1250) \$		\$	
11c) Outside Sources of Income	(CRO-1	1250) \$		\$	
11d) Legal Expense Fund – Other Sources	(CRO-1	1270) \$		\$	
11 e) Exempt Purchase Price Sales	(CRO-1	1265) \$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 1	lc, Ild and Ile)	\$	2975.33	\$	8508.88
13) Disbursements					
13a) Operating Expenditures	(CRO-1	1310) \$	3209.16	\$	8346.35
13b) Contributions to Candidates/Political Commi				\$	
13c) Coordinated Party Expenditures	RECE	WEE)	\$	
14) Aggregated Non-Media Expenditures	(CRO-1	1315) \$	1	\$	
15) Loan Repayments	, C-10-1	14207 S	1	\$	
16) Refunds/Reimbursements From the Committee	DURHAML BOARD OF B	GOUN	ITY I	\$	
17) In-Kind Contributions	BOARD OF E	1510) \$	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	\$	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14,	15, 16 and 17)	\$	3209.16	\$	8346.35
19) Cash on Hand at End (Add lines 4 and 12 together, then su	btract line [8)	\$	162.33	\$	162.33
				Algerick Configuration Algerick Configuration	(2) 表現在一個主義的 (2) 10 (2) (2) (2) (2) (2) (2) (2) (2) (2) (2)
20) Non-Monetary Gifts Given to Other Committees	(CRO-1	1330) \$			
21) Outstanding Loans (incl. ones from other campaig	ns) (CRO-1	1430) \$			
22) Debts and Obligations owed By the Committee	(CRO-1	1610) \$			
23) Debts and Obligations owed To the Committee	(CRO-1	1620) \$			
24) Account Transfers Within the Committee	(CRO-1	1720) \$			
25) Administrative Support	(CRO-1	1710) \$		\$	
26) Forgiven Loans	(CRO-1	1440) \$		\$	
27) 48-Hour Notice Reports Sum	CRO-2	200) \$		\$	
28) Contributions to be Refunded	CRO-1.	215) \$		\$	

Aggregated Contributions from Individuals

Page

<u>1</u> of <u>1</u>

Amendment

☐ Yes
☐

7

No

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

1.	Come	nittee Full Na	me (and Fun	d if applicable)			:	2. ID	Number
F	astor S	Sylvester Willia	ams Campaigr	1 Committee					
3.	Conti	ributor I nfor n	nation				:		 -
a.	Amend		b. Account Code	c. Form of Payment		d. In-Kind Description	e. Date (mm/dd/yyy)	y)	f. Amount
<u> </u>]	Add Remove	1jm	check			11/1/20		\$ 50
		Add	1pd	check			11/1/20	11	\$ 50
누	<u> </u>	Remove Add		<u>-</u>					
Ĺ	<u> </u>	Remove	lmb	check			11/1/20	11	\$ 50
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누	<u>-</u>	Add		-					
늗	<u></u>	Remove	1						\$
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누	-	Remove	-						\$
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<u> </u>	<u></u>	Add Remove	<u> </u>						\$
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十	1	Add				DURHAM CO	 ΥΤΝψ		
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F]]	Add							\$
F	1	Remove Add							
Ē	<u></u>	Remove							\$
4	. Tota	l only this I	Page					\$	150
5.	. Tota	l of ALL C	RO-1205 P	ages				\$	
(This line must be on line 5 of Detailed Summary Page CRO-1100)							l L	*	

