

IN-PERSON

Amendment  
☒ Yes ☒ No

## 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.

OCT 28 2013

<b>1. Committee Information</b>			
<b>a. Full Name</b>		<b>c. ID Number</b>	
WILLIAM V. BELL CAMPAIGN COMMITTEE		DURHAM BOE	
<b>b. Mailing Address (include City, State and Zip Code)</b>		<b>d. Date Filed</b>	
1003 HUNTSMAN DR DURHAM, NC 27713-2384		10/28/2013	
		<b>e. Phone Number</b>	
		(919) 546-4333	
<b>2. Report Year</b>	<b>3. Period Start Date (mm/dd/yy)</b>	<b>4. Period End Date (mm/dd/yy)</b>	<b>5. Treasurer Full Name</b>
2013	09/24/2013	10/21/2013	JAMES WELCH
<b>6. Type of Committee (Check One)</b>		<b>9. Type of Report (check only one type of report from one category)</b>	
<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		<b>Municipal</b> <b>State/County</b> <b>Referendum</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Organizational <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Quarterly <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Pre-primary <input type="checkbox"/> First <input type="checkbox"/> Final <input checked="" type="checkbox"/> Pre-election <input type="checkbox"/> Second <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Third <input type="checkbox"/> Annual <input type="checkbox"/> Semi-annual <input type="checkbox"/> Fourth <input type="checkbox"/> Special <input type="checkbox"/> Mid Year <input type="checkbox"/> Semi-annual <input type="checkbox"/> Year End <input type="checkbox"/> Mid Year <input type="checkbox"/> Final <input type="checkbox"/> Year End <input type="checkbox"/> Special <input type="checkbox"/> Final <input type="checkbox"/> <input type="checkbox"/> Special	
<b>7. Type of Fund (if applicable, check one)</b>		<b>10. Special Report Name</b>	
<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:			
<b>8. Number of Fundraisers this Report</b>			
1			
<b>3. Account Information</b>		<b>3. Account Information</b>	
<b>a. Financial Institution Full Name</b>		<b>a. Financial Institution Full Name</b>	
MECHANICS & FARMERS			
<b>b. Purpose</b>	<b>c. Account Code</b>	<b>b. Purpose</b>	<b>c. Account Code</b>
CAMPAIGN EXPENSES	1		
	<b>d. Period Begin Balance</b>		<b>d. Period Begin Balance</b>
	\$		\$
<b>CERTIFICATION</b>			
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			
<u>James A. Welch</u> Printed Name of Signer		<u>James A. Welch</u> Signature of Appointed Treasurer	
		10/28/2013 Date	
<b>FOR OFFICE USE ONLY</b>			
Date Received:	<u>10-28-13</u>	Employee:	<u>Rpage</u>
Date Postmarked:	_____	Employee:	_____
Date Scanned:	_____	Employee:	_____
Date Data Entered:	_____	Employee:	_____
		<b>Delivery Method</b> <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training	
<b>Please Note:</b> 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

