

# 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

<b>1. Committee Information</b>	
<b>a. Full Name</b> Saussy for Schools	<b>c. ID Number</b> 1HD5G2
<b>b. Mailing Address (include City, State and Zip Code)</b> 306 Glendale Drive, Chapel Hill, NC 27514-5914	<b>d. Date Filed</b> 01/26/2016
	<b>e. Phone Number</b> 919-395-9960

<b>2. Report Year</b> 2015	<b>3. Period Start Date (mm/dd/yy)</b> 10/20/15	<b>4. Period End Date (mm/dd/yy)</b> 12/31/2015	<b>5. Treasurer Full Name</b> Susan M Swafford
-------------------------------	--	--	---

<b>6. Type of Committee (Check One)</b>		<b>9. Type of Report (check only one type of report from one category)</b>		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<b>Municipal</b>		
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<b>State/County</b>	
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Organizational	<b>Referendum</b>
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Organizational
<b>7. Type of Fund (if applicable, check one)</b>		<input type="checkbox"/> Pre-election	<input type="checkbox"/> First	<input type="checkbox"/> Pre-referendum
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Second	<input type="checkbox"/> Final
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Third	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> Other:		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Fourth	<input type="checkbox"/> Annual
		<input checked="" type="checkbox"/> Year End	<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Special
		<input type="checkbox"/> Final	<input type="checkbox"/> Mid Year	
		<input type="checkbox"/> Special	<input type="checkbox"/> Year End	
			<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	

**8. Number of Fundraisers this Report**  
0

<b>11. Account Information</b>		<b>11. Account Information</b>	
<b>a. Financial Institution Full Name</b> Wells Fargo Bank, NA	<b>b. Purpose</b> All Campaign	<b>a. Financial Institution Full Name</b> Wachovia	<b>b. Purpose</b> All Campaign
<b>c. Account Code</b> CK6328	<b>d. Period Begin Balance</b> \$ 608.83	<b>c. Account Code</b> <del>VS7219</del>	<b>d. Period Begin Balance</b> <del>\$ 328.05</del>

**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.  
 Susan M Swafford  
 Printed Name of Signer  
 Signature of Appointed Treasurer  
 Date: 08/31/2016

**FOR OFFICE USE ONLY**

Date Received: 9/6/16	Employee: <u>bb</u>	<b>Delivery Method</b> <input type="checkbox"/> Normal Mail <input checked="" type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training
Date Postmarked: 9/1/16	Employee: _____	
Date Scanned: 9/6/16	Employee: <u>bb</u>	
Date Data Entered: _____	Employee: _____	

**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.

CRO-1000  
 NC State Board of Elections  
 August 2008  
 Orange County Bd. of Elections

