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: BLADEN COUNTY REPUBLICAN EXECUTIVE COMMITTEE

c. ID Number:

b. Mailing Address (include City, State and Zip Code):

OCT 29 2018

d. Date Filed: 10-20-2018

e. Phone Number: 910 866-4514

STATE BOARD OF ELECTIONS

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2018	7-1-2018	10-20-2018	JAMES S. PAIT

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

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	**10. Special Report Name**
☐ Final	☐ Year End	
☐ Special	☐ Final	
	☐ Special	

11. Account Information

a. Financial Institution Full Name:

b. Purpose: ALL EXPENSES

c. Account Code: 6

d. Period Begin Balance: $ 2862.75

SCANNED
OCT 29 2018

11. Account Information

a. Financial Institution Full Name:

b. Purpose: MEW

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.

JAMES S. PAIT	James S Pait	10-20-2018
Printed Name of Signer	Signature of Appointed Treasurer	Date

FOR OFFICE USE ONLY

Date Received:	10/24/18	Employee:		Delivery Method
Date Postmarked:	10/24/18	Employee:		☐ Normal Mail
Date Scanned:		Employee:		☒ Registered Mail
Date Data Entered:		Employee:		☐ 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
Bladen County Republican party Executive Committee General Fund	third quater	

Start of Election Cycle: January 1, 2017		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$ 2867.75	$ 271.08
RECEIPTS			
5) Aggregated Contributions from Individuals	*(CRO-1205)*	$ 600.00	$ 2853.00
6) Contributions from Individuals	*(CRO-1210)*	$ 500.00	$ 1600.00
7) Contributions from Political Party Committees	*(CRO-1220)*	$ 5500.00	$ 6000.00
8) Contributions from Other Political Committees	*(CRO-1230)*	$	$
9) Loan Proceeds	*(CRO-1410)*	$	$
10) Refunds/Reimbursements To the Committee	*(CRO-1240)*	$ 100.00	$ 100.00
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)*	$	$
11 e) Exempt Purchase Price Sales	*(CRO-1265)*	$	$
12) TOTAL RECEIPTS *(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)*		$ 6700.00	$ 10553
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	*(CRO-1310)*	$ 3685.42	$ 4941.75
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)*		$ 3685.42	$ 4941.75
19) Cash on Hand at End *(Add lines 4 and 12 together, then subtract line 18)*		$ 5882.33	$ 5882.33
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)*	$	$
27) 48-Hour Notice Reports Sum	*(CRO-2200)*	$	$
28) Contributions to be Refunded	*(CRO-1215)*	$	$

Aggregated Contributions from Individuals

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
Bladen county republican executive committee	

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	G	cash		7/2/18	$ 25.00
☐ Add ☐ Remove	G	Cash		7/2/18	$ 40.00
☐ Add ☐ Remove	G	Cash		7/2/18	$ 10.00
☐ Add ☐ Remove	G	Cash		7/2/18	$ 20.00
☐ Add ☐ Remove	G	Cash		7/2/18	$ 40.00
☐ Add ☐ Remove	G	Cash		7/2/18	$ 20.00
☐ Add ☐ Remove	G	Cash		7/9/18	$ 20.00
☐ Add ☐ Remove	G	Cash		7/9/18	$ 10.00
☐ Add ☐ Remove	G	Cash		7/9/18	$ 15.00
☐ Add ☐ Remove	G	Cash		7/9/18	$ 40.00
☐ Add ☐ Remove	G	Cash		7/9/18	$ 40.00
☐ Add ☐ Remove	G	Cash		7/9/18	$ 30.00
☐ Add ☐ Remove	g	Cash		7/13/18	$ 20.00
☐ Add ☐ Remove	G	Cash		7/13/18	$ 20.00
☐ Add ☐ Remove	G	Cash		7/13/18	$ 20.00
☐ Add ☐ Remove	G	Cash		7/13/18	$ 45.00
☐ Add ☐ Remove	G	Cash		7/13/18	$ 10.00
☐ Add ☐ Remove	G	Cash		7/13/18	$ 40.00
☐ Add ☐ Remove	G	Cash		7/13/18	$ 40.00
☐ Add ☐ Remove	G	Cash		7/13/18	$ 40.00
☐ Add ☐ Remove	G	Cash		7/13/18	$ 30.00
☐ Add ☐ Remove	G	Cash		7/13/18	$ 25.00

4. Total only this Page	$ 600.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ 600.00

Contributions from Individuals

Pg 1 of 1 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
Bladen County Republican party exec Committee	

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
Michael t Adcock 229 estates dr Elizabethtown nc 28337	retired			$ 500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	g	check		10-1-18	$ 500.00
☐					$
☐					$