Disbursements

Pg <u>1</u>

of <u>1</u>

 \boxtimes

Amendment
Yes

No

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

	ull Name (and Fund					2. ID Number
Pastor Sylvester	Williams Campaigr	Committee				
3. Type of Disbu	irsement <i>(Plea</i>	se use separate C	RO-1310 form	is for each ty	pe of Disbursem	ent.)
Operating E	xpenses	Contributions to Can	didates/Political	Committees	Coo	ordinated Party Expenditures
4. Payee Inform	ation		Add		Remove	·
a. Full Name, Mailir	ng Address & Phone		b. Coordinated	Committee Na	me	d. Comments
(include city, state,	& zip)		-			Printed
						rinted
Vistaprint						
Vistaprint.com	Λ		c. Level Regist	ered (Specify)		
95 Hay de	n Mu		Federal		County:	
866-893-6743	0	-2 (State		Municipality:	e. Election Sum to Date
Lexy	n Ave , MA C	2421				\$ \$739.66
				(13)		- `
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm	/dd/yyyy)	j. Amount	k. Required Remarks
c (Ani)	CANDIT CHAO	B	10/23	1 es	\$ 295.83	
<u> </u>			1	-	_	
					\$	
4. Payee Inform	ation		Add		Remove	
a. Full Name, Maili	ng Address & Phone		b. Coordinate	Committee Na	me	d. Comments
(include city, state,	& zip)					
<i>-</i>	λ L					
SIGN.	Depot		c. Level Regist	ered (Specify)		
1813 F	colonal		Federal		County:	
ous 'éaus	nDo . Flon d	4 32×07	State	\boxtimes	Municipality:	e. Election Sum to Date
407-8	colonial nDo, Flor d 94-0090					\$ 4,135
					T	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mn	/dd/yyyy)	j. Amount	k. Required Remarks
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0 0 110.5	GOEDII CAM	1,	170	, - 4 .	r	
					\$	
4. Payee Inform	ation		Add		Remove	
a. Full Name, Maili	ng Address & Phone		b. Coordinate	l Committee Na	ше	d. Comments
(include city, state.	& zip)				_	
DV Con	1.00					
I IN CALDY		120	c. Level Regist	ered (Specify)		
4ro <i>U</i>	helln Road	# 540	Federal		County:	
MYG. R	and Cla	23136	State		Municipality:	e. Election Sum to Date
1 7 WUMM D	7 TUCH + 19.	20107				\$ 731
303~ 3	phics hull fload each fla. 34-2184 g. Form of Payment	h Dumos Cad-	1.5.	43.87		1 / 1
	.	_	i. Date (mu	*	j. Amount	k. Required Remarks
B/842011	CAMDIT COMU)	B	11/3/2	ЮH	\$ 731	
_ ' <i>'</i>						
					\$	
5. Total only the	is Page				=	\$
6. Total of ALL	CRO-1310 Pages					!
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(This line goes in	line 13b of Detailed Sun	nmary Page CRO-110	0 if Contrib to C	ndidale s T ditic	L	
	line 13c of Detailed Sun					
<u> </u>	es (List detailed ex			-	7 RECU	
A* - Media	B* - Printing	C* - Fund		DURHAN	/ COINAWP	er Candidate Public Office Expenses
E - Salaries I - Postage	F* - Equipment J - Penalties		cal Party	BOARD OF	FELFOURNS, L	rublic Office Expenses n to Legal Expense Fund
O* - Other	• · · · · · · · · · · · · · · · · · · ·	R -Ome	re myhenaea		V - EVIDAGO	in to waker wakerings a sing
	e detailed explanat	ion in required re	emarks field (k)		· !

Disbursements	ts	en	m	se	r	u	b	is	D
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Pg 2 of 2 Amendment Yes

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

1. Committee F	<u>uli Name (and Fun</u>					2. ID Number
PASTON	Stluester	W. Iliams	Campa.	en Comi	ni Hee	
3. Type of Disb	ursement (Plea	ise use separate C	RO-1310 for	ns for each t	vpe of Disbursem	ent.)
Operating E		Contributions to Car				ordinated Party Expenditures
4. Payee Inform	nation		Add		Remove	
	ng Address & Phone			d Committee N		d. Comments
(include city, state,	•		50 507 414			d. comments
Vado	One Carn moore sh N.C. 3-848-97		c. Level Regist	anad (Specific)		
	A	A no A	C. Level Regist	1	C	
8001	CEGN) WOOLD	1Cou o	Federal	 	County:	
	1. 1.	27613	State	<u>[X</u>	Municipality:	e. Election Sum to Date
l lawi	shilling					\$ 603.50
414	7-848-97	36			·	* 603.30
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mu	/dd/yyyy)	j. Amount	k. Required Remarks
		Λ		,	\$ 603.50	
Non10_	CAUDIT CAND	H	11/4	12011	3 6 03. 3U	
					•	
					\$	
4. Payee Inform	ation		Add	П	Remove	1
	ng Address & Phone		b. Coordinate	Committee N	ime	d. Comments
(include city, state,	· ·			-		
Therete city, state,	<u>«. др)</u>	_	-			
			c. Level Regist	anad (Spanify)		
				ereu (Specify)	Countri	
			Federal		County:	
			State		Municipality:	e. Election Sum to Date
						\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mn	/dd/vvvv)	j. Amount	k. Required Remarks
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					\$	
					\$	
4. Payee Inform			Add		Domesta	
-					Remove	
•	ng Address & Phone		o. Coordinate	Committee Na	ime	d. Comments
(include city, state,	& zip)		_			
	DEOF		c. Level Regist	ered (Specify)	· · · · · · · · · · · · · · · · · · ·	
	I UECFI	VED	Federal		County:	
			State		Municipality:	e. Election Sum to Date
	JAN 2 7 F	SEC.U				Ť.
						\$
f. Account Code	g. FURBIAMesC	Dh. Ruspost Code	i. Date (mn	/dd/yyyy)	j. Amount	k. Required Remarks
	BOARD OF ELE	CTIONS				-
			'		\$	
					\$	
5 Total only thi	is Dage	<u> </u>			J	\$ 603.50
5. Total only thi	CRO-1310 Pages					s 603.50 s 3209.16
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_	line 13a of Detailed Sun				ert Commi	\$ 3209.16
_	line 13b of Detailed Sun		_			
	line 13c of Detailed Sum			-urty Expenditu	resj	<u>; </u>
	es (List detailed ex					
A* - Media	B* - Printing	C* - Fund			D - To Anothe	
E - Salaries	F* - Equipment		•			Public Office Expenses
I - Postage O* - Other	J - Penalties	K* - Offic	ce Expenses		Q* - Donatio	a to Legal Expense Fund
	e detailed explanati	ion in required re	emarks field	k)		1

