

# 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 JIM MARTIN 4 SCHOOLS	c. ID Number
b. Mailing Address (include City, State and Zip Code) JAMES D. MARTIN 8613 CAVATINA COURT APEX, NC 27539	d. Date Filed 01/25/2012
	e. Phone Number (919) 362-5399

Received

JAN 30 2012

Wake County  
Board of Elections

2. Report Year 2011	3. Period Start Date (m m/dd/yy) 09/27/2011	4. Period End Date (m m/dd/yy) 12/31/2011	5. Treasurer Full Name CYNTHIA S THOMAS
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<b>6. Type of Committee (Check One)</b> <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>9. Type of Report (check only one type of report from one category)</b> <table style="width:100%;"> <tr> <th style="width:33%;">Municipal</th> <th style="width:33%;">State/County</th> <th style="width:33%;">Referendum</th> </tr> <tr> <td><input type="checkbox"/> Organizational</td> <td><input type="checkbox"/> Organizational</td> <td><input type="checkbox"/> Organizational</td> </tr> <tr> <td><input type="checkbox"/> Thirty-five day</td> <td><input type="checkbox"/> Quarterly</td> <td><input type="checkbox"/> Pre-referendum</td> </tr> <tr> <td><input type="checkbox"/> Pre-primary</td> <td><input type="checkbox"/> First</td> <td><input type="checkbox"/> Final</td> </tr> <tr> <td><input type="checkbox"/> Pre-election</td> <td><input type="checkbox"/> Second</td> <td><input type="checkbox"/> Supplemental Final</td> </tr> <tr> <td><input type="checkbox"/> Pre-runoff</td> <td><input type="checkbox"/> Third</td> <td><input type="checkbox"/> Annual</td> </tr> <tr> <td><input type="checkbox"/> Semi-annual</td> <td><input type="checkbox"/> Fourth</td> <td><input type="checkbox"/> Special</td> </tr> <tr> <td><input type="checkbox"/> Mid Year</td> <td><input type="checkbox"/> Semi-annual</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Year End</td> <td><input type="checkbox"/> Mid Year</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Final</td> <td><input type="checkbox"/> Year End</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Special</td> <td><input type="checkbox"/> Final</td> <td></td> </tr> <tr> <td></td> <td><input type="checkbox"/> Special</td> <td></td> </tr> </table>	Municipal	State/County	Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum	<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 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 type="checkbox"/> Final			<input type="checkbox"/> Special	
Municipal	State/County	Referendum																																			
<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational																																			
<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum																																			
<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 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 type="checkbox"/> Final																																				
	<input type="checkbox"/> Special																																				
<b>7. Type of Fund (if applicable, check one)</b> <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>10. Special Report Name</b> YEAR END																																			
<b>8. Number of Fundraisers this Report</b> 0																																					

<b>3. Account Information</b>		<b>3. Account Information</b>	
a. Financial Institution Full Name WACHOVA		a. Financial Institution Full Name	
b. Purpose JIM 4 SCHOOLS CAMPAIGN	c. Account Code 002	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 19,787.51		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

Cynthia S. Thomas                      Cynthia S. Thomas                      01/25/2012  
 Printed Name of Signer                      Signature of Appointed Treasurer                      Date

