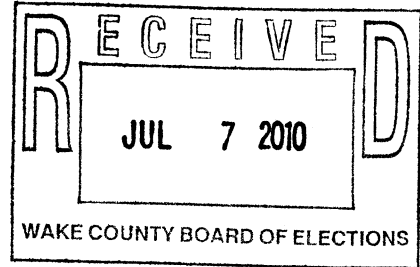




North Carolina  
State Board of Elections  
506 N Harrington Street  
Raleigh, NC 27603



Kimberly Westbrook-Strach  
Deputy Director – Campaign Reporting

Mailing Address  
PO Box 27255  
Raleigh, NC 27611-7255  
(919) 733-7173  
Fax: (919) 715-8047

**Certification to Close Committee**

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

**FILED BY:**

Committee Name: The Committee to Re-elect Jennifer Robinson  
 Treasurer Name: Phyllis K. Bryson  
 Treasurer Address: 12925 Baybriar Drive  
 (include city, state, & zip) Raleigh, NC 27613-5757  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Treasurer Phone: 919-665-0685

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.

07/07/2010  
Date Signed

Phyllis K. Bryson  
Signature

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



# 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	
THE COMMITTEE TO RE-ELECT JENNIFER ROBINSON		SEMI-ANNUAL MID YEAR			
Start of Election Cycle: <b>January 1,</b>		<b>2006</b>		Total this Reporting Period	
4) Cash on Hand at Start		\$ 1203.05		\$ 4111.06	
5) Aggregated Contributions from Individuals		(CRO-1205) \$		\$ 853.67	
6) Contributions from Individuals		(CRO-1210) \$		\$ 21434.35	
7) Contributions from Political Party Committees		(CRO-1220) \$		\$ 900.00	
8) Contributions from Other Political Committees		(CRO-1230) \$		\$ 7500.00	
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) \$		\$	
11c) Outside Sources of Income		(CRO-1250) \$		\$	
11d) Legal Expense Fund – Other Sources		(CRO-1270) \$		\$	
11 e) Exempt Purchase Price Sales		(CRO-1265) \$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$		\$ 30688.02	
13) Disbursements					
13a) Operating Expenditures		(CRO-1310) \$		\$ 12171.93	
13b) Contributions to Candidates/Political Committees		(CRO-1310) \$		\$ 555.00	
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) \$ 1203.05		\$ 10174.13	
17) In-Kind Contributions		(CRO-1510) \$		\$ 11898.02	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 1203.05		\$ 34799.08	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 0.00		\$ 0.00	
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-2200) \$		\$	
28) Contributions to be Refunded		(CRO-1215) \$		\$	

# Refunds/Reimbursements From the Committee

Use this form to report refunds/reimbursements, including contributions returned to the contributor.

<b>1. Committee Full Name (and Fund if applicable)</b>			<b>2. ID Number</b>	
THE COMMITTEE TO RE-ELECT JENNIFER ROBINSON				
<b>3. 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>d. Type of Committee</b>		<b>h. Original Receipt Date</b>
JENNIFER ROBINSON 106 CHERTSEY COURT CARY, NC 27519 919-461-2342		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		11/30/2009
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		<b>e. Level Registered (Specify)</b>		<b>i. Original Receipt Amount</b>
<input type="checkbox"/> Federal <input type="checkbox"/> County:		\$ 873.89		
<input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:				
<b>f. Purpose Code</b>		<b>j. Election Sum to Date</b>		
P		\$ 9630.25		
<b>b. Job Title/Profession</b>	<b>c. Employer's Name/Specific Field</b>	<b>g. Comments</b>		<b>k. Account Code</b>
STAY AT HOME MOM				A
<b>l. Form of Payment</b>	<b>m. Required Remarks</b>	<b>n. Date (mm/dd/yyyy)</b>	<b>o. Amount</b>	
CHECK	MOBILE PHONE SERVICE	05/01/2010	\$ 873.89	
<b>3. 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>d. Type of Committee</b>		<b>h. Original Receipt Date</b>
MICHELLE MUIR 1423 DEBRA DRIVE CARY, NC 27511 919-272-5416		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		10/30/2009
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		<b>e. Level Registered (Specify)</b>		<b>i. Original Receipt Amount</b>
<input type="checkbox"/> Federal <input type="checkbox"/> County:		\$ 360.00		
<input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:				
<b>f. Purpose Code</b>		<b>j. Election Sum to Date</b>		
P		\$ 329.16		
<b>b. Job Title/Profession</b>	<b>c. Employer's Name/Specific Field</b>	<b>g. Comments</b>		<b>k. Account Code</b>
COMMUNICATIONS CONSULTANT	SELF EMPLOYED			A
<b>l. Form of Payment</b>	<b>m. Required Remarks</b>	<b>n. Date (mm/dd/yyyy)</b>	<b>o. Amount</b>	
CHECK	MAILERS, GRAPHIC DESIGN	05/01/2010	\$ 329.16	
<b>3. 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>d. Type of Committee</b>		<b>h. Original Receipt Date</b>
		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		<b>e. Level Registered (Specify)</b>		<b>i. Original Receipt Amount</b>
<input type="checkbox"/> Federal <input type="checkbox"/> County:		\$		
<input type="checkbox"/> State <input type="checkbox"/> Municipality:				
<b>f. Purpose Code</b>		<b>j. Election Sum to Date</b>		
		\$		
<b>b. Job Title/Profession</b>	<b>c. Employer's Name/Specific Field</b>	<b>g. Comments</b>		<b>k. Account Code</b>
<b>l. Form of Payment</b>	<b>m. Required Remarks</b>	<b>n. Date (mm/dd/yyyy)</b>	<b>o. Amount</b>	
			\$	
<b>4. Total only this Page</b>				\$ 1203.05
<b>5. Total of ALL CRO-1320 Pages (This line must be on line 16 of Detailed Summary Page CRO-1100)</b>				\$ 1203.05
L - Returned to Contributor      M - Overpayment for Service      N - Exceeded Contribution Limit P* - Reimbursement of In-Kind      O* Other				
* Codes require detailed explanation in required remarks field (m)				