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: GEORGE S LINER JR

c. ID Number: DCDULB

b. Mailing Address (include City, State and Zip Code): 203 CAMBRIDGE CT HAVELOCK NC 28532

d. Date Filed: 22 APR 2014

e. Phone Number: 252 447 8898

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2014	1-24-14	4-19-14	GEORGE S LINER JR

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: NAVY FEDERAL CREDIT UNION

b. Purpose: ALL CAMPAIGN EXPENSES

c. Account Code: /

d. Period Begin Balance: $ 0

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.

GEORGE S LINER	[signature]	22 APR 14
Printed Name of Signer	Signature of Appointed Treasurer	Date

FOR OFFICE USE ONLY

APR 22 2014

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.

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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
Committee To Elect Georges Liner	1st QTR	DCDULB

Start of Election Cycle: January 1, 2014		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$ Ø	$ 750.00
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	$ 250.00	$ 250.00
6) Contributions from Individuals	(CRO-1210)	$ 1500.00	$ 1500.00
7) Contributions from Political Party Committees	(CRO-1220)	$ Ø	$ Ø
8) Contributions from Other Political Committees	(CRO-1230)	$ Ø	$ Ø
9) Loan Proceeds	(CRO-1410)	$ Ø	$ Ø
10) Refunds/Reimbursements to the Committee	(CRO-1240)	$ Ø	$ Ø
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	$ Ø	$ Ø
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	$ Ø	$ Ø
11c) Outside Sources of Income	(CRO-1250)	$ Ø	$ Ø
11d) Legal Expense Fund - Other Sources	(CRO-1270)	$ Ø	$ Ø
11e) Exempt Purchase Price Sales	(CRO-1265)	$ Ø	$ Ø
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		$ 1,750.00	$ 1,750.00
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	$ 781.81	$ 781.81
13b) Contributions to Candidates/Political Committees	(CRO-1310)	$ Ø	$ Ø
13c) Coordinated Party Expenditures	(CRO-1310)	$ Ø	$ Ø
14) Aggregated Non-Media Expenditures	(CRO-1315)	$ Ø	$ Ø
15) Loan Repayments	(CRO-1420)	$ Ø	$ Ø
16) Refunds/Reimbursements from the Committee	(CRO-1320)	$ Ø	$ Ø
17) In-Kind Contributions	(CRO-1510)	$ Ø	$ Ø
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		$ 781.81	$ 781.81
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		$ 968.19	$ 968.19
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	$ Ø	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	$ Ø	
22) Debts and Obligations owed by the Committee	(CRO-1610)	$ Ø	
23) Debts and Obligations owed to the Committee	(CRO-1620)	$ Ø	
24) Account Transfers Within the Committee	(CRO-1720)	$ Ø	
25) Administrative Support	(CRO-1710)	$ Ø	$ Ø
26) Forgiven Loans	(CRO-1440)	$ Ø	$ Ø
27) 48-Hour Notice Reports Sum	(CRO-2220)	$ Ø	$ Ø
28) Contributions to be Refunded	(CRO-1215)	$ Ø	$ Ø

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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
COMMITTEE TO ELECT GEORGE SLIVER DEDULB	

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	1	CHECK		2-28-2014	$ 50.00
☐ Add ☐ Remove	1	CASH		3-18-2014	$ 50.00
☐ Add ☐ Remove	1	CASH		4-7-2014	$ 25.00
☐ Add ☐ Remove	1	CHECK		4-7-2014	$ 50.00
☐ Add ☐ Remove	1	CHECK		4-7-2014	$ 50.00
☐ Add ☐ Remove	1	CHECK		4-7-2014	$ 25.00
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
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☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$

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

APR 22 2014

Contributions from Individuals

Pg 1 of 3

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
COMMITTEE TO ELECT GEORGE S LINER	DCDULB

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 + JEANNE MARMAROSE 302 MAHAFFEY LN NEW BERN, NC 28560 252 447 4492	RETIRED	MILITARY		$ 400.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	CHECK		1-31-2014	$ 250.00
☐	1	CHECK		3-17-2014	$ 150.00
☐					$

