

# 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

1. Committee Information			
a. Full Name		c. ID Number	
Demetrice A. Keith		5HL531	
b. Mailing Address (include City, State and Zip Code)		d. Date Filed	
15925 US Hwy 421 Burgaw, NC 28425		4/27/10	
		e. Phone Number	
		910-283-9442	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2010	February 23, 2010	April 17, 2010	Demetrice A. Keith
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)	
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<b>Municipal</b>	<b>State/County</b>
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input checked="" type="checkbox"/> First
		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second
		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third
		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth
		<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"/> Special
7. Type of Fund (if applicable, check one)		10. Special Report Name	
<input type="checkbox"/> "Booster Fund"			
<input type="checkbox"/> Building Fund			
<input type="checkbox"/> Other:			
8. Number of Fundraisers this Report			
11. Account Information		11. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
Bank of America			
b. Purpose	c. Account Code	b. Purpose	c. Account Code
Campaign Finances	DK		
	d. Period Begin Balance		d. Period Begin Balance
	\$ 0		\$
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.			
Demetrice A. Keith		Demetrice A. Keith	
Printed Name of Signer		Signature of Appointed Treasurer	
		4/27/10	
		Date	
FOR OFFICE USE ONLY			
Date Received:	4/27/10	Employee:	OB
Date Postmarked:		Employee:	
Date Scanned:		Employee:	
Date Data Entered:		Employee:	
		Delivery Method	
		<input type="checkbox"/> Normal Mail	
		<input type="checkbox"/> Registered Mail	
		<input checked="" type="checkbox"/> Hand Delivered	
		<input type="checkbox"/> Electronically Filed	
		<input checked="" 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.

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number	
Demetrice A. Keith	1st quarter	5HL531	
Start of Election Cycle: January 1, 2010		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 0	\$ 0
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals (CRO-1205)		\$	\$
6) Contributions from Individuals (CRO-1210)		\$ 895.00	\$ 895.00
7) Contributions from Political Party Committees (CRO-1220)		\$ 100.00	\$ 100.00
8) Contributions from Other Political Committees (CRO-1230)		\$	\$
9) Loan Proceeds (CRO-1410)		\$ 325.16	\$ 325.16
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)		\$ 1320.16	\$ 1320.16
<b>EXPENDITURES</b>			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$ 1255.05	\$ 1255.05
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)		\$ 1255.05	\$ 1255.05
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 65.11	\$ 65.11
<b>ADDITIONAL INFORMATION</b>			
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)		\$ 325.16	
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 (CRO-2200)		\$	\$
28) Contributions to be Refunded (CRO-1215)		\$	\$

# Contributions from Individuals

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>	
Demetrice A. Keith - School Board						54L531	
<b>3. Contributor Information</b> <input checked="" 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>	
James R. Fullwood 6305 Virgilia Ct. Raleigh NC 27616-3167				Retiree			
				<b>c. Employer's Name/Specific Field</b>			
				N.C. Dept. of Corrections			
						<b>e. Election Sum to Date</b>	
						\$ 150.00	
<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"/>	DK	check		02/20/2010		\$ 150.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input checked="" 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>	
Delia Stallings P.O. Box 1534 125 Summer Ridge Dr. Wallace NC 28406				Data Manager			
				<b>c. Employer's Name/Specific Field</b>			
				Duplin Co. school system			
						<b>e. Election Sum to Date</b>	
						\$ 25.00	
<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"/>	DK	check		03/01/2010		\$ 25.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input checked="" 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>	
Mary E. Alston 185 Union Chapel Rd Burgaw NC 28425				Retiree			
				<b>c. Employer's Name/Specific Field</b>			
				Post Office			
						<b>e. Election Sum to Date</b>	
						\$ 25.00	
<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"/>	DK	check		03/07/2010		\$ 25.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>4. Total only this Page</b>						\$ 200.00	
<b>5. Total of ALL CRO-1210 Pages</b>						\$ 895.00	
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>							

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**Contributions from Individuals**

