

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 Tanya P. Roberts for Board of Education District 5	c. ID Number
b. Mailing Address (include City, State and Zip Code) 106 Rollingwood Drive New Bern, NC 28562-8406	d. Date Filed 05/18/2012
e. Phone Number 252-665-3424	

RECEIVED MAY 22 2012

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2012	02/29/2012	04/21/2012	Carole Earwood

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

11. Account Information		11. Account Information	
a. Financial Institution Full Name East Carolina Bank		a. Financial Institution Full Name	
b. Purpose all campaign expenses	c. Account Code 2	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 0		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.

Tanya P. Roberts _____ 05/18/2012
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: <u>MAY 21 2012</u>	Employee: <u>Bmuel</u>	Delivery Method <input checked="" type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training
Date Postmarked: _____	Employee: _____	
Date Scanned: _____	Employee: _____	
Date Data Entered: _____	Employee: _____	

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.

Disbursements

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
Tanya P. Roberts for Bd of Education District 5					
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Craven County Bd of Elections				<div style="font-size: 2em; transform: rotate(-15deg); opacity: 0.5;">RECEIVED MAY 22 2012</div>	
New Bern, NC 28560		c. Level Registered (Specify)			
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: Craven			
				e. Election Sum to Date	
				\$ 66.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
I	Check 8926	Initial	02/29/2012	\$66.00	Filing Fee
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Campaign Partner www.campaignpartner.com				Website	
		c. Level Registered (Specify)		e. Election Sum to Date	
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: Craven		\$ 29.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
3	Credit Card	A	03/11/2012	\$29.00	Registration of Domain Name
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
My Campaign Store PO Box 596 Jeffersonville, IN 47131 902 E. Court Avenue Jeffersonville, IN 47130				Yard Signs 1 st Order	
		c. Level Registered (Specify)		e. Election Sum to Date	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: Craven		\$ 469.35	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
2	Check 1001	B	03/30/2012	\$469.35	Yard Signs (100)
				\$	
5. Total only this Page					\$ 564.35
6. Total of ALL CRO-1310 Pages					\$ 1,163.96
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					
7. Purpose Codes (List detailed expenditure code in (h.) above)					
A* - Media		B* - Printing		C* - Fundraising	
E - Salaries		F* - Equipment		G - Political Party	
I - Postage		J - Penalties		K* - Office Expenses	
O* - Other				D - To Another Candidate	
				H* - Holding Public Office Expenses	
				Q* - Donation to Legal Expense Fund	
* Codes require detailed explanation in required remarks field (k)					

Disbursements

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
Tanya P. Roberts for Bd of Education District 5					
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>		b. Coordinated Committee Name		d. Comments	
Coastal NC Coffee News 242 Drake Landing New Bern, NC 28560				RECEIVED MAY 22 2012	
		c. Level Registered (Specify)			
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> 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
2	Check 1002	A	04/06/2012	\$100.00	Print Ads Weekly
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>		b. Coordinated Committee Name		d. Comments	
My Campaign Store PO Box 596 Jeffersonville, IN 47131 902 E. Court Avenue Jeffersonville, IN 47130				Yard Signs 2 nd Order	
		c. Level Registered (Specify)			
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
		Craven		e. Election Sum to Date	
				\$ 968.96	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
2	Check 1003	B	04/19/2012	\$499.61	Yard Signs (100)
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>		b. Coordinated Committee Name		d. Comments	
		c. Level Registered (Specify)			
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> 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					\$ 599.61
6. Total of ALL CRO-1310 Pages <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					\$ 1,163.96
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>					
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)					

Aggregated Contributions from Individuals

Page

1 of 1

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				
Tanya P. Roberts for Bd of Education District 5						
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add		Check		03/21/2012	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		Check		03/21/2012	\$ 25.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		Check		03/29/2012	\$ 25.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		Cash		03/29/2012	\$ 10.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		Check	RECEIVED MAY 22 2012	04/02/2012	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		Check		04/02/2012	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		PayPal		03/17/2012	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		PayPal		03/20/2012	\$ 25.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		PayPal		03/25/2012	\$ 10.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		PayPal		03/25/2012	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		PayPal		04/02/2012	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		PayPal		04/03/2012	\$ 25.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		PayPal		04/04/2012	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		PayPal		04/05/2012	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		PayPal		04/11/2012	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		Check		04/11/2012	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		Check		04/11/2012	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		Check		04/16/2012	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		Check		04/17/2012	\$ 30.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add					\$	
<input type="checkbox"/> Remove					\$	
<input type="checkbox"/> Add					\$	
<input type="checkbox"/> Remove					\$	
4. Total only this Page					\$ 690.00	
5. Total of ALL CRO-1205 Pages					\$ 690.00	
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