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
CHRIS + PATTY HARRISON 107 COUPLES LN NEW BERN, NC 28560 252 463 3694	RETIRED	MILITARY		$ 500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	CHECK		3-18-2014	$ 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
GEORGE + KAT COOK 204 CAMBRIDGE CT HAVELOCK, NC 28532 252 447 3565	RETIRED	MILITARY		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	CHECK		3-28-2014	$ 200.00
☐					$
☐					$

4. Total only this Page	$ 1100.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 1500.00

APR 22 2014

Contributions from Individuals

Pg 2 of 3 | 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
COMMITTEE TO ELECT GEORGE SLAGER	TCD2LB

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
GEORGE GORBIN 202 POPLAR RD HAVELOCK, NC 28532 252 447 7591	MIL RETIRED	MILITARY		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	CHECK		2-24-14	$ 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
IRIS WOODHEAD 112 GREENWAY CT HAVELOCK NC 28532 252 447 8865	RETIRED	SALES		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	CHECK		3-17-14	$ 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
JIM FREEMAN 107 SKI CT HAVELOCK, NC 28532 252 447 3510	RETIRED	STATE GOVT		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	CHECK		3-27-14	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 300.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$

APR 22 2014

Contributions from Individuals

Pg 3 of 3

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
COMMITTEE TO ELECT GEORGE SLIFER	DCDULB

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
SHARON PROPST 353 CAROLINA PINES BLVD NEW BERN, NC 28560 252-447-7255	RETIRED	STATE DEPT.		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	CHECK		4-7-2014	$ 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
☐					$
☐					$
☐					$

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	$ 100.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 1500

APR 22 2014

Disbursements

Pg 1 of 3 | 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
COMMITTEE TO ELECT GEORGE S LINER	DCDVLB

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): AGE GRAPHICS, 678 COLLINS RD, LITTLE ROCK, CA 95747, 1-877 928 3225

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 360.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	CHECK	B	3-22-14	$360.00	PRINTING SIGNS
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): UPRINTING, 800 HASKILL AVE, VAN NUYS, CA 91406, 1-888 888 4211

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 112.69

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	CHECK	B	3-22-14	$ 112.69	PRINT HANGARS
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): STAPLES.COM, 1-888-333-3399

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 34.94

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	CHECK	B	3-22-14	$ 34.94	PAPER BINDERS
				$	

5. Total only this Page $ 507.63

6. Total of ALL CRO-1310 Pages $ 781.81

(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)**

APR 22 2014

Disbursements

Pg 2 of 3 | 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
COMMITTEE TO ELECT GEORGE S LINER	JCDULB

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): SUN JOURNAL, P.O. BOX 13948, NEWBERN, NC 28561, 252 636 8101

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 49.36

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	CHECK	A	3-28-14	$ 49.36	ADVERTISEMENT
	CASH			$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): WHITEMAN'S ENGRAVING, 235 W. MAIN ST, HAVELOCK, NC 28532, 252 447 9793

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 276

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	CASH	F	3-5-14	$ 13.82	NAME TAG
1	CASH	F	3-12-14	$ 13.82	2 NAME TAG

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): CAROLINA PINES FIRE DEPT, NEWBERN, NC

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 35.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	CHECK	O	4-7-14	$ 35.00	RENT + CREW
				$	

5. Total only this Page $ 112.00

6. Total of ALL CRO-1310 Pages $ 789.81

(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)**

APR 22 2014

Disbursements

Pg 3 of 3

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
COMMITTEE TO ELECT GEORGE S LIPER	JCDULB

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
ST. TIMOTHY'S 140 US HIGHWAY 70 HAVELOCK, NC 28532 252 447 7535		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 35.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	CHECK	O	4-15-14	$ 35.00	MEET + GREET
				$	

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
BOARD OF ELECTION 406 CRAVEN ST NEW BERN, NC 28560 252 636 6610		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 115.44

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	CHECK		2-10-14	$ 115.44	FILING FEE
				$	

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
TARGET NEW BERN, NC 28560 252-638-2954		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 11.74

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	CASH	G	3-31-14	$ 11.74	DRINKS FOR MEET
				$	

5. Total only this Page	$ 162.18
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)*	$ 781.81

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)**

APR 22 2014