

# Disclosure Report Cover

|                              |  |
|------------------------------|--|
| Amendment                    |  |
| <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> 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>   |  |
| a. Full Name<br><i>Orange Citizens for Schools &amp; Parks</i>                                      | c. ID Number                             |
| b. Mailing Address (include City, State and Zip Code)<br><i>PO Box 14<br/>Chapel Hill, NC 27514</i> | d. Date Filed<br><i>07/30/09</i>         |
|   | e. Phone Number<br><i>(919) 338-1506</i> |

|                               |  |  |  |
|-------------------------------|--|--|--|
| 2. Report Year<br><i>2009</i> | 3. Period Start Date (mm/dd/yy)<br><i>01/01/09</i> | 4. Period End Date (mm/dd/yy)<br><i>06/30/09</i> | 5. Treasurer Full Name<br><i>Erin Crouse</i> |
|-------------------------------|--|--|--|

|   |  |  |   |  |
|---|--|--|---|--|
| <b>6. Type of Committee (Check One)</b>           |  | <b>9. Type of Report (check only one type of report from one category)</b> |   |  |
| <input type="checkbox"/> Candidate Campaign       | <input type="checkbox"/> Party                 | <b>Municipal</b>   | <b>State/County</b>                     | <b>Referendum</b>                                      |
| <input type="checkbox"/> PAC                      | <input checked="" type="checkbox"/> Referendum | <input type="checkbox"/> Organizational                                    | <input type="checkbox"/> Organizational | <input type="checkbox"/> Organizational                |
| <input type="checkbox"/> Independent Expenditure  | <input type="checkbox"/> Joint Fundraiser      | <input type="checkbox"/> Thirty-five day                                   | Quarterly                               | <input type="checkbox"/> Pre-referendum                |
| <input type="checkbox"/> Legal Expense Fund       |  | <input type="checkbox"/> Pre-primary                                       | <input type="checkbox"/> First          | <input type="checkbox"/> Final                         |
| <b>7. Type of Fund (if applicable, check one)</b> |  | <input type="checkbox"/> Pre-election                                      | <input type="checkbox"/> Second         | <input checked="" type="checkbox"/> Supplemental Final |
| <input type="checkbox"/> Booster Fund             |  | <input type="checkbox"/> Pre-runoff  | <input type="checkbox"/> Third          | <input type="checkbox"/> Annual                        |
| <input type="checkbox"/> Building Fund            |  | Semi-annual  | <input type="checkbox"/> Fourth         | <input type="checkbox"/> Special                       |
| <input type="checkbox"/> Other:                   |  | <input type="checkbox"/> Mid Year  | Semi-annual                             | <b>10. Special Report Name</b>                         |
|   |  | <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        |  |

|  |                                    |                                       |  |
|--|------------------------------------|---------------------------------------|--|
| <b>11. Account Information</b>                                   |                                    | <b>11. Account Information</b>        |  |
| a. Financial Institution Full Name<br><i>Wachovia Bank, N.A.</i> | a. Financial Institution Full Name | b. Purpose<br><i>Primary Checking</i> | c. Account Code<br><i>1</i>                |
|  |                                    |                                       | d. Period Begin Balance<br><i>\$ 14.25</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 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.

*Erin Y. Crouse* \_\_\_\_\_ *[Signature]* \_\_\_\_\_ *07/30/09* \_\_\_\_\_  
 Printed Name of Signer Signature of Appointed Treasurer Date

**FOR OFFICE USE ONLY**

|                                 |                 |   |
|---------------------------------|-----------------|---|
| Date Received: <i>8/3/09</i>    | Employee: _____ | Delivery Method   |
| Date Postmarked: <i>7/31/09</i> | Employee: _____ | <input type="checkbox"/> Normal Mail                                |
| Date Scanned: <i>8/3/09</i>     | Employee: _____ | <input checked="" type="checkbox"/> Registered Mail                 |
| Date Data Entered: _____        | Employee: _____ | <input type="checkbox"/> Hand Delivered                             |
|                                 |                 | <input type="checkbox"/> Electronically Filed                       |
|                                 |                 | <input type="checkbox"/> 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.

