D	iscl	osure	R	nort	C	over
_	12/1	OBULL	_ TS /	POTE	•) A CI

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

Committee information	
a. Full Name	c. ID Number
FAYE TEACHEY I REVATTE	2HLOH8
b. Mailing Address (include City, State and Zip Code)	d. Date Filed
	Feb. 14, 2008
	e. Phone Number
	910-367-2728
2. Report Year 3. Period Start Date (market);) (error	LOUIS CONTRACTOR DE LA CO
2008	FAYE TEACHEY PROSATE
	Constitution of the property of the contraction of
Candidate Campaign Party Municipal	State/County Referendum
Joint Fundraiser PAC Organization	
Referendum Legal Expense Fund Thirty-five	
7. Type of Fund (if applicable, check one) Pre-primary "Booster Fund" Pre-election	
Building Fund Pre-election	Third Annual
NC Political Party Financing Fund Semi-annua	
Presidential Election Year Candidates Fund Mid Y	
NC Public Campaign Financing Fund Year I	
Other: Final	Year End
Se Vinantica de Cambradaca data Report	Final
	Special
(1. Coopin distantable	
a. Financial Institution Full Name	
FIRST CITIZENS BANK	
b. Purpose	c. Account Code
CAM PAIGN	FTP
	d. Period Begin Balance
	\$ 66.79
CERTIFICATION	<u> </u>
I certify that the Committee or Fund is in compliance with	all applicable provisions of Article 22A, 22B & 22D-22M of
•	are commingled with prohibited or other undisclosed funds. I
further certify that this report is complete, true and correc	t and that I have been trained by the NC State Board of Elections
C. J. 1 Thomas /	a dead () -# who
FAVE LEACHEY TREVATE	ey locky swall 1/8/2009
Printed Name of Signer	Signature of Appointed Treasurer Pate
FOR OFFICE USE ONLY	Dar and the
Date Received: 16/69 Emp	loyee: Delivery Method
	Normal Mail Registered Mail
Date Postmarked: Emp	loyee: Registered Mail
/	Electronically Filed
Date Scanned: Emp	ployee:
Date Data Entered: Emp	oloyee: Signer has not received
	mandatory training
Please Note: This form cannot be used to amend con	nmittee information such as the committee address, treasurer,
	oks information, or account information.
	tion (CRO-2100A-E) to make committee changes.

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

Amendment

Yes

No.

1. Committee Full Name (and Fund if applicable)	2. Type of	Report	3. ID Number
FAVE TEACHEY PREVATE			2 HL O H 8
Start of Election Cycle: January 1, 2008	•	Total this Reporting Period	Total this Lection Cycle
4) Cash on Hand at Start		\$ 64.79	\$ 0
RECEIPTS		· · · · · · · · · · · · · · · · · · ·	
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$	\$ 4645.00
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)	\$ 204.50	\$ 204.50
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)	\$	\$ 4849.50
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 271.29	\$ 4849.50
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, 1	5, 16 and 17)	\$ 271.29	\$ 4849.50
19) Cash on Hand at End (Add lines 4 and 12 together, then sul	btract line 18)	\$ &	\$ 0
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)	\$	\$

Disbursem Use this form to	report expenditures f	rom the committe	ee for; o	perating exp	Pg ef penses, contributi	Amendment Yes No ions to candidate/political
and the same of th	leachey	de cardo de	st1	t-e		2HL0H8
Operating Expe		ributions to Candida	<u> </u>		NAME:	
(include city, state,				c. Level Regis	d Committee Name	T SHRTS
f. Account Code			i. Dute (r	State um/dd/yyyy)		s /00
FTP	cK		10	30/08	\$ /00.°- \$	
	ing Address & Phone		7	b. Coordinate	ed Committee Name	d. Comments
Leigh Pellettere Willard, NC				c. Level Regis	stered (Specify) County: Municipa	LARDS lity: e. Election Sum to Date
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (r	nm/dd/yyyy)	j. Arnount	\$ //5 (
FTP	cK		10/2	1	\$ 115	
B	ing Address & Phone				od Committee Name	
Go GA: BURGAU				c. Level Regi	stered (Specify) County:	
BURGAW				State	Municipa	s 49,00
E Account Code	g. Form of Payment Debit	h. Purpose Code	1. Date (1	3 /08	J. Amount \$ 49.00	k. Required Remarks Jeavel
			a from the same than	official solution of the same	S	
(This line goes in (This line goes in		mary Page CRO-11	00 if Con	trib to Candid	ates/Political Comm	s 264.00 s 271.29
A* - Media E - Salaries I - Postage	B* - Printi F* - Equipi J - Penalti	ment	C* - Fo	undraising litical Party office Expen	H* - H ises O* - O	Another Candidate olding Public Office Expenses ther