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
☐					$
☐					$
☐					$

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
☐					$
☐					$
☐					$

4. Total only this Page	$ 500.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 500.00

Contributions from Political Party Committees

Amendment ☐ Yes ☒ No

Use this form to report contributions from a political party

1. Committee Full Name (and Fund if applicable)	2. ID Number
Bladen county republican executive committee	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Comments	c. Election Sum to Date
Raybon for Senate 404 W Brunswick st Southport NC 28461	GOTV	$ 3500.00

d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount
G	Check		10-1/18	$ 2500.00
G	Check		10/8/18	$ 1000.00
				$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Comments	c. Election Sum to Date
William Brisson for House Committee PO Box 531 Dublin NC 28332	GOTV	$ 2500.00

d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount
G	Check		10/8/18	$ 2000.00
				$
				$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Comments	c. Election Sum to Date
		$

d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount
				$
				$
				$

4. Total only this Page	$ 5500.00
5. Total of ALL CRO-1220 Pages *(This line must be on line 7 of Detailed Summary Page CRO-1100)*	$ 5500.00

Refunds/Reimbursements To the Committee

Pg 1 of 1 | Amendment ☐ Yes ☒ No

Use this form to report refunds received by the committee or reimbursements for a previous expenditure.

1. Committee Full Name (and Fund if applicable)	2. ID Number
Bladen county republican executive Committee	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Type of Committee	g. Comments
Dublin Peanut Festival Town of Dublin Dublin NC 28332	☐ Candidate ☐ PAC ☐ Referendum ☐ Party	Cancelled evevt
	e. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	h. Original Expenditure Date 9-24-18
		i. Original Expenditure Amt $ 100.00

b. Job Title/Profession	c. Employer's Name/Specific Field	f. Purpose	j. Election Sum to Date
			$ 100.00

k. Account Code	l. Form of Payment	m. In-Kind Description	n. Date (mm/dd/yyyy)	o. Amount
G	Check		10/3/18	$ 100.00

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Type of Committee	g. Comments
	☐ Candidate ☐ PAC ☐ Referendum ☐ Party	
	e. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	h. Original Expenditure Date
		i. Original Expenditure Amt $

b. Job Title/Profession	c. Employer's Name/Specific Field	f. Purpose	j. Election Sum to Date
			$

k. Account Code	l. Form of Payment	m. In-Kind Description	n. Date (mm/dd/yyyy)	o. Amount
				$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Type of Committee	g. Comments
	☐ Candidate ☐ PAC ☐ Referendum ☐ Party	
	e. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	h. Original Expenditure Date
		i. Original Expenditure Amt $

b. Job Title/Profession	c. Employer's Name/Specific Field	f. Purpose	j. Election Sum to Date
			$

k. Account Code	l. Form of Payment	m. In-Kind Description	n. Date (mm/dd/yyyy)	o. Amount
				$

4. Total only this Page	$ 100.00
5. Total of ALL CRO-1240 Pages *(This line must be on line 10 of Detailed Summary Page CRO-1100)*	$ 100.00

Disbursements

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): Bladen County Republican Party Executive Committee

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 (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
Printing Shoppe po box 1373 Shallotte NC 28459		☐ Federal ☐ County: ☐ State ☐ Municipality:	print & mail	$ 2123.99

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
G	Check	b & I	10/10/18	$2123.99	print & Mail
				$	

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
Jessica Dowless 2766 twisted Hickory Elizabethtown NC 28336		☐ Federal ☐ County: ☐ State ☐ Municipality:	GOTV	$ 240.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
G	check	o	10/9/18	$120.00	GOTV
g	check	o	10/15/18	$120.00	GOTV

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
B B & T Elizabethtown NC 28337		☐ Federal ☐ County: ☐ State ☐ Municipality:	New Checks	$

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
G	Debit	O	10/10/18	$16.19	checks
				$	

5. Total only this Page: $ 2380.18

6. Total of ALL CRO-1310 Pages: $ 3685.42

(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)**

Disbursements

 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): Bladen County Republican Party Executive Committee

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 (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
Bladen Office Supply p o box 425 Elizabethtown nc 28337		☐ Federal ☐ County: ☐ State ☐ Municipality:	Brochures	$ 174.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
G	Check	B	10/9/18	$174.00	brochures
				$	

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
U S post office White Oak NC 28399		☐ Federal ☐ County: ☐ State ☐ Municipality:	postage	$ 21.66

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
G	check	I	7/11/18	$6.91	
				$	

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
W#almart Elizabethtown NC 28337		☐ Federal ☐ County: ☐ State ☐ Municipality:	Tent	$ 84.33

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
G	Check	F	9/24/18	$84.33	
				$	

5. Total only this Page $ 265.24

6. Total of ALL CRO-1310 Pages $ 3685.42

(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)**

Disbursements

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
Bladen county republican executive committee	

