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

Full Name	c. ID Number
Friends for Jerry Monette	3CD21D
b. Mailing Address (include City, State and Zip Code)	**d. Date Filed**
4250 Wilcox Road New Bern, NC 28562	4-26-2010
	e. Phone Number
	252-638-1817

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2010	02-09-2010	04-17-2010	Jerry Glenn Monette

6. Type of Committee (Check One)

- ☒ Candidate Campaign
- ☐ PAC
- ☐ Independent Expenditure
- ☐ Legal Expense Fund
- ☐ Party
- ☐ Referendum
- ☐ Joint Fundraiser

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

- ☐ "Booster Fund"
- ☐ Building Fund
- ☐ Other:

Number of Fundraisers this Report

1

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	b. Purpose	c. Account Code	d. Period Begin Balance
Branch Banking & Trust	Campaign Checking Account	1	$ 13.56

11. Account Information

a. Financial Institution Full Name	b. Purpose	c. Account Code	d. Period Begin Balance
State Employees Credit Union	Campaign Credit Card	2	$ 0.00

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.

Jerry G. Monette	Jerry G. Monette	4-26-2010
Printed Name of Signer	Signature of Appointed Treasurer	Date

FOR OFFICE USE ONLY

Date Received:	4/26/10	Employee:	LL
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

RECEIVED APR 26 2010 BY

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

Use this form to summarize all disclosure reporting forms and to total monetary information.

Amendment ☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number
Friends for Jerry Monette	Pre-Primary 1st Quarter	3CD21D

Start of Election Cycle: January 1, 2010		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$ 13.56	$
RECEIPTS			
5) Aggregated Contributions from Individuals	*(CRO-1205)*	$ 740.00	$
6) Contributions from Individuals	*(CRO-1210)*	$ 3000.00	$
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)*	$	$
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)*		$ 3740.00	$
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	*(CRO-1310)*	$ 511.15	$
13b) Contributions to Candidates/Political Committees	*(CRO-1310)*	$ 200.00	$
13c) Coordinated Party Expenditures	*(CRO-1310)*	$	$
14) Aggregated Non-Media Expenditures	*(CRO-1315)*	$ 320.00	$
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)*		$ 1031.15	$
19) Cash on Hand at End *(Add lines 4 and 12 together, then subtract line 18)*		$ 2722.41	$
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-2200)*	$ 1000.00	$
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
Friends for Jerry Monette	3CD21D

3. Contributor Information

a. Amend		b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☒	Add	1	Check		3-1-2010	$ 25.00
☐	Remove					
☒	Add	1	Cash		3-27-2010	$ 20.00
☐	Remove					
☒	Add	1	Cash		3-27-2010	$ 20.00
☐	Remove					
☒	Add	1	Cash		3-27-2010	$ 20.00
☐	Remove					
☒	Add	1	Cash		3-27-2010	$ 20.00
☐	Remove					
☒	Add	1	Cash		3-27-2010	$ 20.00
☐	Remove					
☒	Add	1	Cash		3-27-2010	$ 20.00
☐	Remove					
☒	Add	1	Cash		3-27-2010	$ 20.00
☐	Remove					
☒	Add	1	Cash		3-27-2010	$ 20.00
☐	Remove					
☒	Add	1	Cash		3-27-2010	$ 20.00
☐	Remove					
☒	Add	1	Cash		3-27-2010	$ 20.00
☐	Remove					
☒	Add	1	Cash		3-27-2010	$ 20.00
☐	Remove					
☒	Add	1	Cash		3-27-2010	$ 20.00
☐	Remove					
☒	Add	1	Cash		3-27-2010	$ 20.00
☐	Remove					
☒	Add	1	Cash		3-27-2010	$ 20.00
☐	Remove					
☒	Add	1	Cash		3-27-2010	$ 20.00
☐	Remove					
☒	Add	1	Cash		3-27-2010	$ 20.00
☐	Remove					
☒	Add	1	Cash		3-27-2010	$ 20.00
☐	Remove					
☒	Add	1	Cash		3-27-2010	$ 20.00
☐	Remove					
☒	Add	1	Cash		3-27-2010	$ 20.00
☐	Remove					
☒	Add	1	Cash		3-27-2010	$ 20.00
☐	Remove					

Total only this Page $ 445.00 ✓

5. Total of ALL CRO-1205 Pages $

(This line must be on line 5 of Detailed Summary Page CRO-1100)

