

Disclosure Report Cover

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

Amendment

Yes

No

1. Committee Information

a. Full Name

ends for Jerry Monette

c. ID Number

3CD21D

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

4250 Wilcox Rd.
New Bern, NC 28562

d. Date Filed

10-25-2010

e. Phone Number

252-638-1817

RECEIVED
OCT 25 2010
BY: _____

2. Report Year

2010

3. Period Start Date (mm/dd/yy)

7-13-2010

4. Period End Date (mm/dd/yy)

10-16-2010

5. Treasurer Full Name

Jerry Glenn Monette

6. Type of Committee (Check One)

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

9. Type of Report (check only one type of report from one category)

Municipal

- Organizational
 Thirty-five day
 Pre-primary
 Pre-election
 Pre-runoff
 Semi-annual
 Mid Year
 Year End
 Final
 Special

State/County

- Organizational
 Quarterly
 First
 Second
 Third
 Fourth
 Semi-annual
 Mid Year
 Year End
 Final
 Special

Referendum

- Organizational
 Pre-referendum
 Final
 Supplemental Final
 Annual
 Special

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

- "Booster Fund"
 Building Fund

Other:

Number of Fundraisers this Report

0

10. Special Report Name

11. Account Information

a. Financial Institution Full Name

Branch Banking & Trust

b. Purpose

Campaign
Checking
Account

c. Account Code

1

d. Period Begin Balance

\$ 57.38

11. Account Information

a. Financial Institution Full Name

State Employees Credit Union

b. Purpose

Campaign
Credit
Card

c. Account Code

2

d. Period Begin Balance

\$ 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

Printed Name of Signer

Jerry G. Monette
Signature of Appointed Treasurer

10-25-2010

Date

FOR OFFICE USE ONLY

Date Received: _____

Date Postmarked: _____

Date Scanned: _____

Date Data Entered: _____

Employee: _____

Employee: _____

Employee: _____

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.

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) Friends for Jerry Monette	2. Type of Report 3 rd Quarter	3. ID Number 3CD21D
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Start of Election Cycle: January 1, 2010	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	\$ 57.38	\$

RECEIPTS		
5) Aggregated Contributions from Individuals (CRO-1205)	\$	\$
6) Contributions from Individuals (CRO-1210)	\$ 800.00	\$
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)	\$ 800.00	\$

EXPENDITURES		
13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$ 408.40	\$
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$	\$
13c) Coordinated Party Expenditures (CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures (CRO-1315)	\$ 437.51	\$
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)	\$ 845.91	\$
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 11.47	\$

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)	\$	\$

Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

Pg 1 of 2 Amendment Yes No

1. Committee Full Name (and Fund if applicable)

Friends for Jerry Monette

2. ID Number

3CD21D

3. Contributor Information

Add Remove

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

Kenneth E. Morris III
503 Haywood Creek Dr.
Trent Woods, NC 28562
252-636-6228

b. Job Title/Profession

Insurance

c. Employer's Name/Specific Field

Self Employed/Insurance

d. Comments

Good Friend

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"/>		Check		8-5-2010	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information

Add Remove

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

Kenneth E. Morris
103 Yacht Club RD.
New Bern, NC 28562
252-633-4441

b. Job Title/Profession

Insurance

c. Employer's Name/Specific Field

Self Employed/ Insurance

d. Comments

Good Friend

e. Election Sum to Date

\$ 300.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		Check		8-8-2010	\$ 300.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information

Add Remove

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

Malcom R. Chitty
1312 Green Springs Rd.
New Bern, NC 28560
252-633-3999

b. Job Title/Profession

Eye Doctor

c. Employer's Name/Specific Field

Retired

d. Comments

Good Friend

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"/>		Check		8-9-2010	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

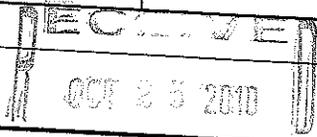
4. Total only this Page

5. Total of ALL CRO-1210 Pages

(This line must be on line 6 of Detailed Summary Page CRO-1100)

\$ 600.00

\$



Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

Pg 2 of 2 Amendment Yes No

1. Committee Full Name (and Fund if applicable)

Friends for Jerry Monette

2. ID Number

3CD21D

3. Contributor Information

Add Remove

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

L.R. Thomas Jr.
299 Rennys Creek Dr.
New Bern, NC 28560
252-637-3306

b. Job Title/Profession

Retired

c. Employer's Name/Specific Field

d. Comments

Good Friend

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"/>		Check		9-4-2010	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information

