

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	
Supporters of the Pender County School Bond			PND1401	
b. Mailing Address (include City, State and Zip Code)			d. Date Filed	
90 Susan Croom 564 Royal Tern Dr Hampstead, NC 28443			Sept 25, 2014	
			e. Phone Number	
			910-352-2477	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name	
2014	9/23/14	9/23/14	Betsy Chestnut	
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
<input type="checkbox"/> Candidate Campaign <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input checked="" type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser		Municipal <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 <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special		
		State/County <input type="checkbox"/> Organizational Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <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		
First Citizens Bank				
b. Purpose	c. Account Code	b. Purpose	c. Account Code	
Campaign Support	PESB			
	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.				
_____ Susan Croom Printed Name of Signer		_____ Susan Croom Signature of Appointed Treasurer		_____ 9/26/14 Date
FOR OFFICE USE ONLY				
Date Received:	9/26/14	Employee:	DB	
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 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.				

Statement of Organization - Referendum Committee

Amendment
 Yes No

Use this form to create a new or update an existing referendum committee.

This form must be accompanied by form CRO-3500 (when amending, only re-submit if applicable)

1. Committee Information			
a. Full Name		c. ID Number	
Supporters of the Pender County School Bond		PEND1401	
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
c/o Susan Croom 564 Royal Tern Drive Hampstead, NC 28443		Sept. 23, 2014	
		e. Phone Number	
		910-352-2477	
2. Referendum Information			
a. Full Name		b. Date of Referendum	c. Declaration
Pender County School Bond Pender County, NC		Nov. 4, 2014	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
3. Treasurer Information		4. Custodian of Books Information	
a. Full Name		a. Full Name	
Betsy Chestnutt		Betsy Chestnutt	
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
1611 Henry Brown Rd Burgaw, NC 28425		1611 Henry Brown Rd Burgaw, NC 28425	
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
910-259-0056	ejchestnutt@yahoo.com	910-259-0056	ejchestnutt@yahoo.com
I prefer to receive notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Email copy of notices	
5. Assistant Treasurer Information		6. Account Information (incl. CRO-3500)	
a. Full Name		a. Financial Institution Full Name	
Susan Croom		First Citizens	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose	
564 Royal Tern Dr Hampstead, NC 28443		receipt and disbursement of donations	
c. Phone Number	d. Email Address	c. Account Code	d. Type
352-2477	tpsailparent@gmail.com		checking
<input checked="" type="checkbox"/> Email copy of notices			
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.			
Betsy Chestnutt		Betsy Chestnutt	
Printed Name of Signer		Signature of Appointed Treasurer	
		9-23-14	
		Date	



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
Fax: (919) 715-8047

Certification of Treasurer

This Certification is used by Candidate Committees to appoint a treasurer to the committee. This form is required and must accompany the Candidate's Statement of Organization

FILED BY:

Candidate Name: Supporters of the Pender County School Board

Treasurer Name: Betsy Chestnutt

Treasurer Address: 1611 Henry Brown Rd
(include city, state, & zip) Burgaw, NC 28425

Treasurer Phone: 910-259-0056

I certify that the above information is correct, and I, as candidate, appoint said treasurer to personally fulfill the duties and responsibilities imposed upon the appointed treasurer and subject to the penalties and sanctions in *Subchapter VIII. Regulation of Election Campaigns* of Chapter 163 of the North Carolina General Statutes.

I understand that if the above Treasurer changes, it will be necessary to certify a new treasurer and amend the existing Statement of Organization within 10 days of the vacancy. I further understand that the above Treasurer is required to receive training by the State Board of Elections within three months of this appointment according to Article 163.278.9(k).

9-23-14
Date Signed

Betsy Chestnutt
Signature of Candidate

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