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	d. Comments
Dublin peanut Festival town of Dublin Dublin nc 28332	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 100.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
G	check	C	9/24/18	$100.00	Space at festiv
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
Mccrae Dowless twisted Hickory Elizabethtown NC 28337	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	GOTV e. Election Sum to Date $ 940.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
G	Check	O	10/17/18	$940.00	GOTV
				$	

4. Payee Information ☐ Add ☐ Remove

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

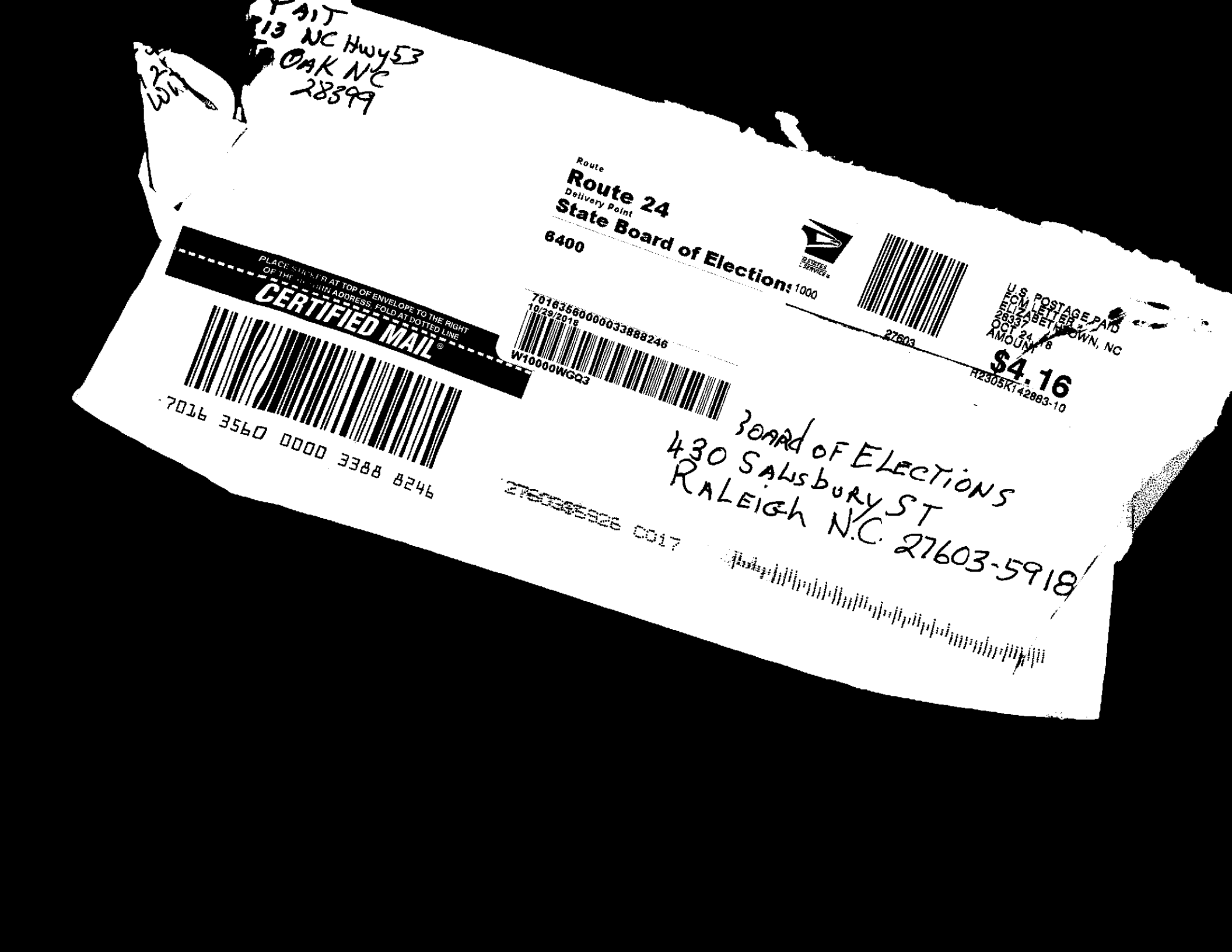
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				$	
				$	

5. Total only this Page	$ 1040.00
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)*	$ 3685.42

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)**


13 NC Hwy 53
OAK NC
28399
Route
Route 24
Delivery Point
State Board of Elections
6400
1000
27603
U.S. POSTAGE PAID
FCM LETTER
ELIZABETHTOWN, NC
28337
OCT 24 18
AMOUNT
$4.16
R2305K142883-10
PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE
CERTIFIED MAIL®
7016 3560 0000 3388 8246
70163560000033888246
10/29/2018
W10000WG03
BOARD OF ELECTIONS
430 SALISBURY ST
RALEIGH N.C. 27603-5918
C017