

Disclosure Report Cover

Amendment
 Yes No

Please note that this cover sheet 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 those kinds of committee changes.
 Use the Addendum form (CRO-1010) if more entries are needed.

1. Committee Information

a. Full Name: No Merger.org c. ID Number: _____

b. Mailing Address (include City, State and Zip Code): 1007 Wood Sage Dr.
Chapel Hill, NC 27516 d. Date Filed: 1/10/07

e. Phone Number: 942-6484

2. Report Year: 2006 3. Period Start Date (mm/dd/yyyy): 10/22/2006 4. Period End Date (mm/dd/yyyy): 12/31/2006 5. Treasurer Full Name: David Weinberg

6. Type of Committee (Check one)

Candidate Campaign Party
 Joint Fundraiser PAC
 Referendum

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

Soft Money Account
 "Booster Fund"
 Building Fund
 NC Political Party Financing Fund
 Presidential Election Year Candidates Fund
 NC Public Campaign Financing Fund
 Other: _____

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

| Municipal | State/County | Referendum |
|--|--|---|
| <input type="checkbox"/> Organizational | <input type="checkbox"/> Organizational | <input type="checkbox"/> Organizational |
| <input type="checkbox"/> Thirty-five day | <input type="checkbox"/> Quarterly | <input type="checkbox"/> Pre-referendum |
| <input type="checkbox"/> Pre-primary | <input type="checkbox"/> First Plus | <input type="checkbox"/> Final |
| <input type="checkbox"/> Pre-election | <input type="checkbox"/> Second | <input type="checkbox"/> Supplemental Final |
| <input type="checkbox"/> Pre-runoff | <input type="checkbox"/> Third Plus | <input type="checkbox"/> Annual |
| <input type="checkbox"/> Semi-annual | <input checked="" type="checkbox"/> Fourth | <input type="checkbox"/> Special |
| <input type="checkbox"/> Mid Year | <input type="checkbox"/> Semi-annual | |
| <input type="checkbox"/> Year End | <input type="checkbox"/> Mid Year | |
| <input type="checkbox"/> Final | <input type="checkbox"/> Year End | |
| <input type="checkbox"/> Special | <input type="checkbox"/> Final | |
| | <input type="checkbox"/> Special | |

9. Special Report Name: _____

10. Account Information

a. Financial Institution Full Name: Wachovia

b. Purpose: PAC Expenditures c. Code: 1

d. Period Begin Balance: \$ 40.76

CERTIFICATION

I certify that the Committee is in compliance with all provisions of Article 22A, including that no funds are commingled with funds for a federal or out-of-state PAC. I further say that this report is complete, true and correct.

David Weinberg Printed Name of Signer David Weinberg Signature of Appointed Treasurer 1/10/07 Date

FOR OFFICE USE ONLY

Date Received: 1/11/07 Employee: _____

Date Postmarked: 1/10/07 Employee: _____

Date Scanned: 1/18/07 Employee: BS

Delivery Method

Normal Mail
 Registered Mail
 Hand Delivered
 Electronically Filed

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Detailed Summary

Amendment
 Yes No

| 1. Committee Full Name (and Fund if applicable) | 2. Type of Report | 3. ID Number | |
|--|-----------------------------|---------------------------|--|
| No Merge R. 019 | 4th Qtr. | | |
| Start of Election Cycle: January 1, _____ | Total this Reporting Period | Total this Election Cycle | |
| 4) Cash on Hand at Start | \$ 40.76 | \$ 0 | |
| RECEIPTS | | | |
| 5) Aggregated Contributions from Individuals (CRO-1205) | \$ 0 | \$ 4266.0 | |
| 6) Contributions from Individuals (CRO-1210) | \$ 3.50 | \$ 313.0 | |
| 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 (CRO-1250) | | | |
| 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 | |
| 12) "Goods and Services" Contributions (CRO-1260) | \$ 0 | \$ 0 | |
| 13) TOTAL RECEIPTS <i>(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)</i> | \$ 3.50 | \$ 4579.0 | |
| EXPENDITURES | | | |
| 14) Disbursements (CRO-1310) | | | |
| 14a) Operating Expenditures (CRO-1310) | \$ 0 | \$ 3788.61 | |
| 14b) Contributions to Candidates/Political Committees (CRO-1310) | \$ 0 | \$ 0 | |
| 14c) Coordinated Party Expenditures (CRO-1310) | \$ 0 | \$ 0 | |
| 15) Loan Repayments (CRO-1420) | \$ 0 | \$ 0 | |
| 16) Refunds/Reimbursements From the Committee (CRO-1320) | \$ 0 | \$ 436.63 | |
| 17) In-Kind Contributions (CRO-1510) | \$ 3.50 | \$ 313.00 | |
| 18) TOTAL EXPENDITURES <i>(Add lines 14a, 14b, 14c, 15, 16, and 17)</i> | \$ 3.50 | \$ 4538.24 | |
| 19) Cash on Hand at End <i>(Add lines 4 and 13 together, then subtract line 18)</i> | \$ 40.76 | \$ 40.76 | |
| 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 | \$ 0 | \$ 0 | |