**FOR OFFICE USE ONLY**

Date Received: 1-30-12                      Employee: AMC

Date Postmarked: 1-27-12                      Employee: AMC

Date Scanned: \_\_\_\_\_                      Employee: \_\_\_\_\_

Date Data Entered: \_\_\_\_\_                      Employee: \_\_\_\_\_

**Delivery Method**  
 Normal Mail  
 Registered Mail  
 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	
JIM MARTIN 4 SCHOOLS	2011 Special		
<b>Start of Election Cycle: January 1, 2011</b>		<b>Total this Reporting Period</b>	<b>Total this Election Cycle</b>
4) Cash on Hand at Start		\$ 19,787.51	\$ 0.00
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 445.00	\$ 445.00
6) Contributions from Individuals (CRO-1210)		\$ 5,046.54	\$ 5,046.54
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00	\$ 0.00
8) Contributions from Other Political Committees (CRO-1230)		\$ 0.00	\$ 0.00
9) Loan Proceeds (CRO-1410)		\$ 0.00	\$ 0.00
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$ 0.00	\$ 0.00
11) Other Receipt Sources			
11a) Interest on Bank Accounts (CRO-1250)		\$ 0.00	\$ 0.00
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$ 0.00	\$ 0.00
11c) Outside Sources of Income (CRO-1250)		\$ 50.00	\$ 50.00
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$ 0.00	\$ 0.00
11e) Exempt Purchase Price Sales (CRO-1265)		\$ 0.00	\$ 0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		\$ 5,541.54	\$ 5,541.54
<b>EXPENDITURES</b>			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$ 12,886.15	\$ 12,886.15
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$ 1,750.00	\$ 1,750.00
13c) Coordinated Party Expenditures (CRO-1310)		\$ 0.00	\$ 0.00
14) Aggregated Non-Media Expenditures (CRO-1315)		\$ 157.55	\$ 157.55
15) Loan Repayments (CRO-1420)		\$ 0.00	\$ 0.00
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$ 0.00	\$ 0.00
17) In-Kind Contributions (CRO-1510)		\$ 4,191.54	\$ 4,191.54
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 18,985.24	\$ 18,985.24
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 6,343.81	\$ (13,443.70)
<b>ADDITIONAL INFORMATION</b>			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 0.00	
22) Debts and Obligations owed by the Committee (CRO-1610)		\$ 0.00	
23) Debts and Obligations owed to the Committee (CRO-1620)		\$ 0.00	
24) Account Transfers Within the Committee (CRO-1720)		\$ 0.00	
25) Administrative Support (CRO-1710)		\$ 0.00	\$ 0.00
26) Forgiven Loans (CRO-1440)		\$ 0.00	\$ 0.00
27) 48-Hour Notice Reports Sum (CRO-2220)		\$ 0.00	\$ 0.00
28) Contributions to be Refunded (CRO-1215)		\$ 0.00	\$ 0.00

# Aggregated Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

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

1. Committee Name (and fund, if applicable)						2. CRO Number
JIM MARTIN 4 SCHOOLS						
3. Contribution Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	002	Electronic Funds Tra		10/04/2011	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	002	Check		09/30/2011	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	002	Electronic Funds Tra		09/27/2011	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	002	Electronic Funds Tra		09/27/2011	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	002	Electronic Funds Tra		09/27/2011	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	002	Electronic Funds Tra		10/10/2011	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	002	Check		10/02/2011	\$	15.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	002	Electronic Funds Tra		09/30/2011	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	002	Check		09/27/2011	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	002	Check		10/01/2011	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	002	Electronic Funds Tra		10/10/2011	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	002	In Kind	SUPPLIES, AND FOOD FOR MEET AND	09/27/2011	\$	45.00
<b>4. Total only this Page</b>					\$	\$445.00
<b>5. Total of ALL CRO-1205 Pages</b>					\$	\$445.00
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Contributor Name (and Email if available)						ID Number
JIM MARTIN 4 SCHOOLS						
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	
M JACKSON NICHOLS 2501 KENMORE DRIVE RALEIGH, NC 27608				LAWYER		
				c. Employer's Name/Specific Field		
				SELF		
				e. Election Sum to Date		
				\$ 250.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	002	Check		10/02/2011	\$ 250.00	
<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	
THOMAS SAYER 311-200 W MARTIN STREET RALEIGH, NC 27601				ARTIST		
				c. Employer's Name/Specific Field		
				CLEARSCAPES		
				e. Election Sum to Date		
				\$ 4,000.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	002	In Kind	1.5 MONTH LEASE OF 302 W. MARTIN FOR	09/30/2011	\$ 4,000.00	
<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	
PERRY WOODS 1005 HARP STREET RALEIGH, NC 27610				PRINTER		
				c. Employer's Name/Specific Field		
				SELF		
				e. Election Sum to Date		
				\$ 146.54		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	002	In Kind	PRINTING COSTS FOR EXTRA PIECES IN	10/07/2011	\$ 146.54	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page						\$ 4,396.54
5. Total of ALL CRO-1210 Pages <i>(This line must be on the 6th of Duplicated Summary Page CRO-1210)</i>						\$ 5,046.54

