

# Disclosure Report Cover

Amendment  
 Yes  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

a. Full Name <b>COMMITTEE TO ELECT TOM ROPER COUNTY COMMISSIONER</b>		c. ID Number <b>7HL212</b>
b. Mailing Address (include City, State and Zip Code) <b>805 EASTWOOD CT BURGAW, NC 28425</b>		d. Date Filed
		e. Phone Number <b>910-471-3494</b>

<b>2008</b>	<b>10/19/08</b>	<b>12/31/08</b>
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<input type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:	<input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser	<b>Municipal</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<b>State/County</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input checked="" type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual Mid Year <input type="checkbox"/> Year End <input checked="" type="checkbox"/> Final <input type="checkbox"/> Special	<b>Referendum</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special
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a. Financial Institution Full Name	a. Financial Institution Full Name
b. Purpose <b>CAMPAIGN</b>	b. Purpose
c. Account Code <b>TR</b>	c. Account Code
d. Period Begin Balance <b>\$ 1289.59</b>	d. Period Begin Balance <b>\$</b>

**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.

**THOMAS JARDINE ROPER**      *Thomas Jardine Roper*      **4/9/09**  
 Printed Name of Signer      Signature of Appointed Treasurer      Date

**FOR OFFICE USE ONLY**

Date Received: <b>APR 09 2009</b>	Employee: <b>DS</b>	Delivery Method: <input checked="" type="checkbox"/> Registered Mail
Date Postmarked: _____	Employee: _____	<input type="checkbox"/> Normal Mail
Date Scanned: _____	Employee: _____	<input type="checkbox"/> Hand Delivered
Date Data Entered: _____	Employee: _____	<input type="checkbox"/> Electronically Filed
		<input type="checkbox"/> 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.

# Detailed Summary

Yes  No

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

COMMITTEE TO ELECT TOM ROPER COUNTY COMMISSIONER 475 7HL212

Start of Election Cycle: January 1, 2009 Total this Reporting Period Total this Election Cycle

4) Cash on Hand at Start \$ 1289.59 \$ -0-

5) Aggregated Contributions from Individuals (CRO-1205)	\$	\$ 117.00
6) Contributions from Individuals (CRO-1210)	\$	\$ 6600.00
7) Contributions from Political Party Committees (CRO-1220)	\$	\$ 1000.00
8) Contributions from Other Political Committees (CRO-1230)	\$	\$
9) Loan Proceeds (CRO-1410)	\$	\$ 3000.00
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)	\$	\$ 10,717.00

13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$	\$ 9427.41
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)	\$	\$ 9427.41
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$	\$ 1289.59

20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$	\$
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$	\$ 3000.00
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)	\$	\$ 3,000.00
27) 48-Hour Notice Reports Sum (CRO-2200)	\$	\$
28) Contributions to be Refunded (CRO-1215)	\$	\$ 1289.59

# Outstanding Loans

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
COMMITTEE TO ELECT TOM ROPER 805 EASTWOOD CT BURGAW NC 28425		REALTOR SOUTHEASTERN RETIREMENT FUND	COUNTY COMMISSIONER 7H2212
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
			2/21/08
			f. End Date (mm/dd/yyyy)
			5/30/08
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
0 %	NONE	\$ 3,000.	\$ 3000.00
k. Full Name of Lending Institution			l. Loan Number
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$	\$
k. Full Name of Lending Institution			l. Loan Number
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$	\$
k. Full Name of Lending Institution			l. Loan Number
			\$
			\$

# Contributions to be Reimbursed

Pg 1 of 1

Amendment  
 Yes  No

Use this form to report Contributions of \$1,000 or less to be reimbursed within 7 days.

Reimbursements must be disclosed on the Refunds/Reimbursements Form (CRO-1320).

