

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 <i>Thomas Co. City Commission</i>	c. ID Number <i>7141543</i>
b. Mailing Address (include City, State and Zip Code) <i>PO Box 2254 Surf City NC 28475</i>	d. Date Filed <i>12/14/10</i>
	e. Phone Number <i>910-540-5330</i>

2. Report Year <i>2010</i>	3. Period Start Date (mm/dd/yy) <i>7/1/10</i>	4. Period End Date (mm/dd/yy) <i>9/30/10</i>	5. Treasurer Full Name <i>Timothy M Thomas</i>
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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	Municipal	State/County	Referendum
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<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"/> Pre-referendum
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
		<input type="checkbox"/> Pre-runoff	<input checked="" 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 checked="" type="checkbox"/> Final	
			<input type="checkbox"/> Special	

7. Type of Fund (if applicable, check one)

Booster Fund

Building Fund

Other:

8. Number of Fundraisers this Report

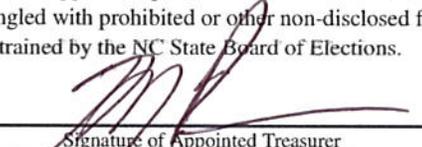
- 0 -

10. Special Report Name

11. Account Information		11. Account Information	
a. Financial Institution Full Name <i>Bank of America</i>	a. Financial Institution Full Name	b. Purpose <i>Campaign Funds</i>	b. Purpose
b. Purpose	c. Account Code <i>1</i>	c. Account Code	c. Account Code
	d. Period Begin Balance <i>\$ 267.75</i>		d. Period Begin Balance
			\$

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.

Timothy M. Thomas  *12/14/10*

Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: *12/17/10* Employee: *DB* Delivery Method

Date Postmarked: *12/16/10* Employee: _____ Normal Mail

Date Scanned: _____ Employee: _____ Registered Mail

Date Data Entered: _____ Employee: _____ Hand Delivered

Electronically Filed

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

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	
Thomas for City Commission	3rd Qtr / Final	7H1543	
Start of Election Cycle: January 1, 2010	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start	\$ 267.78	\$ - 0 -	
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)	\$	\$	
6) Contributions from Individuals (CRO-1210)	\$	\$ 3725. -	
7) Contributions from Political Party Committees (CRO-1220)	\$	\$	
8) Contributions from Other Political Committees (CRO-1230)	\$	\$	
9) Loan Proceeds (CRO-1410)	\$	\$ 5200. -	
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)	\$	\$	
11e) Exempt Purchase Price Sales (CRO-1265)	\$ 0.00	\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)	\$ - 0 -	\$ 8925.00	
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)	\$ 26.00	\$ 8683.22	
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$ 50.00	\$ 50. -	
13c) Coordinated Party Expenditures (CRO-1310)	\$	\$	
14) Aggregated Non-Media Expenditures (CRO-1315)	\$	\$	
15) Loan Repayments (CRO-1420)	\$ 191.78	\$ 191.78	
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)	\$ 267.78	\$ 8925.00	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ - 0 -	\$ - 0 -	
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$		
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$ 5008.22		
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)	\$ 5008.22	\$ 5008.22	
27) 48-Hour Notice Reports Sum (CRO-2220)	\$	\$	
28) Contributions to be Refunded (CRO-1215)	\$	\$	

Disbursements

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

1. Committee Full Name (and Fund if applicable)						2. ID Number
Thoms for County Commission						7HLS43
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)						
<input 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
Rabon for N.C. Senate SOUTHPORT, NC						
				c. Level Registered (Specify)		e. Election Sum to Date
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
						\$ 50.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
2	check	1	9/16/10	\$ 50.00		
				\$		
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
Bank of America Roland Ave Surf City, NC 28445 910-328-5551						
				c. Level Registered (Specify)		e. Election Sum to Date
				<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
						\$ 26.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	elect.	0	8/31/10	\$ 13.00	service charge	
1	elect	0	7/21/10	\$ 13.00	service charge	
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
				c. Level Registered (Specify)		e. Election 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 Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				\$		
				\$		
5. Total only this Page						\$ 76.00 50.00 TM7
6. Total of ALL CRO-1310 Pages						\$ 76.00 50.00 TM7
<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>						
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)						

