

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	
a. Full Name <i>Dan Ford for County Commissioner</i>	c. ID Number
b. Mailing Address (include City, State and Zip Code) <i>3711 Wyatt St FAY NC 28306</i>	d. Date Filed <i>5-22-08</i>
	e. Phone Number <i>425-3597</i>

2. Report Year <i>2008</i>	3. Period Start Date (mm/dd/yy) <i>4-20-08</i>	4. Period End Date <i>5-21-08</i>	5. Treasurer Full Name <i>Phyllis R Williams</i>
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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	Municipal	State/County	Referendum
<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> PAC	<input type="checkbox"/> Organizational	<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	<input type="checkbox"/> Pre-referendum
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<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 <i>0</i>		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	10. Special Report Name <i>Final</i>
		<input type="checkbox"/> Special	<input checked="" type="checkbox"/> Final	
			<input type="checkbox"/> Special	

11. Account Information		11. Account Information	
a. Financial Institution Full Name <i>BB+T</i>	a. Financial Institution Full Name	b. Purpose <i>Checking</i>	c. Account Code <i>1</i>
b. Purpose	b. Purpose	d. Period Begin Balance <i>\$ 3476.10</i>	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 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).

Phyllis R. Williams
 Printed Name of Signer

Phyllis R. Williams
 Signature of Appointed Treasurer

5-22-08
 Date

FOR OFFICE USE ONLY

Date Received: _____	Employee: _____
Date Postmarked: _____	Employee: _____
Date Scanned: _____	Employee: _____
Date Data Entered: _____	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	
Dan Foco for County Com.		Final			
Start of Election Cycle: January 1, 2008		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 3,476.10		\$ 0	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 175.00		\$ 6,950.00	
6) Contributions from Individuals (CRO-1210)		\$ 4,998.82		\$ 2,999.82	
7) Contributions from Political Party Committees (CRO-1220)		\$ ---		\$ ---	
8) Contributions from Other Political Committees (CRO-1230)		\$ ---		\$ 250.00	
9) Loan Proceeds (CRO-1410)		\$ ---		\$ 3,600.00	
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)		\$ ---		\$ ---	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c and 11d)		\$ 6,748.82		\$ 6,744.82	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 2,274.78		\$ 5,868.68	
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)		\$ 1,876.14		\$ 1,876.14	
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)		\$ 4,150.92		\$ 6,944.82	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ ---		\$ ---	
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)		\$ 11,233.84		\$	
27) 48-Hour Notice Reports Sum (CRO-2220)		\$ ---		\$	
28) Contributions to be Refunded (CRO-1215)		\$ ---		\$	

Contributions from Individuals

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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
Dan Ford for CC						
3. Contributor Information						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Robert Lewis 3011 Bankhead Dr FAY NC 06			Retired			
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	CK		5-5-08	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
George Pittard 109 G. Hesp. Ct FAY NC 01			Manager		refund for over payment	
			c. Employer's Name/Specific Field			
			Worth Printing		e. Election Sum to Date	
					\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	CK		5-9-08	\$ 299.82	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Howard Lloyd 568 Branch Hill Rd FAY NC 14			Accountant			
			c. Employer's Name/Specific Field			
			Cumb. count Sheratt's Office		e. Election Sum to Date	
					\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>					\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 499.82	
5. Total of ALL CRO-1210 Pages					\$	
<i>(This line must be on line 6 of original and summary Page CRO-1210)</i>						

Disbursements

Amendment

Pg of Yes No

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

1. Committee Full Name (and Fund if applicable)					2. ID Number
Dan Ford for county Commissioner					
3. Type of Disbursement (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					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Moore Exposure 443 Franklin St FAY 01					
		c. Level Registered (Specify)		e. Election Sum to Date	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	ck	B	4.25.08	\$ 320.05	Printing T-shirts
				\$	
4. Payee Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Worth Printing 109 G. Hesper St FAY NC 01					
		c. Level Registered (Specify)		e. Election Sum to Date	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 708.47	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	ck		4.28.08	\$ 708.47	cards
				\$	
4. Payee Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Direct Mail FAY NC 01					
		c. Level Registered (Specify)		e. Election Sum to Date	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	ck	I	4.29.08	\$ 1246.06	mail outs
				\$	
5. Total on this Page					\$
6. Total of ALL CRO-1310 Pages					\$ 2274.78
(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)					
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	O* - Other		
* Codes require detailed explanation in required attachments (K)					

Loan Repayments

Use this form to report payments on an existing loan.

1. Committee Full Name (and Fund if applicable)				2. ID Number
Dan Ford for CC				
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments
Dan Ford 3711 Wyatt St Fay NC 04				
				c. Original Loan Date
				3-31-08
				d. Original Loan Amount
				\$ 3,000.00
e. Remaining Loan Balance	f. Account Code	g. Form of Payment	h. Date (mm/dd/yyyy)	i. Repayment Amount
\$ 1123.86	1	CK	5-22-08	\$ 1876.14
\$				\$
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments
				c. Original Loan Date
				d. Original Loan Amount
				\$
e. Remaining Loan Balance	f. Account Code	g. Form of Payment	h. Date (mm/dd/yyyy)	i. Repayment Amount
\$				\$
\$				\$
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments
				c. Original Loan Date
				d. Original Loan Amount
				\$
e. Remaining Loan Balance	f. Account Code	g. Form of Payment	h. Date (mm/dd/yyyy)	i. Repayment Amount
\$				\$
\$				\$
4. Total only this Page				\$ 1876.14
5. Total of ALL CRO-1420 Pages <small>(This line must be on line 15 of Detailed Summary Page 1 of 1)</small>				\$

Forgiven Loans

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Amendment
 Yes No

Use this form to report any loan which has been forgiven by the lender.
 A Forgiven loan statement (CRO-6200) must accompany each forgiven loan.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Dan Ford for Cum.			
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Comments	
Dan Ford 3711 Wyatt St FAY NC 04		closed account.	
		c. Original Loan Date (mm/dd/yyyy)	f. Election Sum to Date
		2/08	\$
		d. Original Loan Amount	g. Date (mm/dd/yyyy)
		\$ 1,000.00	5/22/08
		e. Remaining Loan Balance	h. Forgiven Amount
\$ 1,000.00	\$		
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Comments	
Dan Ford 3711 Wyatt St FAY NC 04		closed account	
		c. Original Loan Date (mm/dd/yyyy)	f. Election Sum to Date
		3/31/08	\$
		d. Original Loan Amount	g. Date (mm/dd/yyyy)
		\$ 2,000.00	5/22/08
		e. Remaining Loan Balance	h. Forgiven Amount
\$ 3,000.00	\$ 1123.86		
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Comments	
		c. Original Loan Date (mm/dd/yyyy)	f. Election Sum to Date
			\$
		d. Original Loan Amount	g. Date (mm/dd/yyyy)
		\$	
		e. Remaining Loan Balance	h. Forgiven Amount
\$	\$		
4. Total only this Page		\$	1123.86
5. Total of ALL CRO-6200 Pages <i>(This line must be on line 26 of Detail Summary Page)</i>		\$	
<i>The lender information should contain the same information as supplied under the original loan proceed.</i>			