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: Streater for School Board

c. ID Number: 46-0567252

b. Mailing Address (include City, State and Zip Code): P.O. Box 1111 Carrboro, N.C. 27510

d. Date Filed: January 25, 2012

e. Phone Number: 919-736-0683

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2011	July 1, 2011	December 31, 2011	G. Patricia L. Stokes

6. Type of Committee (Check One)

- ☒ Candidate Campaign
- ☐ Party
- ☐ PAC
- ☐ Referendum
- ☐ Independent Expenditure
- ☐ Joint Fundraiser
- ☐ Legal Expense Fund

7. Type of Fund *(if applicable, check one)*

- ☐ Booster Fund
- ☐ Building Fund
- ☐ Other:

8. Number of Fundraisers this Report: -0-

9. Type of Report *(check only one type of report from one category)*

Municipal	State/County	Referendum
☐ Organizational	☐ Organizational	☐ Organizational
☐ Thirty-five day	Quarterly	☐ Pre-referendum
☐ Pre-primary	☐ First	☐ Final
☐ Pre-election	☐ Second	☐ Supplemental Final
☐ Pre-runoff	☐ Third	☐ Annual
Semi-annual	☐ Fourth	☐ Special
☐ Mid Year	Semi-annual	
☒ Year End	☐ Mid Year	
☒ Final	☒ Year End	
☐ Special	☒ Final	
	☐ Special	

10. Special Report Name

11. Account Information

a. Financial Institution Full Name: Wells Fargo

b. Purpose: Campaign Acct for receiving & expenditures

c. Account Code:

d. Period Begin Balance: $ 763.02

11. Account Information

a. Financial Institution Full Name:

b. Purpose:

c. Account Code:

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 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.

G. Patricia L. Stokes	[signature]	1-27-12
Printed Name of Signer	Signature of Appointed Treasurer	Date

FOR OFFICE USE ONLY

Date Received:	1-30-12	Employee:	
Date Postmarked:	1-27-12	Employee:	
Date Scanned:	1-31-12	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.

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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
Streater for School Bd	Final	45-0567252

Start of Election Cycle: January 1, 2011		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$ 763.02	$ 22.20
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	$ 418.25	$ 2,553.25
6) Contributions from Individuals	(CRO-1210)	$ 150.00	$ 840.00
7) Contributions from Political Party Committees	(CRO-1220)	$ -0-	$ -0-
8) Contributions from Other Political Committees	(CRO-1230)	$ -0-	$ -0-
9) Loan Proceeds	(CRO-1410)	$ -0-	$ -0-
10) Refunds/Reimbursements To the Committee	(CRO-1240)	$ -0-	$ -0-
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	$ -0-	$ -0-
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	$ -0-	$ -0-
11c) Outside Sources of Income	(CRO-1250)	$ -0-	$ -0-
11d) Legal Expense Fund – Other Sources	(CRO-1270)	$ -0-	$ -0-
11 e) Exempt Purchase Price Sales	(CRO-1265)	$ -0-	$ -0-
12) TOTAL RECEIPTS *(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)*		$ 568.25	$ 3393.25
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	$ 1,331.27	$ 3415.45
13b) Contributions to Candidates/Political Committees	(CRO-1310)	$ -0-	$ -0-
13c) Coordinated Party Expenditures	(CRO-1310)	$ -0-	$ -0-
14) Aggregated Non-Media Expenditures	(CRO-1315)	$ -0-	$ -0-
15) Loan Repayments	(CRO-1420)	$ -0-	$ -0-
16) Refunds/Reimbursements From the Committee	(CRO-1320)	$ -0-	$ -0-
17) In-Kind Contributions	(CRO-1510)	$ -0-	$ -0-
18) TOTAL EXPENDITURES *(Add lines 13a, 13b, 13c, 14, 15, 16 and 17)*		$ 1331.27	$ 3415.45
19) Cash on Hand at End *(Add lines 4 and 12 together, then subtract line 18)*		$ -0-	$ -0-
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	$ -0-	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	$ -0-	
22) Debts and Obligations owed By the Committee	(CRO-1610)	$ -0-	
23) Debts and Obligations owed To the Committee	(CRO-1620)	$ -0-	
24) Account Transfers Within the Committee	(CRO-1720)	$ -0-	
25) Administrative Support	(CRO-1710)	$ -0-	$ -0-
26) Forgiven Loans	(CRO-1440)	$ -0-	$ -0-
27) 48-Hour Notice Reports Sum	(CRO-2200)	$ -0-	$ -0-
28) Contributions to be Refunded	(CRO-1215)	$ -0-	$ -0-

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Aggregated Contributions from Individuals

Page ____ of ____

Amendment ☐ Yes ☒ No

Optional form used to report NC Contributions From Individuals of $50 or less

1. Committee Full Name (and Fund if applicable)	2. ID Number
Streater for Schoo Board	45-0567252

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove	1	Check		1-11-12	$ 25.00
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
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4. Total only this Page	$ 25.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ 25.00

Contributions from Individuals

Pg _____ of _____ 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
Streater for School Board	47-0567252

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
John T. Stokes P.O. Box 1968 Huntersville, NC 28070 704-992-2326	Asst V. President CBA Tech. Compliance Mgr.	B.B.T Bank 200 S. College St Charlotte, NC 28202		$ 75.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Check		11-2-11	$ 75.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Angela A. Stokes P.O. Box 1968 Huntersville, NC 28070 704-992-2326	R.N. Cardiac Nurse	Presbyterian Hospital Charlotte, NC 28070		$ 75.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Check		11-2-11	$ 75.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	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
☐					$
☐					$
☐					$

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4. Total only this Page	$ 150.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 150.00