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
Friends for Jerry Monette	3CD21D

3. Contributor Information

a. Amend		b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☒	Add		Cash		3-28-2010	$ 20.00
☐	Remove					
☒	Add		Cash		3-28-2010	$ 20.00
☐	Remove					
☒	Add		Cash		3-28-2010	$ 20.00
☐	Remove					
☒	Add		Cash		3-28-2010	$ 20.00
☐	Remove					
☒	Add		Cash		3-28-2010	$ 20.00
☐	Remove					
☒	Add		Cash		3-28-2010	$ 10.00
☐	Remove					
☒	Add		Cash		3-28-2010	$ 10.00
☐	Remove					
☒	Add		Cash		3-28-2010	$ 10.00
☐	Remove					
☒	Add		Cash		3-28-2010	$ 10.00
☐	Remove					
☒	Add		Cash		3-28-2010	$ 10.00
☐	Remove					
☒	Add		Cash		3-28-2010	$ 10.00
☐	Remove					
☒	Add		Cash		3-28-2010	$ 10.00
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☒	Add		Cash		3-28-2010	$ 10.00
☐	Remove					
☒	Add		Cash		3-28-2010	$ 10.00
☐	Remove					
☒	Add		Cash		3-28-2010	$ 10.00
☐	Remove					
☒	Add		Cash		3-28-2010	$ 10.00
☐	Remove					
☒	Add		Cash		3-28-2010	$ 10.00
☐	Remove					
☒	Add		Cash		3-28-2010	$ 5.00
☐	Remove					
☒	Add		Cash		3-28-2010	$ 5.00
☐	Remove					
☒	Add		Cash		3-28-2010	$ 5.00
☐	Remove					
☒	Add		Cash		3-28-2010	$ 5.00
☐	Remove					

Total only this Page	$ ~~230.00~~ 250.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$

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
Friends for Jerry Monette	3CD21D

3. Contributor Information

a. Amend		b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☒	Add	1	Cash		3-28-2010	$ 5.00
☐	Remove					
☒	Add	1	Cash		3-28-2010	$ 5.00
☐	Remove					
☒	Add	1	Cash		3-28-2010	$ 5.00
☐	Remove					
☒	Add	1	Cash		3-28-2010	$ 5.00
☐	Remove					
☒	Add	1	Cash		3-28-2010	$ 5.00
☐	Remove					
☒	Add	1	Cash		3-28-2010	$ 5.00
☐	Remove					
☒	Add	1	Cash		3-28-2010	$ 5.00
☐	Remove					
☒	Add	1	Cash		3-28-2010	$ 5.00
☐	Remove					
☒	Add	1	Cash		3-28-2010	$ 5.00
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☐	Remove					

Total only this Page	$ 45.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ 740.00

Contributions from Individuals

Pg 1 of _____ 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
Friends for Jerry Monette	3CD21D

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
Catherine J. Chitty 1308 Green Springs Rd. New Bern, NC 28560 252-672-8365	Pharmacist	Walgreen/Pharmacy	Good Friend	$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Check		3-4-2010	$ 100.00
☐					$
☐					$

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
Marcus W. Chessnutt 814 Madame Moore Ln. New Bern, NC 28562 252-633-3215	Attorney	Self Employed/Criminal Law	Good Friend	$ 1000.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Check		3-5-2010	$ 1000.00
☐					$
☐					$

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
Lenore M. Adametz 4400 Haywood Farms Rd. New Bern, NC 28562	Homemaker	Retired	Good Friend	$ 300.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Check		3-24-10	$ 300.00
☐					$
☐					$

4. Total only this Page	$ 1400.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$

Contributions from Individuals

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
Friends for Jerry Monette	3CD21D

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
Forrest E. Minges Jr. 151 Quarterdeck New Bern, NC 28562 252-633-5279	Hunting Guide	Self Employed	Good Friend	$ 500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Check		3-26-2010	$ 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
David L. Ward Jr. 3601 Country Club Rd. New Bern, NC 28560 252-637-5543	Attorney	Self Employed/Corporate Law Ward&Smith	Good Friend	$ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Check		4-12-2010	$ 250.00
☐					$
☐					$

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
Hugh R. Overholt 705 Cove Harbor New Bern, NC 28562 252-633-9728	Major General(Retired) Attorney	Ward&Smith/Govt. Law	Good Friend	$ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Check		4-12-2010	$ 250.00
☐					$
☐					$