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	
Tanya P. Roberts for Board of Education District 5							
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Jane V. Peacock 2025 Cox Woods Road Clayton, NC 27520-9340				Retired		RECEIVED MAY 22 2012	
				c. Employer's Name/Specific Field			
				N/A		e. Election Sum to Date	
						\$ 200.00	
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 checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Bob Livingston 210 Nydegg Road New Bern, NC 28562				Retired			
				c. Employer's Name/Specific Field			
				N/A		e. Election Sum to Date	
						\$ 100.00	
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 checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Robert H. McCunn 620 Goose Creek Road New Bern, NC 28562				Pharmacist			
				c. Employer's Name/Specific Field			
				Medicap Pharmacy		e. Election Sum to Date	
						\$ 100.00	
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						\$ 400.00	
5. Total of ALL CRO-1210 Pages						\$ 750.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

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	
Tanya P. Roberts for Board of Education District 5							
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Carol J. Mattocks 5307 Trent Woods Drive New Bern, NC 28562				Retired		<div style="font-size: 2em; transform: rotate(-15deg); opacity: 0.5;">RECEIVED MAY 22 2012</div>	
				c. Employer's Name/Specific Field			
				N/A		e. Election Sum to Date	
						\$ 250.00	
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 checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Franklin D. Albertson 27091 Country Oak Drive Brooksville, FL 34602-5464				Retired			
				c. Employer's Name/Specific Field			
				N/A		e. Election Sum to Date	
						\$ 100.00	
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 checked="" 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 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						\$ 350.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 750.00	

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	
Tanya P. Roberts for Bd of Education District 5			
Start of Election Cycle: January 1, 2012		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 0	\$ 0
RECEIPTS			
5) Aggregated Contributions from Individuals	<i>(CRO-1205)</i>	\$ 690.00	\$ 690.00
6) Contributions from Individuals	<i>(CRO-1210)</i>	\$ 750.00	\$ 750.00
7) Contributions from Political Party Committees	<i>(CRO-1220)</i>	\$ 0	\$ 0
8) Contributions from Other Political Committees	<i>(CRO-1230)</i>	\$ 0	\$ 0
9) Loan Proceeds	<i>(CRO-1410)</i>	\$ 0	\$ 0
10) Refunds/Reimbursements To the Committee	<i>(CRO-1240)</i>	\$ 0	\$ 0
11) Other Receipt Sources			
11a) Interest on Bank Accounts	<i>(CRO-1250)</i>	\$ 0	\$ 0
11b) Contributions from Not-for-Profit Organizations	<i>(CRO-1250)</i>	\$ 0	\$ 0
11c) Outside Sources of Income	<i>(CRO-1250)</i>	\$ 0	\$ 0
11d) Legal Expense Fund – Other Sources	<i>(CRO-1270)</i>	\$ 0	\$ 0
11 e) Exempt Purchase Price Sales	<i>(CRO-1265)</i>	\$ 0	\$ 0
12) TOTAL RECEIPTS <i>(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)</i>		\$ 1,440	\$ 1,440
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	<i>(CRO-1310)</i>	\$ 1,163.96	\$ 1,163.96
13b) Contributions to Candidates/Political Committees	<i>(CRO-1310)</i>	\$ 0	\$ 0
13c) Coordinated Party Expenditures	<i>(CRO-1310)</i>	\$ 0	\$ 0
14) Aggregated Non-Media Expenditures	<i>(CRO-1315)</i>	\$ 0	\$ 0
15) Loan Repayments	<i>(CRO-1420)</i>	\$ 0	\$ 0
16) Refunds/Reimbursements From the Committee	<i>(CRO-1320)</i>	\$ 0	\$ 0
17) In-Kind Contributions	<i>(CRO-1510)</i>	\$ 0	\$ 0
18) TOTAL EXPENDITURES <i>(Add lines 13a, 13b, 13c, 14, 15, 16 and 17)</i>		\$ 1,163.96	\$ 1,163.96
19) Cash on Hand at End <i>(Add lines 4 and 12 together, then subtract line 18)</i>		\$ 276.04	\$ 276.04
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	<i>(CRO-1330)</i>	\$ 0	
21) Outstanding Loans (incl. ones from other campaigns)	<i>(CRO-1430)</i>	\$ 0	
22) Debts and Obligations owed By the Committee	<i>(CRO-1610)</i>	\$ 0	
23) Debts and Obligations owed To the Committee	<i>(CRO-1620)</i>	\$ 0	
24) Account Transfers Within the Committee	<i>(CRO-1720)</i>	\$ 0	
25) Administrative Support	<i>(CRO-1710)</i>	\$ 0	\$ 0
26) Forgiven Loans	<i>(CRO-1440)</i>	\$ 0	\$ 0
27) 48-Hour Notice Reports Sum	<i>(CRO-2200)</i>	\$ 0	\$ 0
28) Contributions to be Refunded	<i>(CRO-1215)</i>	\$ 0	\$ 0