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Demetria A. Keith					54L531	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Arlester Fullwood 1638 Lanefield Rd. Warsaw, NC 28398			Instructor			
			c. Employer's Name/Specific Field			
			Cape Fear Community College		e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	DK	check		03/07/2010	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Lorenzo R. Keith 6030 Bibury Lane LaPlata, MD 20646			information tech proj. manager			
			c. Employer's Name/Specific Field			
			Capital One		e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	DK	check		03/10/2010	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Alfonso Beatty 2239 Cedar Hill Rd. Leland, NC 28451-8151			Bus Driver			
			c. Employer's Name/Specific Field			
			self Employed		e. Election Sum to Date	
					\$ 20.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	DK	check		03/29/2010	\$ 20.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 170.00	
5. Total of ALL CRO-1210 Pages					\$ 895.00	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

# Contributions from Individuals

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>	
Demetrice A. Keith					54L531	
<b>3. Contributor Information</b> <input checked="" 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>	
Fredrick E. Fullwood P.O. Box 2244 Kernersville NC 27285			Self Employed			
			<b>c. Employer's Name/Specific Field</b>			
			DBA Fullwood Properties			
					<b>e. Election Sum to Date</b>	
					\$ 25.00	
<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"/>	DK	check		04/01/2010	\$ 25.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input checked="" 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>	
Larry Butler P.O. Box 40605 Raleigh NC 27629-0605			Retiree			
			<b>c. Employer's Name/Specific Field</b>			
			N.C. Dept. of Corrections			
					<b>e. Election Sum to Date</b>	
					\$ 25.00	
<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"/>	DK	check		04/01/2010	\$ 25.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input checked="" 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>	
B.J. Spencer 600 Spencer Road Currie NC 28435			Retiree			
			<b>c. Employer's Name/Specific Field</b>			
			N.C. Dept. of Human Resources			
					<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"/>	DK	check		04/03/2010	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 150.00	
<b>5. Total of ALL CRO-1210 Pages</b>					\$ 895.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

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# Contributions from Individuals

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>	
Demetrice A. Keith						54L53I	
<b>3. Contributor Information</b> <input checked="" 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>	
Mrs. Augusta H. Johnson P.O. Box 543 Burgaw, NC 28425				Retiree			
				<b>c. Employer's Name/Specific Field</b>			
				Pender County Schools			
						<b>e. Election Sum to Date</b>	
						\$ 25.00	
<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"/>	DK	check		04/03/2010		\$ 25.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input checked="" 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>	
Dr. Rachel D. Stephens 2418 Horse Branch Rd Willard NC 28478				Instructor			
				<b>c. Employer's Name/Specific Field</b>			
				Cape Fear Community College			
						<b>e. Election Sum to Date</b>	
						\$ 50.00	
<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"/>	DK	check		04/07/2010		\$ 50.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input checked="" 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>	
James H. Faison III 3204 Galway Rd. Castle Hayne NC 28429				Dist Court Judge			
				<b>c. Employer's Name/Specific Field</b>			
				New Hanover Co Judicial District			
						<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"/>	DK	check		04/08/2010		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>4. Total only this Page</b>						\$ 175.00	
<b>5. Total of ALL CRO-1210 Pages</b>						\$ 895.00	
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>							

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# Contributions from Individuals

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>	
Demetrice A. Keith						5HL531	
<b>3. Contributor Information</b> <input checked="" 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>	
Irene C. Wallace 1600 High Smith RD Burgaw NC 28425				Retiree			
				<b>c. Employer's Name/Specific Field</b>			
				School System			
				<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"/>	D/K	check		04/17/2010		\$ 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>	
				<b>c. Employer's Name/Specific Field</b>			
				<b>e. Election Sum to Date</b>		\$	
<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"/>						\$	
<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>	
				<b>c. Employer's Name/Specific Field</b>			
				<b>e. Election Sum to Date</b>		\$	
<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"/>						\$	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>4. Total only this Page</b>						\$ 200.00	
<b>5. Total of ALL CRO-1210 Pages</b>						\$ 895.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