4. Total only this Page	$ 1000.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$

Contributions from Individuals

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
Friends for Jerry Monette	3CD21D

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
C.H. Pope Jr. 262 Shoreline Dr. New Bern, NC 28562 252-638-6576	Attorney	Ward&Smith/Real Estate	Good Friend	$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Check		4-14-2010	$ 200.00
☐					$
☐					$

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
William R. Lathan 3631 Wedgewood Dr. New Bern, NC 28562 252-638-6879	Attorney	Ward&Smith/Banking	Good Friend	$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Check		4-9-10	$ 100.00
☐					$
☐					$

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
A. Rexford Willis 1107 Country Club Rd. New Bern, NC 28562 252-637-4086	Attorney	Ward&Smith/Corporate	Good Friend	$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Check		4-12-2010	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 400.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$

Contributions from Individuals

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
Friends for Jerry Monette	3CD21D

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
Barry P. Harris 603 Neuse Harbor Blvd. New Bern, NC 28560 252-636-1382	Attorney	Ward&Smith/Banking	Good Friend	$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Check		4-11-2010	$ 100.00
☐					$
☐					$

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
Frank H. Sheffield Jr. 202 Johnson St. New Bern, NC 28560 252-636-0306	Attorney	Ward&Smith/Environmental	Good Friend	$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Check		4-12-2010	$ 100.00
☐					$
☐					$

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
☐					$
☐					$
☐					$

4. Total only this Page	$ 200.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 3000.00

Disbursements

Pg 1 of ___ 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
Friends for Jerry Monette	3CD21D

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
No. 9 Township Fire Department 3783 NC Hwy. 55 W New Bern, NC 28562 252-636-0055		☐ Federal ☐ County: ☐ State ☐ Municipality:	Donation Annual Fundraiser	$ 100.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	O*	3-8-2010	$100.00	Family Nite Fundraiser
				$	

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
Ntl.WildTurkeyFederation 770 Augusta Rd. Edgefield, SC 29824 (803) 637-3106		☐ Federal ☐ County: ☐ State ☐ Municipality:	Local Annual Banquet	$ 60.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	O*	3-11-2010	$60.00	Dinner and Banquet
				$	

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
Riverdale Fuel Market 110 Riverdale Rd. New Bern, NC 28562 252-637-9800		☐ Federal ☐ County: ☐ State ☐ Municipality:	Fuel	$ 75.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Ck. Card	O*	4-1-2010	$75.00	Operational Expense
				$	

5. Total only this Page	$ 235.00
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)*	$

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
Friends for Jerry Monette	3CD21D

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
Riverdale Fuel Market 110 Riverdale Rd. New Bern, NC 28562 252-637-9800		☐ Federal ☐ County: ☐ State ☐ Municipality:	Fuel	$ 163.55

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Ck. Card	O*	4-11-2010	$52.55	Operational Expense
				$	

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
Sun Journal P.O. Box 1149 New Bern, NC 28663 252-638-1801		☐ Federal ☐ County: ☐ State ☐ Municipality:	Political Advertisements	$ 223.60

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	A*	4-7-2010	$223.60	Political Ads
				$	

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
		☐ Federal ☐ County: ☐ State ☐ 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	$ 276.15
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)*	$ 511.15

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
Friends for Jerry Monette	3CD21D

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
Alice G. Underhill P.O. Box 14322 New Bern, NC 28561 252-637-4147	Elect Alice G. Underhill NC House 3	Political Event
	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
1	Check	D	3-30-2010	$100.00	Contribution
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
Craven CountyDemocratic Party P.O. Box 1174 New Bern, NC 28563	Craven County Democratic Party	Political Event
	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
1	Check	G	4-15-2010	$100.00	Contribution
				$	

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	$ 200.00
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)*	$ 200.00

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)**

Aggregated Non-Media Expenditures

Page 1 of 1

Amendment ☐ Yes ☑ No

Optional form used to report NC Non-Media Expenditures of $50 or less.