CRO-1100

NC State Board of Elections

March 2003

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Contributions from Individuals

Amendment
 Yes No

| | | | | | | | |
|---|-----------------|--------------------|------------------------|--|----------------|--|--|
| 1. Committee Full Name (and Fund if applicable) <u>NoMerges.org</u> | | | | | | 2. ID Number | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Mark Peters 967-5451</u> <u>104 Grainger La.</u> <u>Chapel Hill, NC 27514</u> | | | | b. Job Title/Profession <u>IT Consultant</u> | | d. Comments | |
| | | | | c. Employer's Name/Specific Field <u>self</u> | | e. Election Cycle Sum to Date \$ <u>88.00</u> | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | | |
| <input type="checkbox"/> | <u>N/A</u> | <u>N/A</u> | <u>DSN Usage</u> | <u>10/22-12/31</u> | \$ <u>3.50</u> | | |
| <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 | |
| | | | | c. Employer's Name/Specific Field | | e. Election Cycle 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"/> | | | | | \$ | | |
| <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 | |
| | | | | c. Employer's Name/Specific Field | | e. Election Cycle 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"/> | | | | | \$ | | |
| <input type="checkbox"/> | | | | | \$ | | |
| <input type="checkbox"/> | | | | | \$ | | |
| 4. Total only this Page | | | | | \$ <u>3.50</u> | | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | \$ <u>3.50</u> | | |

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In-Kind Contributions

| |
|---|
| Amendment |
| <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

| | | | |
|---|--|--|-----------------------|
| 1. Committee Full Name (and Fund if applicable) | | 2. ID Number | |
| NoMerger.org | | | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | b. Type of Contributor | |
| Mark Peters 967-5451 104 Grainger La. Chapel Hill, NC 27514 | | <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source | |
| | | c. Comments | |
| | | d. Election Cycle Sum to Date | |
| | | \$ 88.00 | |
| e. Description | | f. Date (mm/dd/yyyy) | g. Fair Market Amount |
| DSN Usage - Web site | | 10/22/2006 - 12/31/06 | \$ 3.50 |
| | | | \$ |
| | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | b. Type of Contributor | |
| | | <input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source | |
| | | c. Comments | |
| | | d. Election Cycle Sum to Date | |
| | | \$ | |
| e. Description | | f. Date (mm/dd/yyyy) | g. Fair Market Amount |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | b. Type of Contributor | |
| | | <input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source | |
| | | c. Comments | |
| | | d. Election Cycle Sum to Date | |
| | | \$ | |
| e. Description | | f. Date (mm/dd/yyyy) | g. Fair Market Amount |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| 4. Total only this Page | | \$ 3.50 | |
| 5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i> | | \$ 3.50 | |

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STATE BOARD OF ELECTIONS

6400 Mail Service Center • Raleigh, North Carolina 27699-6400

GARY O. BARTLETT
Executive Director

MAILING ADDRESS:
P.O. BOX 27255
RALEIGH, NC 27611-7255

CERTIFICATION

I certify that the Committee is in compliance with all provisions of Chapter 163 and that this report is true and correct to the best of my knowledge. N. C. Gen. Stat. 163-278.9 provides that all reports filed after October 1, 2006 must be filed by a treasurer or assistant treasurer who has completed mandatory treasurer training. The legislation also requires the State Board of Elections to provide training on the duties of a treasurer or assistant treasurer in person, through regional seminars, and through interactive electronic means. I have not completed this training, but am signing this report with the understanding that I will complete treasurer training no later than three months of receipt of notification that the State Board has interactive electronic means available for treasurer training.

I understand that I may complete training in person before interactive electronic means are available. Within thirty days of completion of the required training, by whatever means, I will review this report and make any necessary amendments to it.

I understand that if I make this certification knowing it to be untrue, I may be prosecuted for perjury under N. C. Gen. Stat. 14-209.

NoMerger.org
Name of Committee

David Weinberg
Printed name of appointed treasurer

[Signature]
Signature of appointed treasurer

~~10/30/06~~ 11/10/07
Date
(DW)

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

Kimberly Westbrook
 Deputy Director – Campaign Reporting

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

Certification of Inactive Status

FILED BY:

Committee Name:

No Merger.org

Treasurer Name:

David Weinberg

Treasurer Address:

1007 Wood Sage Dr.

(include city, state, & zip)

Chapel Hill, NC 27516

Treasurer Phone:

942-6484

I certify that the above named candidate/political committee intends to receive no contributions, nor make any expenditures, until the committee resumes activity.

I understand that if the above circumstances change, it will be necessary for the person responsible for filing financial disclosure reports to file an amended Statement of Organization and the Certification to Return to Active Status form (CRO-3300) within ten days.

1/10/07
 Date Signed

 Signature

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