

# 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.

<b>1. Committee Information</b>	
a. Full Name DORIS P CARLTON FOR COUNTY COMMISSIONER	c. ID Number NHLB7K
b. Mailing Address (include City, State and Zip Code) 6540 HIGH SMITH RD ROCKY POINT, NC 28457	d. Date Filed 1-15-15
	e. Phone Number 910 259 5013

2. Report Year 2014	3. Period Start Date (mm/dd/yy) 10/28/2014	4. Period End Date (mm/dd/yy) 11/10/14	5. Treasurer Full Name DORIS P CARLTON
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<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	<b>Municipal</b>	<b>State/County</b>	<b>Referendum</b>
<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
<b>7. Type of Fund (if applicable, check one)</b>		<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	<input type="checkbox"/> Annual
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> Other:		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	<b>10. Special Report Name</b>
<b>8. Number of Fundraisers this Report</b>		<input checked="" type="checkbox"/> Final	<input type="checkbox"/> Year End	
0		<input type="checkbox"/> Special	<input checked="" type="checkbox"/> Final	
			<input type="checkbox"/> Special	

<b>11. Account Information</b>		<b>11. Account Information</b>	
a. Financial Institution Full Name First Citizens Bank		a. Financial Institution Full Name Paypal	
b. Purpose	c. Account Code DC	b. Purpose	c. Account Code PP
	d. Period Begin Balance \$ 229.28		d. Period Begin Balance \$ 11.30

**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.

DORIS P CARLTON      Doris P. Carlton      1-15-15  
 Printed Name of Signer      Signature of Appointed Treasurer      Date

**FOR OFFICE USE ONLY**

Date Received: 1/15/15      Employee: DB      **Delivery Method**

Date Postmarked: \_\_\_\_\_      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.



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

Kim Westbrook Strach  
 Executive Director

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

**Certification to Close Committee**

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

This Certification is filed at the Board of Elections office where the committee's campaign reports are filed.

**FILED BY:**

Committee Name: DORIS P. CARLTON FOR COUNTY COMMISSIONER

Treasurer Name: DORIS P CARLTON

Treasurer Address: 10540 HIGHSMITH RD  
 (include city, state, & zip) ROCKY POINT, NC 28457

Treasurer Phone: 910-8259-5013

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 \$1,000 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 \$1,000 threshold must submit a "Final Report" with this Certification. This report must have a zero balance with no outstanding loans or debts.

11/15/15  
 Date Signed

Doris P. Carlton  
 Signature

# Loan Repayments

Use this form to report payments on an existing loan.

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
DORIS P. CARLTON FOR COUNTY COMMISSIONER				NHLB7K	
<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. Comments</b>	
DORIS P CARLTON 6540 HIGHSMITH RD ROCKY POINT, NC 28457					
				<b>c. Original Loan Date</b>	
				6/20/14	
				<b>d. Original Loan Amount</b>	
				\$ 1550.00	
<b>e. Remaining Loan Balance</b>	<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Date (mm/dd/yyyy)</b>	<b>i. Repayment Amount</b>	
\$ 1550.00	PP	CK	11/10/14	\$ 11.30	
\$ 1538.70	DL	CK	11/10/14	\$ 229.28	
<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. Comments</b>	
				<b>c. Original Loan Date</b>	
				<b>d. Original Loan Amount</b>	
				\$	
<b>e. Remaining Loan Balance</b>	<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Date (mm/dd/yyyy)</b>	<b>i. Repayment Amount</b>	
\$				\$	
\$				\$	
<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. Comments</b>	
				<b>c. Original Loan Date</b>	
				<b>d. Original Loan Amount</b>	
				\$	
<b>e. Remaining Loan Balance</b>	<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Date (mm/dd/yyyy)</b>	<b>i. Repayment Amount</b>	
\$				\$	
\$				\$	
<b>4. Total only this Page</b>				\$ 240.58	
<b>5. Total of ALL CRO-1420 Pages</b> <i>(This line must be on line 15 of Detailed Summary Page CRO-1100)</i>				\$ 240.58	

# 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.

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
DORIS P CARLTON FOR COUNTY COMMISSIONER		NHLBTR	
<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. Comments</b>	
DORIS P CARLTON 6540 HIGHSMITH RD ROCKY POINT, NC 28457			
<b>c. Original Loan Date (mm/dd/yyyy)</b>		<b>f. Election Sum to Date</b>	
6/20/14		\$ 1550.00	
<b>d. Original Loan Amount</b>		<b>g. Date (mm/dd/yyyy)</b>	
\$ 1550.00		11/10/14	
<b>e. Remaining Loan Balance</b>		<b>h. Forgiven Amount</b>	
\$ 1309.42		\$ 1309.42	
<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. 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>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. 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>4. Total only this Page</b>		\$ 1309.42	
<b>5. Total of ALL CRO-1440 Pages</b> <i>(This line must be on line 26 of Detailed Summary Page CRO-1100)</i>		\$ 1309.42	
<i>The lender information should contain the same information as supplied on the original loan proceed statement.</i>			

# 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	
DORIS P CARLTON FOR COUNTY COMMISSIONER		D#LBTK	
Start of Election Cycle: January 1, _____	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start	\$ 240.58	\$ 240.58	
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 0	\$ 0	
6) Contributions from Individuals (CRO-1210)	\$ 0	\$ 0	
7) Contributions from Political Party Committees (CRO-1220)	\$ 0	\$ 0	
8) Contributions from Other Political Committees (CRO-1230)	\$ 0	\$ 0	
9) Loan Proceeds (CRO-1410)	\$ 0	\$ 0	
10) Refunds/Reimbursements to the Committee (CRO-1240)	\$ 0	\$ 0	
11) Other Receipt Sources			
11a) Interest on Bank Accounts (CRO-1250)	\$ 0	\$ 0	
11b) Contributions from Not-For-Profit Organizations (CRO-1250)	\$ 0	\$ 0	
11c) Outside Sources of Income (CRO-1250)	\$ 0	\$ 0	
11d) Legal Expense Fund - Other Sources (CRO-1270)	\$ 0	\$ 0	
11e) Exempt Purchase Price Sales (CRO-1265)	\$ 0	\$ 0	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)	\$ 0	\$ 0	
<b>EXPENDITURES</b>			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)	\$ 0	\$ 0	
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$ 0	\$ 0	
13c) Coordinated Party Expenditures (CRO-1310)	\$ 0	\$ 0	
14) Aggregated Non-Media Expenditures (CRO-1315)	\$ 0	\$ 0	
15) Loan Repayments (CRO-1420)	\$ 240.58	\$ 240.58	
16) Refunds/Reimbursements from the Committee (CRO-1320)	\$ 0	\$ 0	
17) In-Kind Contributions (CRO-1510)	\$ 0	\$ 0	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 0	\$ 0	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 0	\$ 0	
<b>ADDITIONAL INFORMATION</b>			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$ 0		
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$ 0		
22) Debts and Obligations owed by the Committee (CRO-1610)	\$ 0		
23) Debts and Obligations owed to the Committee (CRO-1620)	\$ 0		
24) Account Transfers Within the Committee (CRO-1720)	\$ 0		
25) Administrative Support (CRO-1710)	\$ 0	\$ 0	
26) Forgiven Loans (CRO-1440)	\$ 1309.42	\$ 1309.42	
27) 48-Hour Notice Reports Sum (CRO-2220)	\$ 0	\$ 0	
28) Contributions to be Refunded (CRO-1215)	\$ 0	\$ 0	