

Disclosure Report Cover

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.

Amendment: Yes No

1. Committee Information		
a. Full Name <i>Teresa Batson Batts</i>		e. ID Number <i>6HLN3F</i>
b. Mailing Address (include City, State and Zip Code) <i>PO BOX 411 Surf City NC 28445</i>		d. Date Filed <i>10-4-2017</i>
		e. Phone Number <i>910-670-0530</i>
2. Report Year <i>2017</i>	3. Period Start Date (mm/dd/yy) <i>07-08-2017</i>	4. Period End Date (mm/dd/yy) <i>09-26-2017</i>
5. Treasurer Full Name <i>Teresa Batson Batts</i>		
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		Municipal <input checked="" type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input 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)		State/County <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:		Referendum <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		10. Special Report Name
11. Account Information		11. Account Information
a. Financial Institution Full Name <i>Bank of America</i>		a. Financial Institution Full Name
b. Purpose	c. Account Code <i>TFB</i>	b. Purpose
	d. Period Begin Balance <i>\$ 0</i>	c. Account Code
		d. Period Begin Balance <i>\$</i>
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.		
<i>Teresa Batson Batts</i>		<i>Teresa Batson Batts</i>
Printed Name of Signer		Signature of Appointed Treasurer
		<i>10-4-17</i>
		Date
FOR OFFICE USE ONLY		
Date Received: _____	Employee: _____	Delivery Method
Date Postmarked: _____	Employee: _____	<input type="checkbox"/> Normal Mail
Date Scanned: _____	Employee: _____	<input type="checkbox"/> Registered Mail
Date Data Entered: _____	Employee: _____	<input 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. 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	
Teresa Batson Batts				6HLN3F	
Start of Election Cycle: January 1, 2017		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$		\$	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1209)		\$		\$	
6) Contributions from Individuals (CRO-1210)		\$ 2750.00		\$ 2750.00	
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)		\$		\$	
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)		\$ 2750.00		\$ 2750.00	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 1300.50		\$ 1300.50	
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, 15, 16 and 17)		\$ 1300.50		\$ 1300.50	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 1449.50		\$ 1449.50	
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-1630)		\$			
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

Pg 1 of 1 Amendment 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					
Teresa Batson Batts						6HLN3F					
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove											
a. Full Name, Mailing Address & Phone (include city, state, & zip)						b. Job Title/Profession			d. Comments		
Teresa Batson Batts PO Box 4111 Surf City NC 28445 910-620-0530						Candidate			Drafted by Bank - wrong acct. see attached.		
						c. Employer's Name/Specific Field			e. Election Sum to Date		
									\$ 1000.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount					
<input type="checkbox"/>	TB	Draft		07-31-2017		\$ 1000.00					
<input type="checkbox"/>	TB	Draft		08-09-2017		\$ 1000.00					
<input type="checkbox"/>	TB	Draft		08-09-2017		\$ -1000.00					
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		
Douglas Medlin PO Box 2690 Surf City NC 28445 910-328-2323						Business Owner					
						c. Employer's Name/Specific Field			e. Election Sum to Date		
						Self employed East Coast Sports			\$ 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"/>	TB	check #3294		08-17-2017		\$ 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		
Teresa Batson Batts PO Box 4111 Surf City NC 28445						Candidate					
						c. Employer's Name/Specific Field			e. Election Sum to Date		
									\$ 2500.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount					
<input type="checkbox"/>	TB	Draft		9-20-2017		\$ 1500.00					
<input type="checkbox"/>						\$					
<input type="checkbox"/>						\$					
4. Total only this Page						\$ 2750.00					
5. Total of ALL CRO-1210 Pages						\$ 2750.00					
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>											

Disbursements

Amendment Pg 1 of 1 Yes No

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 phone if applicable) Teresa Batson Batts						CRD Number 0HLN3F			
<input checked="" type="checkbox"/> Operating Expenses						<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Vistaprint www.vistaprint.com 1-866-614-8002				b. Coordinated Committee Name		d. Comments			
c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:				e. Election Sum to Date \$					
f. Account Code TB		g. Form of Payment Debit		h. Purpose Code B	i. Date (mm/dd/yyyy) 08-16-2017	j. Amount \$ 863.59	k. Required Remarks Signs-Magnets		
f. Account Code \$		g. Form of Payment \$		h. Purpose Code \$	i. Date (mm/dd/yyyy) \$	j. Amount \$	k. Required Remarks \$		
a. Full Name, Mailing Address & Phone (include city, state, & zip) Facebook, Inc. 1 Hacker Way Menlo Park, CA 94025 1-850-777-3086				b. Coordinated Committee Name		d. Comments			
c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:				e. Election Sum to Date \$					
f. Account Code TB		g. Form of Payment Debit		h. Purpose Code A	i. Date (mm/dd/yyyy) 09/13-2017	j. Amount \$ 25.00	k. Required Remarks Advertising		
f. Account Code \$		g. Form of Payment \$		h. Purpose Code \$	i. Date (mm/dd/yyyy) \$	j. Amount \$	k. Required Remarks \$		
a. Full Name, Mailing Address & Phone (include city, state, & zip) Signs on the cheap.com 1-866-666-9239				b. Coordinated Committee Name		d. Comments			
c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:				e. Election Sum to Date \$					
f. Account Code TB		g. Form of Payment Debit		h. Purpose Code A	i. Date (mm/dd/yyyy) 9-24-2017	j. Amount \$ 411.90	k. Required Remarks signs		
f. Account Code \$		g. Form of Payment \$		h. Purpose Code \$	i. Date (mm/dd/yyyy) \$	j. Amount \$	k. Required Remarks \$		
5. Total on this page						\$ 1300.50			
6. Total 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)						\$ 1300.50			
Purpose Codes (List detailed expenditure code in (k) 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)									