Disbursements

Pg 1 of 4 | Amendment ☐ 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
Streater for School Board	45-0567252

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): Chinese Restaurant #35, 143 W. Franklin St., Chapel Hill, NC 275, 919-968-3488

b. Coordinated Committee Name: Charles Baldwin, Na Howell

c. Level Registered (Specify): ☐ Federal ☐ County ☐ State ☐ Municipality

d. Comments:

e. Election Sum to Date: $ 30.42

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	G	11-10-11	$ 30.42	Refreshments/Party

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): 919-942-1620, Carrboro Mini Mart, 502 W Main St, Carrboro, NC, 27510

b. Coordinated Committee Name: Charles Baldwin, Na Howell

c. Level Registered (Specify): ☐ Federal ☐ County ☐ State ☐ Municipality

d. Comments:

e. Election Sum to Date: $ 50.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	CK	G	11-10-11	$ 50.00	Refreshments/Party

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): Extraordinary Ventures, 200 S. Elliott Rd, Chapel Hill, NC 27514, 919-967-1100

b. Coordinated Committee Name: Charles Baldwin, Na Howell

c. Level Registered (Specify): ☐ Federal ☐ County ☐ State ☐ Municipality

d. Comments:

e. Election Sum to Date: $ 160.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	CK	G	11-10-11	$ 160.00	Refreshment/Party

5. Total only this Page $ 240.42

6. Total of ALL CRO-1310 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)

7. Purpose Codes (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)

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Disbursements

Pg 2 of 4

Amendment ☐ 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
Streater for School Board	47-0567252

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☒ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
Harris Teeter #3 310 N Greensboro St Carrboro, N.C 27510		☐ Federal ☐ County ☐ State ☐ Municipality		35.69

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	CK	G	11-4-11	$ 23.34	Refreshments/Party
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
919 967-3433 Balloons + Tunes 208 W. Main St Carrboro, N.C. 27510		☐ Federal ☐ County ☐ State ☐ Municipality		$ 10.16

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	CK	G	11-10-11	$ 10.16	Refreshments/Party
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
919-967-3433 Balloons + Tunes 208 W. Main St Carrboro, NC 27510		☐ Federal ☐ County ☐ State ☐ Municipality		$ 38.56

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	G	11-10-11	$ 28.40	Refreshments/Party
				$	

5. Total only this Page	$ 61.90
6. Total of ALL CRO-1310 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)*	$

7. Purpose Codes (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)

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Disbursements

Pg 3 of 4 | Amendment ☐ 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
Streater for School Board	47-0567252

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☒ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
Carrot Cake Lady www.carrotcakelady.com Tarry1@carrotcakelady.com 919-308-4053	Charles Baldwin Na Howell	☐ Federal ☐ County: ☐ State ☐ Municipality:	Refreshments	$ 80.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	CK	G	11-14-11	$ 80.00	Refreshments for Party
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
Kara Pearce #1703 919 951-9418 5110 Old Chapel Hill Rd Durham, N.C 27701	Charles Baldwin Na Howell	☐ Federal ☐ County: ☐ State ☐ Municipality:	Design Web Page (PR Design Serv.)	$ 500.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	CK	G.	11-25-11	$ 500.00	Web Consultant
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
ATM Withdrawal N. Greensboro St. Carrboro, N.C 27510	Charles Baldwin Na Howell	☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 25.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check Card	G.	12/12/11	$ 22.50	Travel for Campaign Worker
1	Check Card	G	12/12/11	$ 2.50	

5. Total only this Page $ 605.00

6. Total of ALL CRO-1310 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)

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7. Purpose Codes (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)

Disbursements

Pg 4 of 4 Amendment ☐ 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
Streater for School Board	45-0567252

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
Lynn Hallmark Store 1800 E. Franklin St Chapel Hill, NC 27514	Charles Baldwin Na Howell	☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 50.06

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	K	1-27-12	$ 50.06	Thank you Notes Cards
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
		☐ Federal ☐ County: ☐ State ☐ Municipality:		$

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				$	
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
		☐ Federal ☐ County: ☐ State ☐ Municipality:		$

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				$	
				$	

5. Total only this Page $ 50.06

6. Total of ALL CRO-1310 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)

7. Purpose Codes (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)**

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Orange Co. Bd. Of Elections

North Carolina
State Board of Elections
506 N Harrington Street
Raleigh, NC 27603

Kimberly Westbrook-Strach
Deputy Director – Campaign Reporting

Mailing Address
PO Box 27255
Raleigh, NC 27611-7255
(919) 733-7173
Fax: (919) 715-8047

Certification to Close Committee

This Certification is used to express the intent to close the committee after all funds have been properly disbursed.

FILED BY:

Committee Name: Streater for School Board

Treasurer Name: G. Patricia L. Stokes

Treasurer Address: P.O. Box 784

(include city, state, & zip) Goldsboro, N.C 27533-0784

Treasurer Phone: 919-736-0683

I certify that the above mentioned Committee intends to close and cease existence. Upon signing this certification, I declare that all funds have been distributed and reported (if required). In addition, no contributions will be accepted or disbursements made after the "Final Report" is filed or this form is signed. If the Committee at any future time intends to accept or spend funds in support or opposition of any candidate or ballot issue, a new political committee must be formed and registered with the Board of Elections before such activities may commence.

Committees that have filed under the $3,000 threshold will only be required to sign this Certification. No "Final Report" will be required for committees meeting this criterion. Any Committee that did not file under the $3,000 threshold must submit a "Final Report" with this Certification. This report must have a zero balance with no outstanding loans or debts.

Jan. 27, 2012
Date Signed

Signature

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.

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