

# Disclosure Report Cover

Received

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

NOV 7 2011

1. Committee Information			
a. Full Name <i>Wake County Board of Elections</i>		c. ID Number	
Committee to Elect Sherry Ward			
b. Mailing Address (include City, State and Zip Code) 8816 Cochran Court Wake Forest, NC 27587		d. Date Filed <i>11/7/11</i>	
		e. Phone Number 919-761-9469	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2011	<i>09/27/2011</i>	<i>10/31/11</i>	Sherry Ward
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"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> Legal Expense Fund		<b>Municipal</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input checked="" 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	
7. Type of Fund (if applicable, check one)		<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	
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building 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 <i>0</i>		10. Special Report Name	
11. Account Information		11. Account Information	
a. Financial Institution Full Name Wachovia		a. Financial Institution Full Name	
b. Purpose Campaign	c. Account Code #1	b. Purpose	c. Account Code
	d. Period Begin Balance \$ <i>342.44</i>		d. Period Begin Balance \$
<b>CERTIFICATION</b>			
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.			
Sherry D. Ward Printed Name of Signer		<i>Sherry D. Ward</i> Signature of Appointed Treasurer	<i>11/7/11</i> Date
FOR OFFICE USE ONLY			
Date Received:	<i>11-7-11</i>	Employee:	<i>JUM</i>
Date Postmarked:	_____	Employee:	_____
Date Scanned:	_____	Employee:	_____
Date Data Entered:	_____	Employee:	_____
		<b>Delivery Method</b> <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.

# Detailed Summary

Amendment  
 Yes  No

Use this form to summarize all disclosure reporting forms and to total monetary information

**Received**  
 NOV 2011

1. Committee Full Name (and Fund if applicable) <i>Committee to Elect Sherry Ward</i>		2. Type of Report <i>pre-election</i>		3. ID Number <i>NOV 2011</i>	
Start of Election Cycle: <i>January 1, 2011</i>		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ <i>342.44</i>		\$ <i>2332.00</i>	
<b>RECEIPTS</b>					
5) Aggregated Contributions from Individuals (CRO-1205)		\$		\$	
6) Contributions from Individuals (CRO-1210)		\$ <i>1535.00</i>		\$ <i>2132.00</i>	
7) Contributions from Political Party Committees (CRO-1220)		\$		\$	
8) Contributions from Other Political Committees (CRO-1230)		\$ <i>0</i>		\$ <i>200.00</i>	
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)		\$		\$	
11e) Exempt Purchase Price Sales (CRO-1265)		\$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		\$		\$	
<b>EXPENDITURES</b>					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ <i>1767.00</i>		\$ <i>2221.56</i>	
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)		\$		\$	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$		\$	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ <i>110.44</i>		\$ <i>110.44</i>	
<b>ADDITIONAL INFORMATION</b>					
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)		\$		\$	

# Disbursements

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

Received

NOV 7 2011

<b>1. Committee Full Name (and Fund if applicable)</b> Committee to Elect Sherry Ward	<b>2. ID Number</b>
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<b>3. Type of Disbursement</b> (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**  Add  Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Lasting Printing + Graphics 2803 Industrial Drive Raleigh NC 27609		<b>b. Coordinated Committee Name</b>	<b>d. Comments</b>
		<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:	<b>e. Election Sum to Date</b> \$427.00
<b>f. Account Code</b> #1	<b>g. Form of Payment</b> check	<b>h. Purpose Code</b> B	<b>i. Date (mm/dd/yyyy)</b> 10/3/11
			<b>j. Amount</b> \$427.00
			<b>k. Required Remarks</b> mailer printing

**4. Payee Information**  Add  Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) A.G.E. Graphics 52231 State Route 248 Long Bottom OH 45743		<b>b. Coordinated Committee Name</b>	<b>d. Comments</b>
		<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:	<b>e. Election Sum to Date</b> \$335.00
<b>f. Account Code</b> #1	<b>g. Form of Payment</b> debit	<b>h. Purpose Code</b> B	<b>i. Date (mm/dd/yyyy)</b> 10/3/11
			<b>j. Amount</b> \$335.00
			<b>k. Required Remarks</b> lawn signs

**4. Payee Information**  Add  Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Franklin County Board of Elections		<b>b. Coordinated Committee Name</b>	<b>d. Comments</b>
		<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:	<b>e. Election Sum to Date</b> \$5.00
<b>f. Account Code</b> #1	<b>g. Form of Payment</b> cash	<b>h. Purpose Code</b> O	<b>i. Date (mm/dd/yyyy)</b>
			<b>j. Amount</b> \$5.00
			<b>k. Required Remarks</b> walking list cd

**5. Total only this Page** \$ 767.00

**6. Total of ALL CRO-1310 Pages** \$ 1767.00  
 (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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
Committee to Elect Sherry Ward							
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<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 checked="" 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>	
Capital City Mail Service 2660-124 Discovery Dr. Raleigh, NC 27616							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$ 1000.00	
<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	checks	I	10/21/11	\$ 1000.00	mailing of pulv card		
				\$			
<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>	
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
<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>		
				\$			
				\$			
<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>	
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
<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>		
				\$			
				\$			
<b>5. Total only this Page</b>						\$ 1000.00	
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 1767.00	
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>							
<i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>							
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>							
<b>7. Purpose Codes</b> (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)							

# Contributions from Individuals

Amendment

Pg \_\_\_\_\_ of \_\_\_\_\_

Yes  No

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
Committee to Elect Sherry Ward						
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 Ward 8816 Cochran Court Wake Forest NC 27587			Education Consultant		candidate	
			c. Employer's Name/Specific Field			
			NCDEI / Education		e. Election Sum to Date	
					\$ 1700.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input checked="" type="checkbox"/>	# 1	cash		7/20/2011	\$ 300.00	
<input type="checkbox"/>	# 1	candidate transfer		10/07/2011	\$ 500.00	
<input type="checkbox"/>	# 1	check		10/20/2011	\$ 900.00	
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	
Verna Latchman Hopkins 76 Putnam Rd. Cortlandt Manor, NY 10595			Education Consultant			
			c. Employer's Name/Specific Field			
			NYC Public Schools		e. Election Sum to Date	
					\$ 55.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	# 1	check		10/4/11	\$ 55.00	
<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	
Jose Ramirez 126 Martinez Street Brooklyn NY 11226			Real Estate Broker			
			c. Employer's Name/Specific Field			
			TNT Realty NY		e. Election Sum to Date	
					\$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input checked="" type="checkbox"/>	# 1	check		9/2/11	\$ 70.00	
<input type="checkbox"/>	# 1	check		10/11/11	\$ 80.00	
<input type="checkbox"/>					\$	
4. Total only this Page						\$ 1535.00
5. Total of ALL CRO-1210 Pages						\$ 1535.00
(This line must be on line 6 of Detailed Summary Page CRO-1100)						