

Disclosure Report Cover

Amendment
 Yes No

Please note that this cover sheet 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 those kinds of committee changes.
 Use the Addendum form (CRO-1010) if more entries are needed.

1. Committee Information

a. Full Name PENDER Citizens for Schools		c. ID Number
b. Mailing Address (include City, State and Zip Code) 1611 Henry Brown Rd BURGAW, NC 28425		d. Date Filed 5-13-05
		e. Phone Number 9102595437

2. Report Year	3. Period Start Date (mm/dd/yyyy) 4-22-2005	4. Period End Date (mm/dd/yyyy)	5. Treasurer Full Name Betsy Chestnut
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6. Type of Committee (Check one)		8. Type of Report (check only one type of report from one category)		
<input type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	Municipal	State/County	Referendum
<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> PAC	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input checked="" type="checkbox"/> Referendum		<input type="checkbox"/> Thirty-five day	Quarterly	<input type="checkbox"/> Pre-referendum
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First Plus	<input type="checkbox"/> Final
<input type="checkbox"/> Soft Money Account		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third Plus	<input type="checkbox"/> Annual
<input type="checkbox"/> Building Fund		Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> NC Political Party Financing Fund		<input type="checkbox"/> Mid Year	Semi-annual	9. Special Report Name
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	
<input type="checkbox"/> NC Public Campaign Financing Fund		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
<input type="checkbox"/> Other:		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	

10. Account Information		10. Account Information	
a. Financial Institution Full Name FIRST CITIZENS BANK		a. Financial Institution Full Name	
b. Purpose Bond Campaign	c. Code BC	b. Purpose	c. Code
	d. Period Begin Balance \$ 4233.21		d. Period Begin Balance \$

CERTIFICATION

I certify that the Committee is in compliance with all provisions of Article 22A, including that no funds are commingled with funds for a federal or out-of-state PAC. I further say that this report is complete, true and correct.

Betsy Chestnut Printed Name of Signer *Betsy Chestnut* Signature of Appointed Treasurer _____ Date

FOR OFFICE USE ONLY

Date Received: **MAY 13 2005** Employee: **DB**

Date Postmarked: _____ Employee: _____

Date Scanned: _____ Employee: _____

Delivery Method
 Normal Mail
 Registered Mail
 Hand Delivered
 Electronically Filed

Detailed Summary

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)		2. Type of Report	3. ID Number	
Pender Citizens for Schools		Post R & F		
Start of Election Cycle: January 1, 2005		Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start		\$ 4233.21	\$ 5356.71	
RECEIPTS				
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$	
6) Contributions from Individuals	(CRO-1210)	\$	\$	
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	(CRO-1250)			
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$	
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	\$	\$	
11c) Outside Sources of Income	(CRO-1250)	\$	\$	
12) "Goods and Services" Contributions	(CRO-1260)	\$ 45.00	\$ 45.00	
13) TOTAL RECEIPTS <i>(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)</i>		\$ 4278.21	\$ 5401.71	
EXPENDITURES				
14) Disbursements	(CRO-1310)			
14a) Operating Expenditures	(CRO-1310)	\$ 3578.85	\$ 4642.35	
14b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	\$	
14c) Coordinated Party Expenditures	(CRO-1310)	\$	\$	
15) Loan Repayments	(CRO-1420)	\$	\$	
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	\$	
17) In-Kind Contributions	(CRO-1510)	\$ 45.00	\$ 45.00	
18) TOTAL EXPENDITURES <i>(Add lines 14a, 14b, 14c, 15, 16, and 17)</i>		\$ 3563.85	\$ 4687.35	
19) Cash on Hand at End <i>(Add lines 4 and 13 together, then subtract line 18)</i>		\$ 714.36	\$ 714.36	
ADDITIONAL INFORMATION				
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		\$	\$	

Disbursements

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Pender Citizens for Schools					
3. Type of Disbursement <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					
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments
Lorrie Luhring 222 Olde Point Road Hampstead, NC 28443			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$ 222.60
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
PL	check	Advertisement	4-26-2015	\$ 222.60	
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments
Lorrie Luhring 222 Olde Pt Rd Hampstead, NC 28443			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$ 387.60
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
PL	check	Advertisement	5-1-05	\$ 165.00	
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments
Lorrie Luhring 222 Olde Pt Rd Hampstead, NC 28443			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$ 1653.42
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
PL	check	Advertisement	5-1-05	\$ 1265.82	
				\$	
5. Total only this Page					\$
6. Total of ALL CRO-1310 Pages					\$
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>					
<i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>					
<i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					

