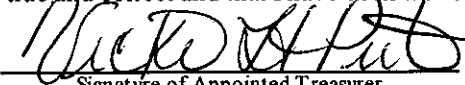


# Disclosure Report Cover

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	
THE COMMITTEE TO ELECT MARGO BILLS				
b. Mailing Address (include City, State and Zip Code)			d. Date Filed	
1813 KEOKUK COURT APEX, NC 27523-5108			10/24/2011	
			e. Phone Number	
			(919) 303-8338	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name	
2011	09/28/2011	10/24/2011	VICKI LH PRITKO	
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 <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund		<b>Municipal</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input checked="" 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		
		<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 type="checkbox"/> Fourth <input type="checkbox"/> 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) <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:		<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		
8. Number of Fundraisers this Report		10. Special Report Name		
1				
3. Account Information		3. Account Information		
a. Financial Institution Full Name		a. Financial Institution Full Name		
COASTAL FEDERAL CREDIT UNION		COASTAL FEDERAL CREDIT UNION		
b. Purpose	c. Account Code	b. Purpose	c. Account Code	
CAMPAIGN FUNDS	1	REQUIRED TO OPEN CHECKING ACCOUNT	2	
	d. Period Begin Balance		d. Period Begin Balance	
	\$ 2389.70		\$ 25.00	
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				
Vicki L.H. Pritko Printed Name of Signer		 Signature of Appointed Treasurer		10/27/2011 Date
FOR OFFICE USE ONLY				
Date Received:	11-21-11	Employee:	JUN	
Date Postmarked:		Employee:		
Date Scanned:		Employee:		
Date Data Entered:		Employee:		
		Delivery Method <input checked="" type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input 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.				

# Aggregated Contributions from Individuals

Optional form used to report NC Contributions From Individuals of \$50 or less

1. Committee Full Name (and Fund if applicable)				2. ID Number	
THE COMMITTEE TO ELECT MARGO BILLS					
3. Contributor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (m m/dd/yyyy)	f. Amount
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		10/03/2011	\$ 30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		10/03/2011	\$ 30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		10/20/2011	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		10/03/2011	\$ 30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		10/17/2011	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		10/01/2011	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		10/01/2011	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Electric Funds Tran		10/13/2011	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		10/05/2011	\$ 35.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		10/03/2011	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Electric Funds Tran		10/03/2011	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		10/03/2011	\$ 30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		10/03/2011	\$ 30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		10/17/2011	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		10/03/2011	\$ 30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		10/03/2011	\$ 30.00
<b>4. Total only this Page</b>				\$	\$645.00
<b>5. Total of ALL CRO-1205 Pages</b> <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>				\$	\$645.00

# 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>
THE COMMITTEE TO ELECT MARGO BILLS						
<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>	
HARVEY MONTAGUE 10305 PENNY ROAD RALEIGH, NC 27606			PRESIDENT/DEVELOPER			
			<b>c. Employer's Name/Specific Field</b>			
			MONTAGUE DEVELOPMENT, LLC		<b>e. Election Sum to Date</b>	
					\$ 250.00	
<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 checked="" type="checkbox"/>	1	Cash		08/04/2011	\$ 50.00	
<input type="checkbox"/>		In-Kind	DONATION OF PROPERTY TO HOLD	10/03/2011	\$ 200.00	
<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>	
TEXANNA MONTAGUE 10305 PENNY ROAD RALEIGH, NC 27607			HOUSEWIFE			
			<b>c. Employer's Name/Specific Field</b>			
					<b>e. Election Sum to Date</b>	
					\$ 250.00	
<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 checked="" type="checkbox"/>	1	Cash		08/04/2011	\$ 50.00	
<input type="checkbox"/>		In-Kind	DONATION OF PROPERTY TO HOLD	10/03/2011	\$ 200.00	
<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>	
HELEN P ROBERTSON CAMERON GLEN DRIVE APEX, NC 27503			TEACHER			
			<b>c. Employer's Name/Specific Field</b>			
			RETIRED		<b>e. Election Sum to Date</b>	
					\$ 105.00	
<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"/>	1	Check		10/03/2011	\$ 30.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 430.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 717.15	

# 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>						<b>2. ID Number</b>
THE COMMITTEE TO ELECT MARGO BILLS						
<b>3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)</b>						
<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 type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
APEX MAIN POST OFFICE 501 W Williams St APEX, NC 27502						
				<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>
						\$ 725.00
<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>	
1	Debit Card	A	10/20/2011	\$ 725.00	STAMPS FOR POSTCARD	
				\$	MAILER	
<b>4. Payee 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. Coordinated Committee Name</b>		<b>d. Comments</b>
BWS. INC. 10305 PENNY ROAD RALEIGH, NC 27606						
				<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>
						\$ 490.50
<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>	
1	Check	C	10/11/2011	\$ 490.50	FOOD FOR FUNDRAISER	
				\$		
<b>4. Payee 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. Coordinated Committee Name</b>		<b>d. Comments</b>
POSTNET 1775 WEST WILLIAMS STREET APEX, NC 27523						
				<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>
						\$ 563.56
<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>	
1	Check	A	10/14/2011	\$ 244.46	POSTCARDS	
				\$		
<b>5. Total only this Page</b>						\$ 1,459.96
<b>6. Total of ALL CRO-1310 Pages</b> (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)						\$ 3,257.39
<b>7. Purpose Codes</b> (List detailed expenditure code in (k) 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)						

# Aggregated Non-Media Expenditures

Optional form used to report NC Non-Media Expenditures of \$50 or less.

1. Committee Full Name (and/or legal name)						2. ID Number
THE COMMITTEE TO ELECT MARGO BILLS						
<b>3. Payee Information</b>						
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Debit Card	O	10/23/2011	\$ 41.23	SNACKS FOR CARD ADDRESSING EVT
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Debit Card	C	09/29/2011	\$ 42.57	PARTY ITEMS FOR FUNDRAISER
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Electric Funds Tran	O	09/29/2011	\$ 3.20	PAYPAL ADMINISTRATIVE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Electric Funds Tran	O	10/03/2011	\$ 1.75	PAYPAL ADMINISTRATIVE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Electric Funds Tran	O	10/13/2011	\$ 1.75	PAYPAL ADMINISTRATIVE
<b>4. Total only this Page</b>					\$	90.50
<b>5. Total of ALL CRO-1315 Pages</b> <i>(This line must be on line 13 of Detailed Summary Page CRO-100)</i>					\$	90.50
<b>6. Purpose Codes (and detailed explanation in required remarks field (g))</b>						
<b>B* - Printing</b>		<b>D - To Another Candidate</b>				
<b>E - Salaries</b>		<b>G - Political Party</b>				
<b>J - Penalties</b>		<b>Q* - Donations to Legal Expense Fund</b>				
<b>O* - Other</b>						
<b>* Codes require detailed explanation in required remarks field (g)</b>						