

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 CAMPAIGN COMMITTEE FOR SHE	c. ID Number
b. Mailing Address (include City, State and Zip Code) 3715 AMISTAD LANE RALEIGH, NC 27610	d. Date Filed 10/03/2011
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> RECEIVED OCT 05 2011 WAKE CO. BOARD OF ELECTIONS </div>	
e. Phone Number 919-264-1548	

2. Report Year 2011	3. Period Start Date (mm/dd/yy) 08/31/10	4. Period End Date (mm/dd/yy) 09/27/11	5. Treasurer Full Name Stephanie D. Barbee
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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	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 checked="" type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
		Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
		<input type="checkbox"/> Mid Year	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 0				

II. Account Information		II. Account Information	
a. Financial Institution Full Name SUNTRUST	a. Financial Institution Full Name	b. Purpose CAMPAIGN FUND	b. Purpose
c. Account Code 5J	c. Account Code	d. Period Begin Balance \$ 110.06	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.

Stephanie D. Barbee Stephanie D. Barbee 10/1/2011
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: <u>10-5-11</u>	Employee: <u>AMC</u>	Delivery Method <input checked="" 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
Date Postmarked: <u>10-3-11</u>	Employee: <u>AMC</u>	
Date Scanned: _____	Employee: _____	
Date Data Entered: _____	Employee: _____	

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
CAMPAIGN COMMITTEE FOR SHELIA JONES	ORGANIZATION	
Start of Election Cycle: January 1, <u>2011</u>	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	\$ 110.06	\$ 0
RECEIPTS		
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 112.00	\$ 308.06
6) Contributions from Individuals (CRO-1210)	\$ 3724.62	\$ 4770.51
7) Contributions from Political Party Committees (CRO-1220)	\$	\$
8) Contributions from Other Political Committees (CRO-1230)	\$	\$
9) Loan Proceeds (CRO-1410)	\$	\$
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)	\$ 300.00	\$ 600.00
11c) Outside Sources of Income (CRO-1250)	\$	\$
11d) Legal Expense Fund - Other Sources (CRO-1270)	\$	\$
11e) Exempt Purchase Price Sales (CRO-1265)	\$ 4136.62	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$ 4136.62	\$ 5678.57
EXPENDITURES		
13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$	\$ 94.94
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)	\$ 3724.62	\$ 5061.57
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 3724.62	\$ 5156.51
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 522.06	\$ 522.06
ADDITIONAL INFORMATION		
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)	\$	
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-2220)	\$	\$
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

1. Committee Full Name (and Fund if applicable)						2. ID Number
CAMPAIGN COMMITTEE FOR SHELIA JONES						
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
Stephanie Barbee 3715 Amistad Lane Raleigh, NC 27610				Volunteer		
				c. Employer's Name/Specific Field		
				JT Locke Resource Center Inc		e. Election Sum to Date
						\$ 27.15
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	SJ	IN-KIND	LABELS	09/01/2011	\$ 10.08	
<input type="checkbox"/>	SJ	IN-KIND	LABELS	09/10/11	\$ 14.93	
<input type="checkbox"/>	SJ	IN-KIND			\$	
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
Gina Dean 1107 Pettis Place Raleigh, NC 27610				Trainer		
				c. Employer's Name/Specific Field		
				NC Department of Transportation		e. Election Sum to Date
						\$ 206.48
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	SJ	IN-KIND	CAMPAIGN BUTTONS	09/06/2011	\$ 206.48	
<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
Pence Bethea 3715 Amistad Lane Raleigh, NC 27610				Admin. Asst.		
				c. Employer's Name/Specific Field		
				NC Department of Health		e. Election Sum to Date
						\$ 146.30
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	SJ	IN-KIND	CAMPAIGN MAGNET SIGNS	09/13/2011	\$ 106.75	
<input type="checkbox"/>	SJ	IN-KIND	CAMPAIGN HAT	09/15/2011	\$ 26.69	
<input type="checkbox"/>					\$	
4. Total only this Page						\$ 364.93
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>						\$ 3724.62