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Disbursements

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Pender Citizens for Schools					
3. Type of Disbursement <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					
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
LORRIE Lühring 222 Olde Point Road Hampstead, NC 28443					
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 1834.92
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
BL	check	Advertising	4-26-2005	\$ 181.50	
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
LORRIE Lühring 222 Olde Pt Rd Hampstead, NC 28443					
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 2029.28
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
BL	check	TAGS/BUTTONS	4-26-2005	\$ 194.36	
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
LORRIE Lühring 222 Olde Pt Rd Hampstead, NC 28443					
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 2084.47
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
BL	check	MAILING LABELS	4-26-05	\$ 55.19	
				\$	
5. Total only this Page					\$
6. Total of ALL CRO-1310 Pages					\$
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>					
<i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>					
<i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					

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Disbursements

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Pender Citizens for Schools					
3. Type of Disbursement <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					
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <small>(include city, state, & zip)</small>		b. Coordinated Committee Name		d. Comments	
Studer Services 201 High Tide Drive Wilmington, NC 28411		c. Level Registered (Specify)		e. Election Cycle Sum to Date	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				\$ 64.20	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
BL	check	medals/Ribbons	4-26-2005	\$ 64.20	
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <small>(include city, state, & zip)</small>		b. Coordinated Committee Name		d. Comments	
Alphagraphics 120 Racine Drive Wilmington, NC		c. Level Registered (Specify)		e. Election Cycle Sum to Date	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				\$ 279.45	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
BL			4-26-05	\$ 279.45	
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <small>(include city, state, & zip)</small>		b. Coordinated Committee Name		d. Comments	
Alphagraphics 120 Racine Drive Wilmington, NC		c. Level Registered (Specify)		e. Election Cycle Sum to Date	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				\$ 667.20	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
BL	check	Postcards	4-26-05	\$ 387.75	
				\$	
5. Total only this Page				\$	
6. Total of ALL CRO-1310 Pages				\$	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					

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Disbursements

1. Committee Full Name (and Fund if applicable) Pender Citizens for Schools						2. ID Number	
3. Type of Disbursement <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							
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
- ATM Screenprinting Building 14 Unit 4 Wilmington, NC 28405				c. Level Registered (Specify)		e. Election Cycle Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 682.13	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount			
	check	T Shirts	5-1-2005	\$ 682.13			
				\$			
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	
FIRST Citizens Bank BURGAW, NC 28425				c. Level Registered (Specify)		e. Election Cycle Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 14.85	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount			
	transfer	Checks	4-7-05	\$ 14.85			
				\$			
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	
FIRST Citizens Bank BURGAW, NC 28425				c. Level Registered (Specify)		e. Election Cycle Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount			
	transfer	Service Charge	4-29-05	\$ 6.00			
				\$ 6.00			
5. Total only this Page						\$	
6. Total of ALL CRO-1310 Pages						\$	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>							

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In-Kind Contributions

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Pender Citizens For Schools			
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
Bee Line Printing 315 US Hwy 112S BURGAW, NC 28425		<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Cycle Sum to Date	
		\$ 45.00	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
LABOR & Materials		4-28-05	\$ 45.00
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
		<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Cycle Sum to Date	
		\$	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
			\$
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
		<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Cycle Sum to Date	
		\$	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
			\$
			\$
			\$
4. Total only this Page		\$ 45.00	
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		\$ 45.00	

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Goods and Services (including Fundraisers)

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Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) <u>Pender Citizens for Schools</u>	2. ID Number
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3. Event Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Beehive Printing 315 US Hwy 1178 259-1717 BURGAW, NC 28425</u>	b. Attendance (approx. count)	d. Date(s) Held (mm/dd/yyyy) FROM: <u>4-28-05</u> TO:
c. Description <u>Donation of Goods & Services</u>		e. Total Event Amount \$ <u>45.00</u>

4. Items (goods and/or services) Sold								
a. Cnt	b. Payment Breakdown			c. Item Description	d. Acct Code	e. Date (mm/dd/yyyy)	f. Amount per Item	g. Total Amount
	Check	Cash	Other					
			✓	<u>Donation of Goods & Services</u>	<u>PC</u>	<u>4-28-05</u>	\$	\$ <u>45.00</u>
							\$	\$
							\$	\$
							\$	\$
							\$	\$
							\$	\$
							\$	\$
							\$	\$
							\$	\$
							\$	\$

5. Total only this Page <i>(This should be the sum of all item '4g' from this page)</i>	\$ <u>45.00</u>
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6. Total of ALL CRO-1260 Pages <i>(This line must be on line 12 of Detailed Summary Page CRO-1100)</i>	\$ <u>45.00</u>
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