1. Committee Full Name (and Fund if applicable): Friends for Jerry Monette

2. ID Number: 3CD21D

3. Payee Information

a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
☑ Add ☐ Remove	1	Check	O*	3-22-10	$ 50.00	Contribution
☑ Add ☐ Remove	1	Draft	K*	3-19-10	$ 2.00	Statement Fee
☑ Add ☐ Remove	1	Check	O*	3-25-10	$ 50.00	contribution
☑ Add ☐ Remove	1	Ck. Card	K*	3-26-10	$ 25.62	Staples
☑ Add ☐ Remove	1	Check	1	4-7-10	$ 32.00	P.O. Box 3002
☑ Add ☐ Remove	1	Ck. Card	O*	4-8-10	$ 36.00	Fuel
☑ Add ☐ Remove	1	Check	O*	4-12-10	$ 30.00	Contribution
☑ Add ☑ Remove	1	Ck. Card	O*	4-15-10	$ 30.00	Fuel
☑ Add ☐ Remove	1	Ck. Card	O*	4-16-10	$ 47.38	Meal (Vote Comm.)
☑ Add ☐ Remove	1	Check	O*	4-16-10	$ 25.00	Contribution
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	

4. Total only this Page $ 320.00

5. Total of ALL CRO-1315 Pages $ 320.00

(This line must be on line 14 of Detailed Summary Page CRO-1100)

6. Purpose Codes (List detailed expenditure code in (d) above)

	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* - Donations to Legal Expense Fund**
O* - Other			

*** Codes require detailed explanation in required remarks field (g)**

48-Hour Notice

Page 1 of 1 Amendment ☐ Yes ☑ No

Use this form to report all contributions of $1,000 or more. Notice must be filed within 48 hours of receipt of contribution.
The 48-Hour reporting period begins the day after the last day of the 1st Qrtr-Plus report period and ends the day of the Primary and begins the day after the last day of the 3rd Qrtr-Plus report and ends the day of the General Election.
All 48 Hour In-Kind Contributions must be recorded on CRO-1510 and attached.
This notice may be faxed in order to meet the 48 hour deadline.

1. Committee Information

a. Full Name: Friends for Jerry Monette

c. ID Number: 3CD21D

b. Mailing Address (include City, State and Zip Code): 4250 Wilcox Road, New Bern, N.C. 28562

d. Report Date: 3-8-2010

e. Phone Number: 252-638-1817

2. Contribution Information

a. Full Name, Mailing Address & Phone (include city, state, and zip): Marcus W. Chesnutt, 814 Madam Moore Lane, New Bern, N.C. 28562 (252) 633-3215

☐ Add ☐ Remove

b. Type of Contributor
- ☑ Individual (if checked, must specify b2 and b3)
- ☐ Political Party
- ☐ Other Political Committee (if checked, must specify b1)
- ☐ Not-for-Profit (if checked, must specify b4)
- ☐ Other Source:

b1. Type of Committee
- ☐ Federal ☐ County:
- ☐ State ☐ Municipality:

b2. Job Title/Profession: Attorney

b4. Federal ID Number:

b3. Employer's Name/Specific Field: Marc Chesnutt

c. Form of Payment: Check

d. Date (mm/dd/yyyy): 3-8-2010

f. Amount: $ 1,000.00

e. Account Code: 1

g. Election Sum to Date: $ 1,000.00

2. Contribution Information

a. Full Name, Mailing Address & Phone (include city, state, and zip):

☐ Add ☐ Remove

b. Type of Contributor
- ☐ Individual (if checked, must specify b2 and b3)
- ☐ Political Party
- ☐ Other Political Committee (if checked, must specify b1)
- ☐ Not-for-Profit (if checked, must specify b4)
- ☐ Other Source:

b1. Type of Committee
- ☐ Federal ☐ County:
- ☐ State ☐ Municipality:

b2. Job Title/Profession:

b4. Federal ID Number:

b3. Employer's Name/Specific Field:

c. Form of Payment:

d. Date (mm/dd/yyyy):

f. Amount: $

e. Account Code:

g. Election Sum to Date: $

3. Total Contributions THIS Page (sum all the '2f' entries on this page) $ 1,000.00

4. Total Contributions ALL Pages (if multi-page, only list on page 1) $ 1,000.00

CERTIFICATION

I certify that the Committee or Fund is in compliance with all 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, correct and that I have been trained by the NC State Board of Elections. The contributions were received no more than 48 hours prior to this notice being filed. I understand that all contributions including those reported on this notice must also be reported on the next scheduled campaign disclosure report.

Jerry G. Monette — Printed Name of Signer

Jerry G. Monette — Signature of Appointed Treasurer

3-8-2010 — Date