Add Remove

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

Alvin D. Bannister
1707 Tryon Rd.
New Bern, NC 28560
252-636-3045

b. Job Title/Profession

Machinist

c. Employer's Name/Specific Field

Self Employed

d. Comments

Good Friend

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"/>		Check		9-20-2010	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

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
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page

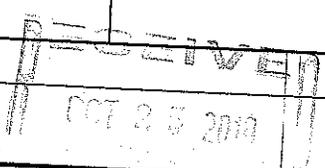
5. Total of ALL CRO-1210 Pages

(This line must be on line 6 of Detailed Summary Page CRO-1100)

CRO-1210

\$ 200.00

\$ 800.00



Aggregated Non-Media Expenditures

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 3CD 21D
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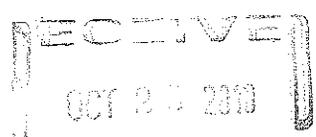
3. Payee Information						
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
<input checked="" type="checkbox"/> Add	1	CK	D	8-11-10	\$ 30.00	dyes
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	CK. Card	O	8-12-10	\$ 42.00	fuel
<input type="checkbox"/> Remove						
<input checked="" type="checkbox"/> Add	1	CK. Card	O	8-16-10	\$ 40.00	Cub Scouts
<input type="checkbox"/> Remove						
<input checked="" type="checkbox"/> Add	1	CK. Card	O	8-17-10	\$ 20.00	Golden Corral
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Draft	K	8-20-10	\$ 2.00	statement fee
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	CK. Card	K	8-23-10	\$ 41.99	Staples
<input type="checkbox"/> Remove						
<input checked="" type="checkbox"/> Add	1	CK.	O	8-30-10	\$ 30.00	York Rite BBA
<input type="checkbox"/> Remove						
<input checked="" type="checkbox"/> Add	1	CK. Card	O	9-5-10	\$ 33.85	D.D. Youth Sunday
<input type="checkbox"/> Remove						
<input checked="" type="checkbox"/> Add	1	CK.	O	9-14-10	\$ 25.00	Soft Drinks
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	CK. Card	O	9-14-10	\$ 48.70	fuel
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Draft	K	9-21-10	\$ 2.00	statement fee
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	CK. Card	O	9-25-10	\$ 20.64	Parade Candy
<input type="checkbox"/> Remove						
<input checked="" type="checkbox"/> Add	1	CK. Card	O	9-25-10	\$ 39.00	fuel
<input type="checkbox"/> Remove						
<input checked="" type="checkbox"/> Add	1	CK.	O	9-25-10	\$ 31.00	Cove City F.D.
<input type="checkbox"/> Remove						
<input checked="" type="checkbox"/> Add	1	CK. Card	O	9-26-10	\$ 31.33	Dunkin Donuts Y/S
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add					\$	
<input type="checkbox"/> Remove					\$	
<input type="checkbox"/> Add					\$	
<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					\$	437.51
5. Total of ALL CRO-1315 Pages					\$	437.51

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

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

E - Salaries	B* - Printing	C* - Fundraising	D - To Another Candidate
I - Postage	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
O* - Other	J - Penalties	K* - Office Expenses	Q* - Donations to Legal Expense Fund

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



BY: _____

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) Friends for Jerry Monette	2. ID Number 3CD21D
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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) Riverdale Fuel Market 110 Riverdale Rd. New Bern, NC 28562 252-637-9800	b. Coordinated Committee Name	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	d. Comments Fuel
			e. Election Sum to Date \$ 338.95

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	Ck. Card		8-28-2010	\$58.40	Operational Expense
				\$	

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Cove City Fire Dept. 425 South Main St. Cove City, NC 28523 252-638-4712	b. Coordinated Committee Name	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	d. Comments Fundraiser Benefit Raffle
			e. Election Sum to Date \$ 131.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	Check		9-25-2010	\$100.00	Contribution
				\$	

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Friends of NRA 3317 U.S.Hwy. 70 E New Bern, NC 28560 252-633-1129	b. Coordinated Committee Name	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	d. Comments Sponsorship
			e. Election Sum to Date \$ 250.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	Check		10-4-2010	\$250.00	Banquet & Fundraiser
				\$	

5. Total only this Page

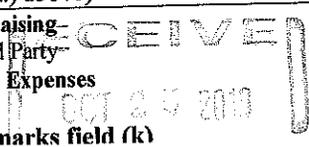
6. Total of ALL CRO-1310 Pages
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)

\$ 408.40

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)



BY: _____