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. Type of Report</b>		<b>3. ID Number</b>	
WILLIAM V. BELL CAMPAIGN COMMITTEE		2013 Pre-Election			
<b>Start of Election Cycle: January 1, 2013</b>			<b>Total this Reporting Period</b>		<b>Total this Election Cycle</b>
<b>4) Cash on Hand at Start</b>			\$ 5,608.61		\$ 4,572.01
<b>RECEIPTS</b>					
<b>5) Aggregated Contributions from Individuals</b>		<i>(CRO-1205)</i>		\$ 435.00 \$ 435.00	
<b>6) Contributions from Individuals</b>		<i>(CRO-1210)</i>		\$ 8,950.00 \$ 10,050.00	
<b>7) Contributions from Political Party Committees</b>		<i>(CRO-1220)</i>		\$ 0.00 \$ 0.00	
<b>8) Contributions from Other Political Committees</b>		<i>(CRO-1230)</i>		\$ 0.00 \$ 600.00	
<b>9) Loan Proceeds</b>		<i>(CRO-1410)</i>		\$ 0.00 \$ 0.00	
<b>10) Refunds/Reimbursements to the Committee</b>		<i>(CRO-1240)</i>		\$ 0.00 \$ 0.00	
<b>11) Other Receipt Sources</b>					
<b>11a) Interest on Bank Accounts</b>		<i>(CRO-1250)</i>		\$ 0.00 \$ 0.00	
<b>11b) Contributions from Not-For-Profit Organizations</b>		<i>(CRO-1250)</i>		\$ 0.00 \$ 0.00	
<b>11c) Outside Sources of Income</b>		<i>(CRO-1250)</i>		\$ 0.00 \$ 0.00	
<b>11d) Legal Expense Fund - Other Sources</b>		<i>(CRO-1270)</i>		\$ 0.00 \$ 0.00	
<b>11e) Exempt Purchase Price Sales</b>		<i>(CRO-1265)</i>		\$ 0.00 \$ 0.00	
<b>12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)</b>			\$ 9,385.00		\$ 11,085.00
<b>EXPENDITURES</b>					
<b>13) Disbursements</b>					
<b>13a) Operating Expenditures</b>		<i>(CRO-1310)</i>		\$ 196.00 \$ 1,861.06	
<b>13b) Contributions to Candidates/Political Committees</b>		<i>(CRO-1310)</i>		\$ 0.00 \$ 100.00	
<b>13c) Coordinated Party Expenditures</b>		<i>(CRO-1310)</i>		\$ 0.00 \$ 0.00	
<b>14) Aggregated Non-Media Expenditures</b>		<i>(CRO-1315)</i>		\$ 0.00 \$ 0.00	
<b>15) Loan Repayments</b>		<i>(CRO-1420)</i>		\$ 0.00 \$ 0.00	
<b>16) Refunds/Reimbursements from the Committee</b>		<i>(CRO-1320)</i>		\$ 0.00 \$ 0.00	
<b>17) In-Kind Contributions</b>		<i>(CRO-1510)</i>		\$ 0.00 \$ 0.00	
<b>18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)</b>			\$ 196.00		\$ 1,961.06
<b>19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)</b>			\$ 14,797.61		\$ 13,695.95
<b>ADDITIONAL INFORMATION</b>					
<b>20) Non-Monetary Gifts Given to Other Committees</b>		<i>(CRO-1330)</i>		\$ 0.00	
<b>21) Outstanding Loans (incl. ones from other campaigns)</b>		<i>(CRO-1430)</i>		\$ 0.00	
<b>22) Debts and Obligations owed by the Committee</b>		<i>(CRO-1610)</i>		\$ 0.00	
<b>23) Debts and Obligations owed to the Committee</b>		<i>(CRO-1620)</i>		\$ 0.00	
<b>24) Account Transfers Within the Committee</b>		<i>(CRO-1720)</i>		\$ 0.00	
<b>25) Administrative Support</b>		<i>(CRO-1710)</i>		\$ 0.00 \$ 0.00	
<b>26) Forgiven Loans</b>		<i>(CRO-1440)</i>		\$ 0.00 \$ 0.00	
<b>27) 48-Hour Notice Reports Sum</b>		<i>(CRO-2220)</i>		\$ 0.00 \$ 0.00	
<b>28) Contributions to be Refunded</b>		<i>(CRO-1215)</i>		\$ 0.00 \$ 0.00	