Disbursements	Pg 1/
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	_		-	Amendment	
P;	, <u>]</u>	of	<u></u>	Yes	☐ No
				** * *	40.0

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

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Operating Expe	enses Cont	ributions to Candida	tes/Politic	al Committees	□ C	ordinat	ed Party Expenditures	
And the desired the second	/#/@?\@##V###	(14) 电电路电路			Wedt			
	ailing Address & Pho	one		b. Coordinate	ed Committee Na	ne .	d. Comments	
(include city, state,	& zip)						rastage	
Postn	arter			c. Level Regi	stered (Specify)		postage	
102111	(0.00			Federal	County	;		
				State	Munici	pality:	e. Election Sum to Date	
							\$7.29	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (1	mm/dd/yyyy)	j. Amount	k. R	equired Remarks	
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Sufferior, Bush Commission	ing Address & Phone	e ville e e e e		h Coordinate	ed Committee Na		d. Comments	
(include city, stat				D. COOT GRAND	ou Communec 14m		d. Comments	
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					stered (Specify)			
				Federal State	County Munici		e. Election Sum to Date	
					Munici	party.		
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f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. R	equired Remarks	
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Bertham British and To				h Coordinat	ed Committee Na	nne me	d. Comments	
(include city, sta	-			D. COSTABLE	Cal Continues 14s		W. Comments	
				c. Level Registered (Specify)				
				Federal County: State Municipality:			e. Election Sum to Date	
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	·····						\$	
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(This line goes in	6 4 41 7 6							
(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)								
The Harried Bearing Sales		The second secon		40				
A* - Media E - Salaries	B* - Printi	•		undraising litical Party			ther Candidate	
L - Salaries I - Postage	F* - Equip J - Penalti			ittical Party Mice Expe r		Other	ng Public Office Expenses	

Amendment **Refunds/Reimbursements To the Committee** ☐ Yes **□** 1√0 Use this form to report refunds received by the committee or reimbursements for a previous expenditure. YREUATTE FAYE TEACHEN Full Name, Mailing Address & Phone d. Type of Committee (include city, state, & zip) Candidate PAC The Pender Post BURGAW, NC Referendum Party e. Level Registered (Specify) h. Original Expenditure Date County: Federal State Municipality: i. Original Expenditure Amt . Job Title/Profession c. Employer's Name/Specific Field f. Purpose . Election Sum to Date Ketund Ha bN n. Date (mm/dd/yyyy) Account Code . Form of Payment m. In-Kind Description o. Amount \$ 204.50 . Full Name, Mailing Address & Phone d. Type of Committee g. Comments Candidate PAC (include city, state, & zip) Referendum Party e. Level Registered (Specify) h. Original Expenditure Date Federal County: State Municipality: i. Original Expenditure Amt . Job Title/Profession c. Employer's Name/Specific Field i. Election Sum to Date f. Purpose . Account Code l. Form of Payment m. In-Kind Description n. Date (mm/dd/yyyy) | o. Amount . Full Name, Mailing Address & Phone d. Type of Committee g. Comments (include city, state, & zip) Candidate □ PAC Party Referendum e. Level Registered (Specify) h. Original Expenditure Date Federal County: State Municipality: i. Original Expenditure Amt . Job Title/Profession c. Employer's Name/Specific Field f. Purpose j. Election Sum to Date . Account Code l. Form of Payment m. In-Kind Description n. Date (mm/dd/yyyy) o. Amount

CRO-1240

NC State Board of Elections

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December 2007

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