# Detailed Summary

Amendment  
 Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b> Saussy For Schools		<b>2. Type of Report</b> Year End		<b>3. ID Number</b> 1HD5G2	
<b>Start of Election Cycle:</b> January 1, 2012		<b>Total this Reporting Period</b>		<b>Total this Election Cycle</b>	
<b>4) Cash on Hand at Start</b>		\$ 608.83		\$ 0	
<b>RECEIPTS</b>					
<b>5) Aggregated Contributions from Individuals</b> (CRO-1205)		\$ 0		\$ 74.00	
<b>6) Contributions from Individuals</b> (CRO-1210)		\$ 900.00		\$ 1830.00	
<b>7) Contributions from Political Party Committees</b> (CRO-1220)		\$		\$	
<b>8) Contributions from Other Political Committees</b> (CRO-1230)		\$		\$	
<b>9) Loan Proceeds</b> (CRO-1410)		\$		\$	
<b>10) Refunds/Reimbursements To the Committee</b> (CRO-1240)		\$		\$	
<b>11) Other Receipt Sources</b>					
<b>11a) Interest on Bank Accounts</b> (CRO-1250)		\$		\$	
<b>11b) Contributions from Not-for-Profit Organizations</b> (CRO-1250)		\$		\$	
<b>11c) Outside Sources of Income</b> (CRO-1250)		\$		\$	
<b>11d) Legal Expense Fund – Other Sources</b> (CRO-1270)		\$		\$	
<b>11 e) Exempt Purchase Price Sales</b> (CRO-1265)		\$		\$	
<b>12) TOTAL RECEIPTS</b> (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 900.00		\$ 1904.00	
<b>EXPENDITURES</b>					
<b>13) Disbursements</b>					
<b>13a) Operating Expenditures</b> (CRO-1310)		\$ 31.00		\$ 426.17	
<b>13b) Contributions to Candidates/Political Committees</b> (CRO-1310)		\$		\$	
<b>13c) Coordinated Party Expenditures</b> (CRO-1310)		\$		\$	
<b>14) Aggregated Non-Media Expenditures</b> (CRO-1315)		\$		\$	
<b>15) Loan Repayments</b> (CRO-1420)		\$		\$	
<b>16) Refunds/Reimbursements From the Committee</b> (CRO-1320)		\$ 1477.83		\$ 1477.83	
<b>17) In-Kind Contributions</b> (CRO-1510)		\$		\$	
<b>18) TOTAL EXPENDITURES</b> (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 1508.86		\$ 1904.00	
<b>19) Cash on Hand at End</b> (Add lines 4 and 12 together, then subtract line 18)		\$ 0		\$ 0	
<b>ADDITIONAL INFORMATION</b>					
<b>20) Non-Monetary Gifts Given to Other Committees</b> (CRO-1330)		\$			
<b>21) Outstanding Loans (incl. ones from other campaigns)</b> (CRO-1430)		\$			
<b>22) Debts and Obligations owed By the Committee</b> (CRO-1610)		\$ 1314.78			
<b>23) Debts and Obligations owed To the Committee</b> (CRO-1620)		\$			
<b>24) Account Transfers Within the Committee</b> (CRO-1720)		\$			
<b>25) Administrative Support</b> (CRO-1710)		\$		\$	
<b>26) Forgiven Loans</b> (CRO-1440)		\$		\$	
<b>27) 48-Hour Notice Reports Sum</b> (CRO-2200)		\$		\$	
<b>28) Contributions to be Refunded</b> (CRO-1215)		\$		\$	

RECEIVED  
 SEP 06 2016  
 Orange County Bd. of Elections

# Contributions from Individuals

Amendment  
 Yes  No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
Saussy for Schools						1HD5G2	
<b>3. Contributor 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. Job Title/Profession</b>		<b>d. Comments</b>	
David L. Saussy, Jr.				Sr. Director North American BD			
				<b>c. Employer's Name/Specific Field</b> Pharmaceuticals			
				<b>e. Election Sum to Date</b>			
				\$		755.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input checked="" type="checkbox"/>	CASH	CASH		07/15/2015		\$ 5.00	
<input checked="" type="checkbox"/>	CK6328	Draft		07/18/2015		\$ 250.00	
<input type="checkbox"/>	CK6328	Draft		10/28/2015		\$ 500.00	
<b>3. Contributor 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. Job Title/Profession</b>		<b>d. Comments</b>	
David L. Saussy, Jr.				Sr. Director North American BD			
				<b>c. Employer's Name/Specific Field</b> Pharmaceuticals			
				<b>e. Election Sum to Date</b>			
				\$		1155.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	CK6328	Draft		11/16/2015		\$ 400.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor 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. Job Title/Profession</b>		<b>d. Comments</b>	
				<b>c. Employer's Name/Specific Field</b>			
				<b>e. Election Sum to Date</b>			
				\$			
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>4. Total only this Page</b>						\$ 900.00	
<b>5. Total of ALL CRO-1210 Pages</b>						\$ 900.00	

(This line must be on line 6 of Detailed Summary Page CRO-1210) **VED**

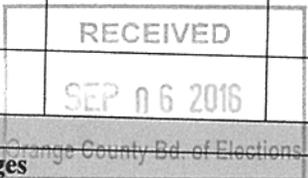
CRO-1210

NC State Board of Elections  
**FEB 04 2016**  
 Orange County Bd. of Elections

# 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> Saussy for Schools					<b>2. ID Number</b> 1HD5G2	
<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 type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Wells Fargo Bank 112 West Barbee Chapel Rd Chapel Hill, NC 27517			<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:		\$ 17.00	
<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>	
CK6328	Draft	O	11/09/2015	\$3.00	Bank Fee for Report	
				\$		
<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) Wells Fargo Bank 112 West Barbee Chapel Rd Chapel Hill, NC 27517			<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:		\$ 45.00	
<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>	
CK6328	Draft	O	10/30/2015	\$14.00	Service Fee For Bank Acct	
CK6328	Draft	O	11/30/2015	\$14.00	Service Fee For Bank Account	
<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>					\$ 31.00	
<b>6. Total of ALL CRO-1310 Pages</b> <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>					\$ 426.17	
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					\$ 31.00	
<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)						



# Refunds/Reimbursements From the Committee

Use this form to report refunds/reimbursements, including contributions returned to the contributor.