# 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 Roll Number if applicable)		2. ID Number			
JIM MARTIN 4 SCHOOLS					
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		
MARY C HANNAH 2925 WHITEHART LANE RALEIGH, NC 27606		PHYSICAL THERAPIST			
		c. Employer's Name/Specific Field			
		SELF - RETIRED ARMY			
		e. Election Sum to Date			
		\$ 100.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	002	Check		09/28/2011	\$ 100.00
<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		
SHERRY B MAC QUEEN 6825 PENNY ROAD RALEIGH, NC 27606		CIVIL ENGINEER			
		c. Employer's Name/Specific Field			
		RETIRED			
		e. Election Sum to Date			
		\$ 100.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	002	Check		09/27/2011	\$ 100.00
<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		
DAVID ZONDERMAN 104 S. FERN ABBEY LANE CARY, NC 27518		PROFESSOR			
		c. Employer's Name/Specific Field			
		NCSU			
		e. Election Sum to Date			
		\$ 100.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	002	Check		09/27/2011	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 300.00
5. Total of ALL CRO-1210 Pages (This line must be on the 6 of Detailed Summary Page CRO-1210)					\$ 5,046.54

# Contributions from Individuals

Pg 3 of 3

Amendment

Yes  No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

Contributor Information						Election Sum to Date	
JIM MARTIN 4 SCHOOLS							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)						<b>b. Job Title/Profession</b>	
JOSEPH STALLINGS 424 WAYFIELD LANE CARY, NC 27518						ATTORNEY	
						<b>c. Employer's Name/Specific Field</b>	
						HOWARD STALLINGS FROM & HURTSON	
						<b>e. Election Sum to Date</b>	
						\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	002	Check		10/01/2011	\$ 250.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
Contributor Information						Election Sum to Date	
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)						<b>b. Job Title/Profession</b>	
REID WILSON 3303 CLARK AVENUE RALEIGH, NC 27607						EXECUTIVE DIRECTOR	
						<b>c. Employer's Name/Specific Field</b>	
						CONSERVATION TRUST FOR NC	
						<b>e. Election Sum to Date</b>	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	002	Electronic Funds Tra		10/06/2011	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$ 350.00	
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must appear on Detailed Summary Page CRO-1210)</i>						\$ 5,046.54	

# Other Receipt Sources

Amendment  
 Yes  No

Use this form to report income not reported on another form. i.e. interest income, not for profit contributions etc.

1. Committee Name (or Candidate Name)					2. Name	
JIM MARTIN 4 SCHOOLS						
3. Type of Receipt Source (Check one) <i>(Receipts from CROs or PBOs must be reported on a Receipt Source)</i>						
<input type="checkbox"/> Interest <input type="checkbox"/> Contributions from Not-for-Profit Organizations <input checked="" type="checkbox"/> Outside Sources of Income						
4. Contribution Information						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Not-for-Profit Federal ID #	d. Comments	
WAKE COUNTY PARKS PO BOX 550 RALEIGH, NC 27602 (919) 856-6170						
				c. Outside Source Explanation		
				e. Election Sum to Date		
				\$ 50.00		
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount		
002	Check		10/06/2011	\$ 50.00		
				\$		
5. Total only this page					\$ 50.00	
6. Total of All CROs (250 Page)					\$ 50.00	
<i>(This line is only to be completed if you are a CRO or PBO filer.)          (This line goes in the TD of Detailed Summary Page CRO-1000) <i>(Not for Profit Contribution)</i>          (This line goes in the TD of Detailed Summary Page CRO-1000) <i>(Outside Sources of Income)</i> </i>						