A loan proceeds statement must accompany each loan the	1		al		
1. Committee Full Name (and Fund if applicable)	at to nom an	marrida		D Nun	aber
PASTON Sylveste Williams CA	m 16. (1	r Com	1		
3. Lender Information	Add				Remove
a. Full Name, Mailing Address & Phone	b. Job Title	Profession	 	_	d. Comments
(include city, state, & zip)		1.		,	
Silvesty Williams Lou Sparella St Du-ham, Nuc. 2713			Analysa	<u> </u>	e. Start Date (mm/dd/yyyy)
you sparent y	c. Employer	's Name/Sp	ecific Field		11/1/2011
Du-ham, NCC. 200 13					f. End Date (mm/dd/yyyy)
g. Rate b. Security Pledged i	. Account Code	e i.	Form of Paymen	t	k. Amount
Mas lass	worn		KEDIT C		s 2765.33
l. Full Name of Lending Institution				m. Lo	n Number
		•			
4. Endorsers/Makers (The people who guarantee the				1	i
a. Full Name, Mailing Address & Phone	b. Job Tit	le/Profession) n	c. Em	ployer's Name/Specific Field
(include city, state, & zip)	_				
	d. Percent	tage		c. Ame	ount
			0.4		
			%	\$	
a. Full Name, Mailing Address & Phone	b. Job Tit	le/Profession) ii	c. Em	Moyer's Name/Specific Field
(include city, state, & zip)					
	d. Percent	hana	_	c. Ame	numé
	u. rerect	rang c		C. Ann	74.11
			%	\$	
a. Full Name, Mailing Address & Phone	b. Job Tit	le/Professio		c. Em	oloyer's Name/Specific Field
(include city, state, & zip)				•	
RECEIVE	_				
"ECEIVED	1 2 3 3	h			
JAN 2 7 1	d. Percent	age		e. Ame	punt
RECD			%	\$	
A. Full Name, Mailing Address & STORING OF ELECTIONS A. Full Name, Mailing Address & STORING OF ELECTIONS	h Joh Tie	le/Professio	NA .	e Emr	ployer's Name/Specific Field
(include city, state, & zip)	5.000	TO A TO A COUNTY			20,010.1.1.1.1.0.0
	- <u></u> -				
	d. Percent	age		e. Amo	DUNT
			%	\$	
5. Total of ALL CRO-1410 Pages					12/(22
(This line must be on line 9 of Detailed Summary Page CRO-1190)	1			\$	2765.83

of Amendment

Loan Proceeds

Loan Proceeds Statement

The individual making a loan to the committee must provide the following information. Failure to provide all of the information requested could be a violation of campaign reporting disclosure laws

reporting disclosure laws.	
Name of committee to receive loan:	Passon Sylveste Williams Campaign Committee
Person lending money to committee (Lender):	PASTON Sylvestr Williams
Date of loan to committee:	"/i/zori
Name of lending institution and account number (source):	t Personal loan
Amount of loan:	27 65.33
Names of all parties responsible for payment of loan (guarantor):	largen Scherk Will an
Period of loan:	140
Rate of interest of loan:	4.5%
Security pledged for loan:	casiffron finds Raised
Whend has	acknowledge that all of the

I, While (Person lending money to committee)

acknowledge that all of the

Information 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

Signature of Treasurer of Committee

This form must be submitted with the disclosure report for which the loan is initially disclosed.

JAN 2 7 RECTO

DURHAM COUNTY
BOARD OF ELECTIONS

CRO-6100

Loan Proceeds Statement

July 2007