# Aggregated Contributions from Individuals

Page 1 of 1

Amendment

☒ Yes ☒ No

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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
WILLIAM V. BELL CAMPAIGN COMMITTEE						
<b>3. Contributor Information</b>						
<b>a. Amend</b>	<b>b. Account Code</b>	<b>c. Form of Payment</b>	<b>d. In-Kind Description</b>	<b>e. Date (mm/dd/yyyy)</b>	<b>f. Amount</b>	
<input type="checkbox"/> Add	1	Check		10/12/2013	\$ 25.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Check		10/12/2013	\$ 25.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Check		10/12/2013	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Check		10/12/2013	\$ 25.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Check		10/12/2013	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Check		10/12/2013	\$ 10.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Check		10/12/2013	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Check		10/11/2013	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Check		10/12/2013	\$ 25.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Check		10/11/2013	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Check		10/12/2013	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Check		10/13/2013	\$ 25.00	
<input type="checkbox"/> Remove						
<b>4. Total only this Page</b>					\$ 435.00	
<b>5. Total of ALL CRO-1205 Pages</b>					\$ 435.00	
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

CRO-1205

NC State Board of Elections

April 2007

# Contributions from Individuals

Pg 1 of 9

Amendment

☒ Yes ☐ No

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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
WILLIAM V. BELL CAMPAIGN COMMITTEE						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
SANDRA L ATKINS 3915 ETON RD DURHAM, NC 27707			HOUSEWIFE			
			<b>c. Employer's Name/Specific Field</b>			
			Private Households			
					<b>e. Election Sum to Date</b>	
					\$ 3,000.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Check		10/11/2013	\$ 1,000.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
STEPHEN W BARRINGER 3918 DOVER DR DURHAM, NC 27707			DEVELOPER			
			<b>c. Employer's Name/Specific Field</b>			
			DEALERS SUPPLY CO.			
					<b>e. Election Sum to Date</b>	
					\$ 250.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Cash		10/11/2013	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
LEWIS CHEEK 5500 OLD BRANDT TRACE GREENSBORO, NC 27455			ATTORNEY			
			<b>c. Employer's Name/Specific Field</b>			
					<b>e. Election Sum to Date</b>	
					\$ 350.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Check		10/11/2013	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 1,350.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 8,950.00	

# Contributions from Individuals

Pg 2 of 9

Amendment

☒ Yes ☐ No

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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
WILLIAM V. BELL CAMPAIGN COMMITTEE						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
CORA COLE-MCFADDEN 5613 OLD WELL STREET DURHAM, NC 27704			CITY COUNCIL PERSON			
			<b>c. Employer's Name/Specific Field</b>			
					<b>e. Election Sum to Date</b>	
					\$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Check		10/11/2013	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
MARGARET DARDESS 44 CEDAR HILLS CIRCLE CHAPEL HILL, NC 27514-1620			HEALTH CARE			
			<b>c. Employer's Name/Specific Field</b>			
			THE UNC HEALTH CARE SYSYSTEM			
					<b>e. Election Sum to Date</b>	
					\$ 250.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Check		10/11/2013	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
RUTH C DZAU 4006 DOVER RD DURHAM, NC 27707			COMMUNITY VOLUNTEER			
			<b>c. Employer's Name/Specific Field</b>			
					<b>e. Election Sum to Date</b>	
					\$ 500.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Check		10/11/2013	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 950.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 8,950.00	

# Contributions from Individuals

Pg 3 of 9 Amendment ☒ Yes ☐ No

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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
WILLIAM V. BELL CAMPAIGN COMMITTEE						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
WORTH L HILL 2426 WINBURN AVE DURHAM, NC 27704			COUNTY SHERRIF			
			<b>c. Employer's Name/Specific Field</b>			
					<b>e. Election Sum to Date</b>	
					\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Check		10/11/2013	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
JOHN THOMAS HUNT 1115 DONPHL RD. DURHAM, NC 27712			DURHAM COUNTY			
			COMMISSIONER [RETIRED]			
			<b>c. Employer's Name/Specific Field</b>			
			DURHAM COUNTY		<b>e. Election Sum to Date</b>	
					\$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Check		10/11/2013	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
ROBERT A INGRAM 3624 DOVER RD. DURHAM, NC 27707			CEO [RETIRED]			
			<b>c. Employer's Name/Specific Field</b>			
			GALAXO			
					<b>e. Election Sum to Date</b>	
					\$ 500.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Check		10/11/2013	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 700.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 8,950.00	