REC'D APR 26 2010

# Contributions from Political Party Committees

Use this form to report contributions from a political party

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
Demetrice A. Keith - School Board						5HL531?	
<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)						<b>b. Comments</b>	
Chautseurs Teamsters + Helpers Local 391 Carolina Drive Chapter 1 state account PO Box 35405 Greensboro NC 27425							
						<b>c. Election Sum to Date</b>	
						\$ 100.00	
<b>d. Account Code</b>	<b>e. Form of Payment</b>	<b>f. In-Kind Description</b>	<b>g. Date</b> (mm/dd/yyyy)		<b>h. Amount</b>		
DK	check		04/08/2010		\$ 100.00		
					\$		
					\$		
<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. Comments</b>	
						<b>c. Election Sum to Date</b>	
						\$	
<b>d. Account Code</b>	<b>e. Form of Payment</b>	<b>f. In-Kind Description</b>	<b>g. Date</b> (mm/dd/yyyy)		<b>h. Amount</b>		
					\$		
					\$		
					\$		
<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. Comments</b>	
						<b>c. Election Sum to Date</b>	
						\$	
<b>d. Account Code</b>	<b>e. Form of Payment</b>	<b>f. In-Kind Description</b>	<b>g. Date</b> (mm/dd/yyyy)		<b>h. Amount</b>		
					\$		
					\$		
					\$		
<b>4. Total only this Page</b>						\$ 100.00	
<b>5. Total of ALL CRO-1220 Pages</b> <small>(This line must be on line 7 of Detailed Summary Page CRO-1100)</small>						\$ 100.00	

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# Disbursements

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> <u>Demetree A. Keith - School Board</u>					<b>2. ID Number</b> <u>5HL532</u>
<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 checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i>		<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
<u>Pender Co. Bd of Electm</u> <u>807 S. Walker Street</u> <u>Burgaw NC 28425</u> <u>910-259-1220</u>		<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b> <u>\$ 6.00</u>	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
<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>
<u>DK</u>	<u>10 check</u>	<u>G</u>	<u>02/15/2010</u>	<u>\$ 6.00</u>	<u>Filing Fee</u>
				\$	
<b>4. Payee Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i>		<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
<u>Bank of America</u> <u>102 E. Fremont Street</u> <u>Burgaw NC 28425</u> <u>910-259-2152</u>		<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b> <u>\$ 25.00</u>	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
<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>
<u>DK</u>	<u>0 check</u>	<u>H</u>	<u>02/19/2010</u>	<u>\$ 25.00</u>	<u>Initial deposit to open acct.</u>
				\$	
<b>4. Payee Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i>		<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
<u>Southern Printing Co. &amp; Electronics</u> <u>263 S. Dudley Street</u> <u>P.O. Box 833</u> <u>Burgaw NC 28425</u> <u>910-259-4807</u>		<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b> <u>\$ 258.60</u>	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
<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>
<u>DK</u>	<u>0 check</u>	<u>B</u>	<u>03/05/2010</u>	<u>\$ 258.60</u>	<u>Copies of Fliers</u>
				\$	
<b>5. Total only this Page</b>					<u>\$ 289.60</u>
<b>6. Total of ALL CRO-1310 Pages</b>					<u>\$ 1255.05</u>
<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>					
<b>7. Purpose Codes</b> (List detailed expenditure code in (h.) above)					
<b>A* - Media</b>	<b>B* - Printing</b>	<b>C* - Fundraising</b>	<b>D - To Another Candidate</b>		
<b>E - Salaries</b>	<b>F* - Equipment</b>	<b>G - Political Party</b>	<b>H* - Holding Public Office Expenses</b>		
<b>I - Postage</b>	<b>J - Penalties</b>	<b>K* - Office Expenses</b>	<b>Q* - Donation to Legal Expense Fund</b>		
<b>O* - Other</b>					
* Codes require detailed explanation in required remarks field (k)					

# Disbursements

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> <u>Demetria A. Keith</u>	<b>2. ID Number</b> <u>542531</u>
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**3. Type of Disbursement** (Please use separate CRO-1310 forms for each type of Disbursement.)