# Disbursements

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

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 (Candidate/Political)						2. ID Number	
JIM MARTIN 4 SCHOOLS							
3. Type of Disbursement (Please use general CRO-1100 Manual for a full list of Disbursement Types)							
<input type="checkbox"/> Operating Expenses		<input checked="" type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures			
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	
COMMITTEE TO ELECT KEITH SUTTON PO BOX 410.46 RALEIGH, NC 27629							
				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:			
Wake						\$ 1,650.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
002	Check	D	10/03/2011	\$ 1,650.00			
				\$			
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	
ED RIDPATH FOR FUQUAY VARINA 313 SOUTH FUQUAY AVE FUQUAY VARINA, NC 27526							
				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:			
Fairview						\$ 100.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
002	Check	D	11/04/2011	\$ 100.00			
				\$			
5. Total only this Page						\$ 1,750.00	
6. Total of ALL CRO-1100 Pages (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)						\$ 1,750.00	
7. Purpose Codes (List detailed expenditure code in (j) 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)							

# 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) (Candidate/Political Committee)						ID Number
JIM MARTIN 4 SCHOOLS						
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of disbursement)						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
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
JAMES MARTIN 8613 CAVATINA COURT APEX, NC 27539						
				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:		\$ 1,013.39
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
002	Check	K	10/29/2011	\$ 1,013.39	MISC EXPENSES	
				\$	INTERNET ACCESS,	
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
JAMES D "JIM" MARTIN 8613 CAVATINA COURT APEX, NC 27539						
				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:		\$ 851.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
002	Check	K	12/14/2011	\$ 851.00	TELEPHONES CELL AND	
				\$	LAND, WEB	
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
PERRY WOODS 1005 HARP STREET RALEIGH, NC 27610						
				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:		\$ 9,830.98
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
002	Check	I	10/03/2011	\$ 3,035.44		
				\$		
5. Total only this Page						\$ 4,899.83
6. Total of ALL CRO-1310 Pages (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)						\$ 12,886.15
7. Purpose Codes (List detailed expenditure code in (j) 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)						

# Disbursements

Amendment  
 Yes  No

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 Board/Committee)						2. ID Number
JIM MARTIN 4 SCHOOLS						
3. Type of Disbursement (Please use separate CRO-1310 for each type of disbursement)						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
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	
LINDA MARTIN 8613 CAVATINA CT APEX, NC 27539			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:			
					\$ 914.50	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
002	Check	IKO	10/29/2011	\$ 914.50	REINBURSEMENT OF MISC EXPENDITURES,	
				\$		
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	
PERRY WOODS 1005 HARP STREET RALEIGH, NC 27610			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:			
					\$ 299.86	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
002	Check	BI	10/13/2011	\$ 299.86	INVOICE JIM 1106 10/12/11	
002	Check	BI	09/29/2011	\$ 2,316.52	INV JIM1104	
				\$		
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	
PERRY WOODS 1005 HARP STREET RALEIGH, NC 27610			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:			
					\$ 4,383.52	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
002	Check	BI	09/29/2011	\$ 2,067.00	INVOICE JIM 1106	
				\$		
5. Total only this Page						\$ 5,597.88
6. Total of ALL CRO-1310 Pages						\$ 12,886.15
(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)						
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)						

# 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. CRO Number
JIM MARTIN 4 SCHOOLS						
3. Type of Disbursement (Check one) (CRO-1100, CRO-1101, CRO-1102, CRO-1103, CRO-1104, CRO-1105, CRO-1106, CRO-1107, CRO-1108, CRO-1109, CRO-1110)						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
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	
INDEPENDENT WEEKLY PO BOX 2690 DURHAM, NC 27715						
			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:			
					\$ 415.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
002	Debit Card	A	10/04/2011	\$ 415.00	1/8 PAGE DISPLAY AD	
				\$		
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	
STAPLES 404 E. SIX FORKS ROAD RALEIGH, NC 27609						
			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:			
					\$ 66.14	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
002	Debit Card	K	11/05/2011	\$ 66.14	ITEMS FOR ELECTED OFFICE	
				\$		
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	
TECNICIAN NCSU 323 WITHERSPOON, PO BOX 7318 RALEIGH, NC 27695						
			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:			
					\$ 628.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
002	Debit Card	K	10/26/2011	\$ 628.00	ADVERTISING	
				\$		
5. Total only this Page					\$ 1,109.14	
6. Total of ALL CRO-1100 Pages (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)					\$ 12,886.15	
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)						