# Contributions from Individuals

Pg 4 of 9 Amendment ☒ Yes ☐ No

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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
WILLIAM V. BELL CAMPAIGN COMMITTEE						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
WENDY JACOBS 142 SOLTERRA WAY DURHAM, NC 27705-7314			CITY COUNSEL			
			<b>c. Employer's Name/Specific Field</b>			
			CITY OF DURHAM, NC		<b>e. Election Sum to Date</b>	
					\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Check		10/11/2013	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
BETTY P KENAN P.O. BOX 4150 CHAPEL HILL, NC 27515-4150			COMMUNITY VOLUNTEER			
			<b>c. Employer's Name/Specific Field</b>			
					<b>e. Election Sum to Date</b>	
					\$ 1,000.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Check		10/11/2013	\$ 1,000.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
DUDLEY LACY 3802 EATON RD. DURHAM, NC 27707			ARCHETECT			
			<b>c. Employer's Name/Specific Field</b>			
			O'BRIAN ATKINS		<b>e. Election Sum to Date</b>	
					\$ 500.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Check		10/11/2013	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 1,600.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 8,950.00	

# Contributions from Individuals

Pg 5 of 9 Amendment ☒ Yes ☒ No

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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
WILLIAM V. BELL CAMPAIGN COMMITTEE						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
ROLAND W LEARY 2618 INDIAN TRAIL DURHAM, NC 27705			DURHAM COUNTY SHERRIF [RETIRES]			
			<b>c. Employer's Name/Specific Field</b>			
			DURHAM COUNTY			
					<b>e. Election Sum to Date</b>	
					\$ 1,500.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Check		10/11/2013	\$ 1,000.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
RALPH MCCAUGHAN 3902 ETON RD DURHAM, NC 27707			ATTORNEY			
			<b>c. Employer's Name/Specific Field</b>			
			DUKE UNIVERSITY			
					<b>e. Election Sum to Date</b>	
					\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Check		10/11/2013	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
ANNE H MCMAHON 181 MONTROSE DR DURHAM, NC 27707			HEALTH CARE CONSULTANT [RETIRED]			
			<b>c. Employer's Name/Specific Field</b>			
			Health and Personal Care Stores			
					<b>e. Election Sum to Date</b>	
					\$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Check		10/11/2013	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 1,300.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 8,950.00	

# Contributions from Individuals

Pg 6 of 9 Amendment ☒ Yes ☐ No

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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
WILLIAM V. BELL CAMPAIGN COMMITTEE						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
KEVIN G MONTGOMERY 204 HARDWICK DR DURHAM, NC 27713			ARCHITECT			
			<b>c. Employer's Name/Specific Field</b>			
			O'BRIAN & ATKINS			
					<b>e. Election Sum to Date</b>	
					\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Check		10/11/2013	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
PIERRE OSEI-OWUSU 203 MAYMOUNT DR. DURHAM, NC 27703			TRANSPORTATION MANAGER			
			<b>c. Employer's Name/Specific Field</b>			
			CITY OF DURHAM			
					<b>e. Election Sum to Date</b>	
					\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Check		10/12/2013	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
DARRYL LAMONT ROBERTS P.O.BOX 189 FAIRBURN, GA 30213-6025			PROFESSOR			
			<b>c. Employer's Name/Specific Field</b>			
			TUSKEEGEE UNIVERSITY			
					<b>e. Election Sum to Date</b>	
					\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Check		10/12/2013	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 300.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 8,950.00	