**Received**

**AUG 03 2009**

# Detailed Summary

|                              |  |
|------------------------------|--|
| Amendment                    |  |
| <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> 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                     |  |
|--|------------------------------------|----------------------------------|--|
| Orange Citizens for Schools  | Supplemental<br>Final              |                                  |  |
| <b>Start of Election Cycle:</b> January 1, 2009                              | <b>Total this Reporting Period</b> | <b>Total this Election Cycle</b> |  |
| 4) Cash on Hand at Start   | \$ 14.25                           | \$ 14.25                         |  |
| <b>RECEIPTS</b>  |                                    |                                  |  |
| 5) Aggregated Contributions from Individuals (CRO-1205)                      | \$                                 | \$                               |  |
| 6) Contributions from Individuals (CRO-1210)                                 | \$                                 | \$                               |  |
| 7) Contributions from Political Party Committees (CRO-1220)                  | \$                                 | \$                               |  |
| 8) Contributions from Other Political Committees (CRO-1230)                  | \$                                 | \$                               |  |
| 9) Loan Proceeds (CRO-1410)  | \$                                 | \$                               |  |
| 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)                           | \$                                 | \$                               |  |
| 11e) Exempt Purchase Price Sales (CRO-1265)                                  | \$                                 | \$                               |  |
| 12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e) | \$ 0.00                            | \$ 0.00                          |  |
| <b>EXPENDITURES</b>  |                                    |                                  |  |
| 13) Disbursements  |                                    |                                  |  |
| 13a) Operating Expenditures (CRO-1310)                                       | \$ 14.25                           | \$ 14.25                         |  |
| 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)   | \$                                 | \$                               |  |
| 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)          | \$ 14.25                           | \$ 14.25                         |  |
| 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) | \$ 0.00                            | \$ 0.00                          |  |
| <b>ADDITIONAL INFORMATION</b>  |                                    |                                  |  |
| 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)  | \$                                 | \$                               |  |
| 27) 48-Hour Notice Reports Sum (CRO-2220)                                    | \$                                 | \$                               |  |
| 28) Contributions to be Refunded (CRO-1215)                                  | \$                                 | \$                               |  |

# Disbursements

|   |
|---|
| Amendment   |
| <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)<br><u>Orange Citizens for Schools &amp; Parks</u> | 2. ID Number |
|---|--------------|

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<br>(include city, state, & zip)<br><u>Chapel Hill-Carrboro Public School Foundation</u><br><u>PO Box 877</u><br><u>Carrboro, NC 27510</u> | b. Coordinated Committee Name | d. Comments             |
| c. Level Registered (Specify)   |                               | e. Election Sum to Date |
| <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality:                                      |                               | \$ <u>14.25</u>         |

| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount      | k. Required Remarks |
|-----------------|--------------------|-----------------|----------------------|----------------|---------------------|
| <u>1</u>        | <u>check</u>       | <u>0</u>        | <u>06/30/2009</u>    | <u>\$14.25</u> | <u>Donation</u>     |
|                 |                    |                 |                      | \$             |                     |

4. Payee Information     Add     Remove

|  |                               |                         |
|--|-------------------------------|-------------------------|
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)  | b. Coordinated Committee Name | d. Comments             |
| c. Level Registered (Specify)  |                               | e. Election Sum to Date |
| <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><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 |
|-----------------|--------------------|-----------------|----------------------|-----------|---------------------|
|                 |                    |                 |                      | \$        |                     |
|                 |                    |                 |                      | \$        |                     |

4. Payee Information     Add     Remove

|  |                               |                         |
|--|-------------------------------|-------------------------|
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)  | b. Coordinated Committee Name | d. Comments             |
| c. Level Registered (Specify)  |                               | e. Election Sum to Date |
| <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><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 |
|-----------------|--------------------|-----------------|----------------------|-----------|---------------------|
|                 |                    |                 |                      | \$        |                     |
|                 |                    |                 |                      | \$        |                     |

5. Total only this Page    \$ 14.25

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)

\$ 14.25

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 | O* - Other                          |

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



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: Orange Citizens for Schools & Parks  
 Treasurer Name: Erin Crouse  
 Treasurer Address: PO Box 14  
 (include city, state, & zip) Chapel Hill NC 27514  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Treasurer Phone: (919) 338-1500

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.

07/30/09  
 Date Signed

[Signature]  
 Signature

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