Outstanding Loans

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

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Thomas for City Commissioner		7ALS43	
3. Lender 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
Timothy M. Thomas POBx 2254 Surf City NC 28445 910-540-5330		OWNER/DEMOLITION COMPANY	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		Self employed Thomas Demo	5/24/10
			f. End Date (mm/dd/yyyy)
			9/30/10
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
N/A %	N/A	\$ 1500.00	\$ 1500.00
k. Full Name of Lending Institution			l. Loan Number
N/A			2
3. Lender 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
Timothy M. Thomas POBx 2254 Surf City NC 28445 910-540-5330		owner Demo company	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		Self employed Thomas Demo	3/3/10
			f. End Date (mm/dd/yyyy)
			9/30/10
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
N/A %	N/A	\$ 3700.00	\$ 3508.22
k. Full Name of Lending Institution			l. Loan Number
N/A			1
3. Lender 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
		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
4. Total only this Page			\$
5. Total of ALL CRO-1430 Pages (This line must be on line 21 of Detailed Summary Page CRO-1100)			\$

Forgiven Loans

Amendment
 Yes No

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.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Thomas for City Commission		7HLS43	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Comments	
Timothy M Thomas 2007 2754 S L City NC 28416			
910-540-5330			
		c. Original Loan Date (mm/dd/yyyy)	f. Election Sum to Date
		5/24/10	\$
		d. Original Loan Amount	g. Date (mm/dd/yyyy)
		\$ 1500.00	5/24/10
		e. Remaining Loan Balance	h. Forgiven Amount
		\$ 1500.00	\$ 1500.00
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Comments	
SAME AS ABOVE!			
		c. Original Loan Date (mm/dd/yyyy)	f. Election Sum to Date
		3/3/10	\$
		d. Original Loan Amount	g. Date (mm/dd/yyyy)
		\$ 3700.00	3/3/10
		e. Remaining Loan Balance	h. Forgiven Amount
		\$ 3700.00	\$ 3508.22
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Comments	
		c. Original Loan Date (mm/dd/yyyy)	f. Election Sum to Date
			\$
		d. Original Loan Amount	g. Date (mm/dd/yyyy)
		\$	
		e. Remaining Loan Balance	h. Forgiven Amount
		\$	\$
4. Total only this Page		\$	
5. Total of ALL CRO-1440 Pages <small>(This line must be on line 26 of Detailed Summary Page CRO-1100)</small>		\$	
<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

Forgiven Loan Statement

This form is used to report a loan that has been forgiven by the lender. The lender's signature is required on this form and it must accompany the next filed report

Name of Lender:	<i>Timothy M. Thomas</i>
Committee receiving loan:	<i>THOMAS for City Commissioner</i>
Date of loan:	<i>3/3/10</i>
Amount of original loan:	<i>3700.00</i>
*Amount of loan to be forgiven:	<i>3508.22</i>

I, *Timothy M. Thomas*, do not wish to be reimbursed for the amount of the loan indicated above* and will consider the amount loaned a contribution to the committee.

I understand and confirm no other parties are responsible for payment of this loan. I may not forgive a loan for which there is an outstanding balance owed to any source.

 Signature of Lender

 Signature of Committee Treasurer

Note: This Statement is to be filed with the Election Board where the committee's reports are filed.



North Carolina
State Board of Elections
506 N Harrington Street
Raleigh, NC 27603

Kimberly Westbrook-Strach
Deputy Director – Campaign Reporting

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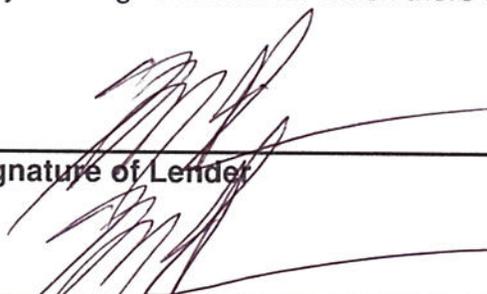
Forgiven Loan Statement

This form is used to report a loan that has been forgiven by the lender. The lender's signature is required on this form and it must accompany the next filed report

Name of Lender:	<i>Timothy Thomas</i>
Committee receiving loan:	<i>Thomas for County Commissioner</i>
Date of loan:	<i>5/24/10</i>
Amount of original loan:	<i>1500.00</i>
*Amount of loan to be forgiven:	<i>1500.00</i>

I, *Timothy Thomas*, do not wish to be reimbursed for the amount of the loan indicated above* and will consider the amount loaned a contribution to the committee.

I understand and confirm no other parties are responsible for payment of this loan. I may not forgive a loan for which there is an outstanding balance owed to any source.



Signature of Lender

Signature of Committee Treasurer

Note: This Statement is to be filed with the Election Board where the committee's reports are filed.