# Contributions from Individuals

Pg 7 of 9 Amendment ☒ Yes ☒ No

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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
WILLIAM V. BELL CAMPAIGN COMMITTEE						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
ANN C SANDERS 3200 RUGBY RD DURHAM, NC 27707			COMMUNITY VOLUNTEER			
			<b>c. Employer's Name/Specific Field</b>			
			Private Households			
					<b>e. Election Sum to Date</b>	
					\$ 500.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Check		10/11/2013	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
CHARLES A SANDERS 3200 RUGBY RD DURHAM, NC 27707			MEDICAL DOCTOR			
			<b>c. Employer's Name/Specific Field</b>			
					<b>e. Election Sum to Date</b>	
					\$ 3,000.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Check		10/11/2013	\$ 1,000.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
WILLIAM A SHORE 1004 KINGSWOOD DR. CHAPEL HILL, NC 27517			HUMAN RESOURCE			
			CONSULTRANT [RETIRED]			
			<b>c. Employer's Name/Specific Field</b>			
			GALAXO		<b>e. Election Sum to Date</b>	
					\$ 500.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Check		10/11/2013	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 2,000.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 8,950.00	

# Contributions from Individuals

Pg 8 of 9 Amendment ☒ Yes ☐ No

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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
WILLIAM V. BELL CAMPAIGN COMMITTEE						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
LOWELL L SILER 16 COVINGTON LANE DURHAM, NC 27712			ATTORNEY			
			<b>c. Employer's Name/Specific Field</b>			
			DURHAM COUNTY		<b>e. Election Sum to Date</b>	
					\$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Check		10/11/2013	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
A. LEON STANBACK 4011 CROWN HILL DR. DURHAM, NC 27707-5394			DISTRICT ATTORNEY			
			<b>c. Employer's Name/Specific Field</b>			
			CITY OF DURHAM		<b>e. Election Sum to Date</b>	
					\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Check		10/12/2013	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
W STEPHENS TOLER 8709 MILL HOUSE LANE BAHAMA, NC 27503			CONSULTANT			
			<b>c. Employer's Name/Specific Field</b>			
			Administrative and Support Services		<b>e. Election Sum to Date</b>	
					\$ 250.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Check		10/11/2013	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 550.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 8,950.00	

# Contributions from Individuals

Pg 9 of 9

Amendment

☒ Yes ☒ No

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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
WILLIAM V. BELL CAMPAIGN COMMITTEE						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
WANDA WAITERS 518 PLEASANT DR. DURHAM, NC 27703-5132			CEO			
			<b>c. Employer's Name/Specific Field</b>			
			CAROLINA HEALTHCARE NETWORK			
					<b>e. Election Sum to Date</b>	
					\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Check		10/13/2013	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
SAMUAL W WARBURTON JR 3911 PLAYMOUTH RD DURHAM, NC 27707			MEDICAL DOCTOR			
			<b>c. Employer's Name/Specific Field</b>			
			RETIRED			
					<b>e. Election Sum to Date</b>	
					\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Check		10/11/2013	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 200.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 8,950.00	

CRO-1210

NC State Board of Elections

April 2007

# 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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
WILLIAM V. BELL CAMPAIGN COMMITTEE							
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms 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							
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  HAGAN FOR US SENATE, INC. P.O. BOX 29103 GREENSBORO, NC 27429				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
				<b>c. Level Registered (Specify)</b>			
				<input checked="" type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						<b>e. Election Sum to Date</b>	
						\$ 150.00	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
1	Check	D	10/20/2013	\$ 150.00			
				\$			
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  POSTMASTER RTP STSTION 65 T.W. ALEXANDER DR DURHAM, NC 27713				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
				<b>c. Level Registered (Specify)</b>			
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						<b>e. Election Sum to Date</b>	
						\$ 116.00	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
1	Check	I	10/11/2013	\$ 46.00			
				\$			
<b>5. Total only this Page</b>						\$ 196.00	
<b>6. Total of ALL CRO-1310 Pages</b>							
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>						\$ 196.00	
<b>7. Purpose Codes</b> (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)							