Operating Expenses     Contributions to Candidates/Political Committees     Coordinated Party Expenditures

**4. Payee Information**     Add     Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) <u>Fast Signs</u> <u>894-4 South Kerr Avenue</u> <u>Wilmington NC 28403</u> <u>910-395-0100</u>	<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> \$ <u>965.45</u>

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
<u>DK</u>	<u>Cash</u>	<u>B</u>	<u>03/23/2010</u>	<u>\$ 35.56</u>	<u>Print Campaign Signs</u>
<u>DK</u>	<u>check</u>	<u>B</u>	<u>03/23/2010</u>	<u>\$ 447.17</u>	<u>Print Campaign Signs</u>

**4. Payee Information**     Add     Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) <u>Fast Signs</u> <u>894-4 South Kerr Avenue</u> <u>Wilmington NC 28403</u> <u>910-395-0100</u>	<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> \$ <u>965.45</u>

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
<u>DK</u>	<u>check</u>	<u>B</u>	<u>04/14/2010</u>	<u>\$ 482.72</u>	<u>Print Campaign Signs</u>
				\$	

**4. Payee Information**     Add     Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<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> \$

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				\$	

**5. Total only this Page**    \$ 965.45

**6. Total of ALL CRO-1310 Pages**

(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)

(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)

(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)

\$ 1,255.05

**7. Purpose Codes** (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)

# Loan Proceeds

Pg \_\_\_\_ of \_\_\_\_

Amendment  
 Yes  No

Use this form to report proceeds from a loan and loan endorser's information  
 A loan proceeds statement must accompany each loan that is from an individual

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
Demetria A. Keith				5HL531	
<b>3. Lender 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>	
Demetria Keith 15925 US Hwy 421 Burqaw, NC 28425		Candidate			
		<b>c. Employer's Name/Specific Field</b>		<b>e. Start Date (mm/dd/yyyy)</b>	
				02-23-2010	
				<b>f. End Date (mm/dd/yyyy)</b>	
				12-31-2010	
<b>g. Rate</b>	<b>h. Security Pledged</b>	<b>i. Account Code</b>	<b>j. Form of Payment</b>	<b>k. Amount</b>	
0 %	None	DK	check	\$ 325.16	
<b>l. Full Name of Lending Institution</b>				<b>m. Loan Number</b>	
<b>4. Endorsers/Makers</b> <i>(The people who guarantee the loan.)</i>					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
				<b>d. Percentage</b>	
				%	
				<b>e. Amount</b>	
				\$	
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
				<b>d. Percentage</b>	
				%	
				<b>e. Amount</b>	
				\$	
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
				<b>d. Percentage</b>	
				%	
				<b>e. Amount</b>	
				\$ 325.16	
<b>5. Total of ALL CRO-1410 Pages</b>				\$ 325.16	
<i>(This line must be on line 9 of Detailed Summary Page CRO-1100)</i>					

# Debts and Obligations Owed By the Committee

Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card payments.

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
Demetrice A. Keith - school Board		5HL531	
<b>3. Creditor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor.	
Demetrice A. Keith 15925 US Hwy 421 Burgoon NC 28425			
<b>b. Description of Creditor</b>		Candidate	
<b>c. Beginning Balance</b>	<b>d. Total Amount Paid</b>	<b>e. Total Amount Incurred</b>	<b>f. Remaining Balance</b>
\$ 325.16	\$ 00.00	\$ 325.16	\$ 325.16
<b>g. Incurred Debts (what the committee received)</b>			
<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>	<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>
	\$		\$
<b>g3. Item Description</b>		<b>g3. Item Description</b>	
<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	
<b>3. Creditor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor.	
<b>b. Description of Creditor</b>			
<b>c. Beginning Balance</b>	<b>d. Total Amount Paid</b>	<b>e. Total Amount Incurred</b>	<b>f. Remaining Balance</b>
\$	\$	\$	\$
<b>g. Incurred Debts (what the committee received)</b>			
<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>	<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>
	\$		\$
<b>g3. Item Description</b>		<b>g3. Item Description</b>	
<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	
<b>4. Total only this Page</b> (This should be the sum of all item '3f' from this page)			\$ 325.16
<b>5. Total of ALL CRO-1610 Pages</b> (This line must be on line 22 of Detailed Summary Page CRO-1100)			\$ 325.16

REC'D APR 26 2010