

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

1. Committee Information		c. ID Number
a. Full Name Friends of Bill Smith		4DA477
b. Mailing Address (include City, State and Zip Code) 108 Bobbys Drive Newport, NC 28570		d. Date Filed 02-19-10
		e. Phone Number 252-223-3973

2. Report Year 2010	3. Period Start Date (mm/dd/yy) 02-19-10	4. Period End Date (mm/dd/yy) 02-23-10	5. Treasurer Full Name William Harvey Smith
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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"/> Municipal	<input checked="" type="checkbox"/> State/County
<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> PAC	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Referendum	<input type="checkbox"/> Legal Expense Fund	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth
<input type="checkbox"/> NC Public Campaign Financing Fund		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual
<input type="checkbox"/> Other:		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year
8. Number of Fundraisers this Report 0		<input type="checkbox"/> Final	<input type="checkbox"/> Year End
		<input type="checkbox"/> Special	<input type="checkbox"/> Final
		<input type="checkbox"/> Special	<input type="checkbox"/> Special
		10. Special Report Name	

11. Account Information		11. Account Information	
a. Financial Institution Full Name Sound Bank		a. Financial Institution Full Name	
b. Purpose Campaign Finance	c. Account Code A	b. Purpose	c. Account Code
	d. Period Begin Balance \$.00		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 if 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 according to N.C.G.S. 163-278.7(f).

William Harvey Smith

William Harvey Smith

2-23-10

Printed Name of Signer

Signature of Appointed Treasurer

Date

FOR OFFICE USE ONLY

Date Received: _____
Date Postmarked: _____
Date Scanned: _____
Date Data Entered: _____

Employee: _____
Employee: _____
Employee: _____
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	
Friends of Bill Smith	Campaign Finance	HDA 477	
Start of Election Cycle: January 1, 2010	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start	\$ 100.00	\$ 100.00	
5) Aggregated Contributions from Individuals (CRO-1205)	\$.00	\$.00	
6) Contributions from Individuals (CRO-1210)	\$.00	\$.00	
7) Contributions from Political Party Committees (CRO-1220)	\$.00	\$.00	
8) Contributions from Other Political Committees (CRO-1230)	\$.00	\$.00	
9) Loan Proceeds (CRO-1410)	\$.00	\$.00	
10) Refunds/Reimbursements To the Committee (CRO-1240)	\$.00	\$.00	
11) Other Receipt Sources			
11a) Interest on Bank Accounts (CRO-1250)	\$.00	\$.00	
11b) Contributions from Not-for-Profit Organizations (CRO-1250)	\$.00	\$.00	
11c) Outside Sources of Income (CRO-1250)	\$.00	\$.00	
11d) Legal Expense Fund – Other Sources (CRO-1270)	\$.00	\$.00	
11 e) Exempt Purchase Price Sales (CRO-1265)	\$.00	\$.00	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$ 100.00	\$ 100.00	
13) Disbursements			
13a) Operating Expenditures (CRO-1310)	\$.00	\$.00	
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$.00	\$.00	
13c) Coordinated Party Expenditures (CRO-1310)	\$.00	\$.00	
14) Aggregated Non-Media Expenditures (CRO-1315)	\$.00	\$.00	
15) Loan Repayments (CRO-1420)	\$.00	\$.00	
16) Refunds/Reimbursements From the Committee (CRO-1320)	\$.00	\$.00	
17) In-Kind Contributions (CRO-1510)	\$.00	\$.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$.00	\$.00	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 100.00	\$ 100.00	
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$.00		
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$.00		
22) Debts and Obligations owed By the Committee (CRO-1610)	\$.00		
23) Debts and Obligations owed To the Committee (CRO-1620)	\$.00		
24) Account Transfers Within the Committee (CRO-1720)	\$.00		
25) Administrative Support (CRO-1710)	\$.00	\$.00	
26) Forgiven Loans (CRO-1440)	\$.00	\$.00	
27) 48-Hour Notice Reports Sum (CRO-2200)	\$.00	\$.00	
28) Contributions to be Refunded (CRO-1215)	\$.00	\$.00	