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
CAMPAIGN COMMITTEE FOR SHELIA JONES						
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
Shelia Jones 3715 Amistad Lane Raleigh, NC 27610				Candidate/Pastor		
				c. Employer's Name/Specific Field		
				True Christian Ministries		
						e. Election Sum to Date
						\$ 465.36
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	SJ	IN-KIND	LABELS	09/09/2011	\$ 27.09	
<input type="checkbox"/>	SJ	IN-KIND	POST-CARDS	09/11/2011	\$ 41.60	
<input type="checkbox"/>	SJ	IN-KIND	Parking Fee/Mtg w/ Bob	09/12/2011	\$ 2.00	
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
Rose Lucas 801-E Woodcroft Parkway Durham, NC 27713				Promoter		
				c. Employer's Name/Specific Field		
				Show Stoppaz		
						e. Election Sum to Date
						\$ 600.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	SJ	IN-KIND	CARD FLYERS	09/17/2011	\$ 300.00	
<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
Shelia Jones 3715 Amistad Lane Raleigh, NC 27610				Candidate/Pastor		
				c. Employer's Name/Specific Field		
				True Christian Ministries		
						e. Election Sum to Date
						\$ 465.36
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	SJ	IN-KIND	Card Flyers by Raleigh Pr.	09/13/2011	\$ 165.46	
<input type="checkbox"/>	SJ	IN-KIND	Card Flyers	09/20/2011	\$ 165.46	
<input type="checkbox"/>					\$	
4. Total only this Page						\$ 701.61
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>						\$

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
CAMPAIGN COMMITTEE FOR SHELIA JONES						
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
Gloria Pierce 2709 Bethune Drive Raleigh, NC 27603				Retired		
				c. Employer's Name/Specific Field		
				Private Duty Nursing		e. Election Sum to Date
						\$ 1329.04
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	SJ	IN-KIND	YARD SIGNS	09/07/2011	\$ 1329.04	
<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
Marsellers Pierce 2709 Bethune Drive Raleigh, NC 27603				Retired		
				c. Employer's Name/Specific Field		
				Mechanic Gregory Poole		e. Election Sum to Date
						\$ 1329.04
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	SJ	IN-KIND	YARD SIGNS	09/13/2011	\$ 1329.04	
<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
				c. Employer's Name/Specific Field		
						e. Election Sum to Date
						\$
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page						\$ 2658.08
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$

In-Kind Contributions

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.
 Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number
CAMPAIGN COMMITTEE FOR SHELIA JONES		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Shelia Jones 3715 Amistad Lane Raleigh, NC 27610	<input type="checkbox"/> Individual <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		d. Election Sum to Date
		\$ 465.36
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Labels for Card Flyers	09/09/2011	\$ 27.09
Post-Cards for Flyers	09/11/2011	\$ 41.60
Parking Fee for meeting w/BOE	09/12/2011	\$ 2.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Shelia Jones 3715 Amistad Lane Raleigh, NC 27610	<input type="checkbox"/> Individual <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		d. Election Sum to Date
		\$ 465.36
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Post Cards by Raleigh Printing	09/13/2011	\$ 165.46
Post Cards by Raleigh Printing	09/20/2011	\$ 165.46
		\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Rose Lucas 801-E Woodcroft Parkway Durham, NC 27713	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		d. Election Sum to Date
		\$ 600.00
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Card Flyers	09/17/2011	\$ 300.00
		\$
		\$
4. Total only this Page		\$ 701.61
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 3724.62

In-Kind Contributions

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.
Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
CAMPAIGN COMMITTEE FOR SHELIA JONES			
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
Gloria Pierce 2709 Bethune Drive Raleigh, NC 27603		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$ 1329.04	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
YARD SIGNS-CAMPAIGN and stand		09/07/2011	\$ 1329.04
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
Stephanie Barbee 3715 Amistad Lane Raleigh, NC 27610		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$ 27.15	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Labels for Flyers		09/01/2011	\$ 10.08
Labels for Flyers		09/10/2011	\$ 14.93
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
Gina Dean 1107 Pettis Place Raleigh, NC 27610		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$ 206.48	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
CAMPAIGN BUTTONS		09/06/2011	\$ 206.48
			\$
			\$
4. Total only this Page			\$ 1560.53
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)			\$