Committee to Elect Tom Roper County Commissioner		7/12/212	
Full Name & Mailing Address of the Payee (the original vendor)		Full Name & Mailing Address of the Reimbursee (the person to whom the campaign check is written)	
Tom Roper 805 Eastwood Ct Burgaw NC 28425		SAME	
a. Contribution Description	b. Date (mm/dd/yyyy)	c. Credit Card Y/N	d. Amount
	10/20/08		\$ 1289.59
Full Name & Mailing Address of the Payee (the original vendor)		Full Name & Mailing Address of the Reimbursee (the person to whom the campaign check is written)	
a. Contribution Description	b. Date (mm/dd/yyyy)	c. Credit Card Y/N	d. Amount
			\$
Full Name & Mailing Address of the Payee (the original vendor)		Full Name & Mailing Address of the Reimbursee (the person to whom the campaign check is written)	
a. Contribution Description	b. Date (mm/dd/yyyy)	c. Credit Card Y/N	d. Amount
			\$
Full Name & Mailing Address of the Payee (the original vendor)		Full Name & Mailing Address of the Reimbursee (the person to whom the campaign check is written)	
a. Contribution Description	b. Date (mm/dd/yyyy)	c. Credit Card Y/N	d. Amount
			\$
			\$ 1289.59
			\$ 1289.59

# Forgiven Loans

Use this form to report any loan which has been forgiven by the lender.  
 A Forgiven loan statement (CRO-6200) must accompany each forgiven loan.

Committee Full Name, Mailing Address & Phone (include city, state, & zip)		Election Name	
Committee TO ELECT TOM ROPER COUNTY COMMISSIONER		7HL212	
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Comments</b>	
TOM ROPER 805 EASTWOOD CT BURBANK NC 28425			
<b>c. Original Loan Date (mm/dd/yyyy)</b>		<b>f. Election Sum to Date</b>	
2/21/08		\$ —	
<b>d. Original Loan Amount</b>		<b>g. Date (mm/dd/yyyy)</b>	
\$ 3,000.00		10/20/08	
<b>e. Remaining Loan Balance</b>		<b>h. Forgiven Amount</b>	
\$ 3,000.00		\$ 3,000.00	
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Comments</b>	
<b>c. Original Loan Date (mm/dd/yyyy)</b>		<b>f. Election Sum to Date</b>	
		\$	
<b>d. Original Loan Amount</b>		<b>g. Date (mm/dd/yyyy)</b>	
\$			
<b>e. Remaining Loan Balance</b>		<b>h. Forgiven Amount</b>	
\$		\$	
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Comments</b>	
<b>c. Original Loan Date (mm/dd/yyyy)</b>		<b>f. Election Sum to Date</b>	
		\$	
<b>d. Original Loan Amount</b>		<b>g. Date (mm/dd/yyyy)</b>	
\$			
<b>e. Remaining Loan Balance</b>		<b>h. Forgiven Amount</b>	
\$		\$	
<b>Total Forgiven Amount</b>		\$ 3,000.00	
<b>Original Loan Amount</b>		\$ 3,000.00	
<i>The lender information should contain the same information as supplied on the original loan proceed statement.</i>			



North Carolina  
State Board of Elections

506 N Harrington Street  
Raleigh, NC 27603

Kimberly Westbrook-Strach  
Deputy Director – Campaign Reporting

Mailing Address  
PO Box 27255  
Raleigh, NC 27611-7255  
(919) 733-7173  
Fax: (919) 715-8047

**Certification to Close Committee**

This Certification is used to express the intent to close the committee after all funds have been properly disbursed.

**FILED BY:**

Committee Name:

COMMITTEE TO ELECT TOM ROPER COUNTY COMMISSIONER

Treasurer Name:

THOMAS JARDINE ROPER

Treasurer Address:

805 EASTWOOD LT

(include city, state, & zip)

BURBANK NC 28425

Treasurer Phone:

910-471-3494

I certify that the above mentioned Committee intends to close and cease existence. Upon signing this certification, I declare that all funds have been distributed and reported (if required). In addition, no contributions will be accepted or disbursements made after the "Final Report" is filed or this form is signed. If the Committee at any future time intends to accept or spend funds in support or opposition of any candidate or ballot issue, a new political committee must be formed and registered with the Board of Elections before such activities may commence.

Committees that have filed under the \$3,000 threshold will only be required to sign this Certification. No "Final Report" will be required for committees meeting this criterion. Any Committee that did not file under the \$3,000 threshold must submit a "Final Report" with this Certification. This report must have a zero balance with no outstanding loans or debts.

4/9/08  
Date Signed

Thomas Jardine Roper  
Signature

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.