# Disbursements

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

Committee Full Name (and Fund if applicable)						Page Number
JIM MARTIN 4 SCHOOLS						
Type of Disbursement (Please check appropriate CRO-1100 Use only one type of disbursement)						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
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	
DEEJAY'S 704 BEACON LAKE DRIVE RALEIGH, NC 27610			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:			
					\$ 304.30	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
002	Debit Card	F	10/06/2011	\$ 304.30	INV 18088 10/9/11	
				\$		
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	
N&O PUBLISHING 215 S. MC DOWELL STREET PO BOX 191 RALEIGH, NC 27601			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:			
					\$ 875.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
002	Debit Card	A	10/07/2011	\$ 875.00	ADVERTIZING	
				\$		
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	
PREMIER POLITICAL 4616 FRESSENDEN STREET NW WASHINGTON, DC 20016			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:			
					\$ 100.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
002	Debit Card	K	10/07/2011	\$ 100.00	DATABASE	
				\$		
5. Total only this Page						\$ 1,279.30
6. Total of ALL CRO-1100 Pages						\$ 12,886.15
(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)						
7. Purpose Codes (List detailed expenditure code in (k) if any)						
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

<b>Amendment</b>	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

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

JIM MARTIN 4 SCHOOLS															
Candidate Information															
Line	Account Number	Payment Method	Payment Type	Payment Date	Amount	Description									
<input type="checkbox"/> Add <input type="checkbox"/> Remove	002	Check	O	12/14/2011	\$ 35.18	FOOD FOR ELECTION NIGHT									
<input type="checkbox"/> Add <input type="checkbox"/> Remove	002	Check	O	10/13/2011	\$ 46.00	REFRESHMENTS FOR NC STATE ROCK THE									
<input type="checkbox"/> Add <input type="checkbox"/> Remove	002	Check	O	10/10/2011	\$ 33.36	REFERSHMENTS ELECTION DAY									
<input type="checkbox"/> Add <input type="checkbox"/> Remove	002	Electronic Funds Tra	O	10/31/2011	\$ 14.01	BANK FEES									
<input type="checkbox"/> Add <input type="checkbox"/> Remove	002	Electronic Funds Tra	O	10/12/2011	\$ 12.00	BANK FEES									
<input type="checkbox"/> Add <input type="checkbox"/> Remove	002	Check	O	10/03/2011	\$ 17.00	LUNCHEON									
4 Total on this Page					\$	157.55									
5 Total on ALL PAGES					\$	157.55									
<table border="0"> <tr> <td><b>B* - Printing</b></td> <td><b>D - To Another Candidate</b></td> </tr> <tr> <td><b>E - Salaries</b></td> <td><b>G - Political Party</b></td> </tr> <tr> <td><b>J - Penalties</b></td> <td><b>Q* - Donations to Legal Expense Fund</b></td> </tr> <tr> <td><b>O* - Other</b></td> <td></td> </tr> </table>								<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>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>															
* Codes require detailed explanation in required remarks field (g)															

# 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. Contributor Name (and fund, if applicable)		ID Number
JIM MARTIN 4 SCHOOLS		
2. 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
	<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
		\$ 45.00
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
SUPPLIES, AND FOOD FOR MEET AND GREET ON 9/27 AT SHERRY MACQUEENS HOME	09/27/2011	\$ 45.00
		\$
		\$
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
THOMAS SAYER 311-200 W MARTIN STREET RALEIGH, NC 27601	<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
		\$ 4,000.00
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
1.5 MONTH LEASE OF 302 W. MARTIN FOR CAMPAIGN OFFICE	09/30/2011	\$ 4,000.00
		\$
		\$
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
PERRY WOODS 1005 HARP STREET 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	
		d. Election Sum to Date
		\$ 146.54
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
PRINTING COSTS FOR EXTRA PIECES IN MAILER #3	10/07/2011	\$ 146.54
		\$
		\$
4. Total only this Page		\$ 4,191.54
5. Total of ALL CRO-1510 Pages <i>(This line may be on the 1<sup>st</sup> of Detailed Summary Page CRO-1510)</i>		\$ 4,191.54