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
Saussy for Schools		1HD5G2	
<b>3. 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>d. Type of Committee</b>	
David Saussy 306 Glendale Drive Chapel Hill, NC 27514-5914		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party	
		<b>e. Level Registered (Specify)</b>	
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	
<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
<b>i. Form of Payment</b>		<b>m. Required Remarks</b>	
check		Needed for Payment of credit card bill	
		<b>n. Date (mm/dd/yyyy)</b>	
		12/2015	
		<b>o. Amount</b>	
		\$ 163.05	
<b>3. 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>d. Type of Committee</b>	
Wells Fargo Business Visa Card PO Box 6426 Carol Stream, IL 60197-6426		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party	
		<b>e. Level Registered (Specify)</b>	
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	
<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
<b>i. Form of Payment</b>		<b>m. Required Remarks</b>	
		Payment of Credit card	
		<b>n. Date (mm/dd/yyyy)</b>	
		11/20/2015	
		<b>o. Amount</b>	
		\$ 1314.78	
<b>3. 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>d. Type of Committee</b>	
		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party	
		<b>e. Level Registered (Specify)</b>	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	
<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
<b>i. Form of Payment</b>		<b>m. Required Remarks</b>	
		<b>n. Date (mm/dd/yyyy)</b>	
		<b>o. Amount</b>	
		\$	
<b>4. Total only this Page</b>		\$ 1477.83	
<b>5. Total of ALL CRO-1320 Pages</b> (This line must be on line 16 of Detailed Summary Page CRO-1100)		\$ 1477.83	
L - Returned to Contributor		M - Overpayment for Service	
P* - Reimbursement of In-Kind		O* Other	
		N - Exceeded Contribution Limit	

\* Codes require detailed explanation in required remarks field (m)

CRO-1320

NC State Board of Elections

RECEIVED  
SEP 16 2015  
Orange County Bd. of Elections

December 2007

# Debts and Obligations Owed By the Committee

Pg 1 of 1

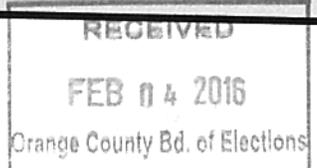
Amendment  Yes  No

Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card purchases.

<b>1. Committee Full Name (and Fund if applicable)</b> Savvy For Schools		<b>2. ID Number</b> 1H05G2	
<b>3. Creditor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>Note:</b> All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor.	
		<b>b. Description of Creditor</b> Credit Card Company	
<b>c. Beginning Balance</b>	<b>d. Total Amount Paid</b>	<b>e. Total Amount Incurred</b>	<b>f. Remaining Balance</b>
\$ 328.05	\$ 328.05	\$ 968.73	\$ 968.73
<b>g. Incurred Debts (what the committee received this period)</b>			
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
Wooten Graphics, Inc		10/20/2015	\$ 381.57
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
		A	Printed Campaign Signs
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
Wooten Graphics, Inc		10/29/2015	\$ 513.80
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
		A	Printed Campaign Signs
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
Staples Copy + Print Store 1710 East Franklin St. Chapel Hill, NC 27514		10/30/2015	\$ 91.36
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
		sm's BK	
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
			\$
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
			\$
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>4. Total only this Page</b> (This should be the sum of all items 'g3.' from this page)		\$ 986.73	
<b>5. Total of ALL CRO-1610 Pages</b> (This line must be on line 22 of Detailed Summary Page CRO-1100)		\$ 968.73	
<b>6. Purpose Codes (List detailed expenditure code in (g4.))</b>		\$ 1314.78	
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 remarks field (g5.)			

CRO-1610

NC State Board of Elections



February 2011