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: Re-elect Renee Sisk

c. ID Number: 4CD245

b. Mailing Address (include City, State and Zip Code): 286 GATEWOOD DR New Bern, NC 28562

d. Date Filed: 4-26-10

e. Phone Number: 638-8730

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2010	3/22/10	4/17/10	MARY Renee Sisk

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	
☐ Final	☐ Year End	
☐ Special	☐ Final	
	☐ Special	

10. Special Report Name

11. Account Information

a. Financial Institution Full Name: WACHOVIA BANK

b. Purpose: Campaign.

c. Account Code:

d. Period Begin Balance: $ 569.41

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.

Renee Sisk	Renee Sisk	4/25/10
Printed Name of Signer	Signature of Appointed Treasurer	Date

FOR OFFICE USE ONLY

Date Received: _____ Employee: _____

Date Postmarked: _____ Employee: _____

Date Scanned: _____ 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.

4-16-10 Rec'd & returned to candidate same day for Corrections EB

☑ Yes ☐ No

Detailed Summary

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
Re-Elect Renee Sisk	Quarterly	HCD 245

Start of Election Cycle: January 1, 2010		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$ 569.41	$
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	$	$
6) Contributions from Individuals	(CRO-1210)	$ 1864.60	$ 2942.60
7) Contributions from Political Party Committees	(CRO-1220)	$	$
8) Contributions from Other Political Committees	(CRO-1230)	$	$
9) Loan Proceeds	(CRO-1410)	$ -0-	$ 500.00
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)		$ 1864.60	$ 3442.60
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	$ -0-	$ 231.59
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)	$ -0-	$ -0-
16) Refunds/Reimbursements from the Committee	(CRO-1320)	$	$
17) In-Kind Contributions	(CRO-1510)	$ 1864.60	$ 2642.60
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		$ 1864.60	$ 2874.19
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		$ 569.41	$ 569.41
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-2220)	$	$
28) Contributions to be Refunded	(CRO-1215)	$	$

Amendment ☑ Yes ☐ No

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Contributions from Individuals

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
Re-Elect Renee Sisk	HCD 245

☐ Add ☐ Remove

3. Contributor Information

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
MARY RENEE SISK 286 GATEWOOD DR NEW BERN, NC 28562	Ret	Ret	CTO - 10	$ 150.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Pers Check	TV AD	3/18/10	$ 150.00
☐					$
☐					$

☐ Add ☐ Remove

3. Contributor Information

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
MARY RENEE SISK 286 Gatewood DR NEW BERN, NC	Ret	Ret	PRINT Elect	$ 485.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Credit Card	CARD Printing	3/19/10	$ 215.00
☐	1	Credit Card	CARD Printing	3/29/10	$ 120.00
☐					$

☐ Add ☐ Remove

3. Contributor Information

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
MARY R SISK 286 GATEWOOD DR NEW BERN, NC 28562	Ret	Ret	UPS store	$ 859.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Credit Card	Postage Mail	3/29/10	$ 374.00
☐					$
☐					$

4. Total only this Page	$ 859.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary, Page CRO-1100)*	$ 859.00

Contributions from Individuals

Pg 2 of 2 | 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
Re Elect Renee Sisk	4CD2W5

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
MARY R SISK 286 Gate wood Dr New Bern, NC 28562	Ret	Ret	Postal Service	$ 1211.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Credit Card	Postage	4/5/10	$ 352.00
☐					$
☐					$

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
MARY R SISK 286 GATEWOOD DR NEW BERN. NC 28562	Ret	Ret	Newspaper Ads Sun Journal	$ 1804.60

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Credit Card	Newspaper Ads	4/12/10	$ 593.60
☐					$
☐					$

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
MARY R SISK 286 GATEWOOD DR NEW BERN. NC 28562	Ret	Ret		$ 1864.60

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Check (pers)	Sign backing	4/20/10	$ 60.00
☐					$
☐					$

4. Total only this Page	$ 1005.60
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 1864.60

In-Kind Contributions

Pg 1 of ___ Amendment ☑ Yes ☐ No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.
Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)	2. ID Number
Re-elect Renee Sisk	4CD 2H5

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
MARY Renee SISK 258 Gatewood Dr New Bern. NC 28562	☐ Individual ☑ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date: $ 150.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Personal check to pay for TV Ad.	3/18/10	$ 150.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Mary Renee Sisk 258 Gatewood Dr New Bern. NC 28562	☐ Individual ☑ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date: $ 265.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Prent Elect credit card ~~[illegible]~~ charge for printing	3/19/10	$ 215.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Mary R Sisk 258 Gatewood Dr New Bern. NC 28562	☐ Individual ☑ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date: $ 485.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Prent Elect CC charge for printing	3/29/10	$ 120.00
		$
		$

4. Total only this Page	$ 485.00
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 1864.60

In-Kind Contributions

Pg 2 of 3 Amendment ☑ Yes ☐ No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.
Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)	2. ID Number
Re Elect Rivers Desh	4CD2W5

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Mary R Desh 286 Gatewood Dr New Bern. NC. 28562	☐ Individual ☑ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date $ 859.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Credit Card Charge to UPS	3/29/10	$ 374.00
Store for Postage & Mailing		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Mary R Desh 286 Gatewood Dr New Bern NC 28562	☐ Individual ☑ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date $ 1221.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
US Postal Service for	4/5/10	$ 352.00
postage (Credit Card Charge)		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Mary R Desh 286 Gatewood Dr New Bern. NC 28562	☐ Individual ☑ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date $ 1804.60

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Credit Card Charge to Sun	4/12/10	$ 593.60
Journal for Newspaper Ads		$
		$

4. Total only this Page	$ 1323.60
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 1864.60

In-Kind Contributions

Pg 3 of 3 Amendment ☑ Yes ☐ No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.
Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)	2. ID Number
Re-Elect Renee Sisk	4CD 245

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
~~William~~ Mary R Sisk 286 gatewood Dr New Bern NC 28562	☐ Individual ☑ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date $ 1804.60

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Personal Check to W Ritchie	4/20/10	$ 60.00
for Materials to Lock Signs		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
	☐ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date $

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
		$
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
	☐ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date $

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
		$
		$
		$

4. Total only this Page	$ 60.00
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 1864.60