

Disclosure Report Cover Sheet

Please note that this cover sheet cannot be used to amend committee information such as the committee address; treasurer, assistant treasurer, or custodian of books information; or depository information. You must amend the Statement of Organization (CRO-2100) to make those kinds of committee changes.

1. Name of Committee or Fund <i>Edgecombe/Wash Political Council</i>				6. Date <i>7/9/04</i>	
2. Address <i>Drawer Q</i>				7. ID Number	
3. City <i>Pine tops</i>		4. State <i>NC</i>	5. Zip <i>27864</i>	8. Phone	
9. Type of Report <i>2004 Second Quarter Report</i>			10. Period Covered		11. Amendment
			Start <i>4-15-04</i>	End <i>6-30-04</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
12. Type of Committee or Fund (Check one)					
<input type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> "Booster Fund"		
<input checked="" type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Soft Money Account	<input type="checkbox"/> Building Fund		
<input type="checkbox"/> Other Fund: _____					
13. Treasurer Name <i>Dennis Nussey</i>					
14. Assistant Treasurer Name(s)					
15. Custodian of Books Name <i>Dennis Nussey</i>					
16. Bank/Depository/Credit Account Information					
a. Name	b. Purpose	c. Code	d. Period Begin Balance		
<i>Centra RBC</i>	<i>Got out To Vote</i>		\$ <i>1,485.¹⁵</i>		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		

CERTIFICATION

I certify that the Committee is in compliance with all provisions of Article 22A, including that no funds are commingled with funds for a federal or out-of-state PAC. I further say that this report is complete, true and correct.

Dennis Nussey
Signature of Appointed Treasurer or Candidate

RECEIVED
JUL 12 2004
7/8/04
Date

Detailed Summary

1. Name of Committee or Fund		2. Type of Report		3. ID Number	
E. Ingle/ Nash Political Caucus		Second Quarter		794 00 16	
Start of Election Cycle: January 1, 20__		Total this Period	Total this Election Cycle	For Office Use Only	
4) Cash on Hand at Start of Election Cycle			\$ 1,485. ¹⁵		
5) Cash on Hand at Start of Present Reporting Period		\$ 1,485. ¹⁵			
RECEIPTS					
6) Contributions from Individuals (CRO-1210)		\$ —	\$ —		
7) Contributions from Political Party Committees (CRO-1220)		\$ —	\$ —		
8) Contributions from Other Political Committees (CRO-1230)		\$ 3,000. ⁰⁰	\$ 3,000. ⁰⁰		
9) Loan Proceeds (CRO-1410)		\$ —	\$ —		
10) Refunds & Reimbursements to Committee (CRO-1240)		\$ —	\$ —		
11) Other Receipt Sources (CRO-1250)					
11a) Interest on Bank Accounts (CRO-1250)		\$ —	\$ —		
11b) Contributions from Not-for-Profit Organizations (CRO-1250)		\$ —	\$ —		
11c) Outside Sources of Income (CRO-1250)		\$ —	\$ —		
12) TOTAL RECEIPTS (Add lines 6, 7, 8, 9, 10, 11a, 11b, and 11c)		\$ 3,000. ⁰⁰	\$ 3,000. ⁰⁰		
EXPENDITURES					
13) Disbursements (CRO-1310)					
13a) Operating Expenditures (CRO-1310)		\$ 885. ¹⁷	\$ 885. ¹⁷		
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$ —	\$ —		
13c) Coordinated Party Expenditures (CRO-1310)		\$ —	\$ —		
14) Loan Repayments (CRO-1420)		\$ —	\$ —		
15) Refunds from Committee (CRO-1320)		\$ —	\$ —		
16) In-Kind Contributions (CRO-1510)		\$ —	\$ —		
17) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, and 16)		\$ 885. ¹⁷	\$ 885. ¹⁷		
18) Cash on Hand at End of Reporting Period (For this Period, add lines 5 and 12 together, then subtract line 17) (For this Election Cycle, add lines 4 and 12 together, then subtract line 17)		\$ 3,600. ⁰⁰	\$ 3,600. ⁰⁰		
Additional Information					
19) Non-Monetary Gifts Given to Committees (CRO-1330)		\$ —	\$ —		
20) Outstanding Loans (including ones from other campaigns) (CRO-1430)		\$ —	\$ —		
21) Debts and Obligations owed BY the Committee (CRO-1610)		\$ —	\$ —		
22) Debts and Obligations owed TO the Committee (CRO-1620)		\$ —	\$ —		
23) Parent Entity's Administrative Support (CRO-1710)		\$ —	\$ —		

Disbursements

1. Name of Committee or Fund					2. ID Number		
Edgecombe/Nash Political Council					7940016		
3. Type of Disbursement (Please use separate CRO-1330 forms for each type of Disbursements.)							
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input checked="" type="checkbox"/> Coordinated Party Expenditures			
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	NAACP Rocky Mount, NC 27801		Banquet Tickets	053100880	CIC	4/16/04	\$ 200.00
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:	i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date		
					\$		
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Wright Center 501 Raleigh Rd Rocky Mount, NC 27803		Banquet Tickets	-	CIC	5/31/04	\$ 75.00
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:	i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date		
					\$		
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Fred's Club Rocky Mount, NC 27801		Get out to vote Refreshment	-	CIC	6/4/04	\$ 110.17
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:	i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date		
					\$		
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	City of Rocky Mount Recreation Dept		Shelter A	-	CIC	6/11/04	\$ 20.00
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:	i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date		
					\$		
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Very Truly Yours P.O. Box 1520 Rocky Mount, NC 27801		Banquet 2004 Contract	-	CIC	6/21/04	\$ 450.00
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:	i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date		
					\$		
5. Total only this Page						\$ 855.17	
6. Total of ALL CRO-1310 Related Pages (only show on last page)						\$ 855.17	
<small>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</small>							
<small>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</small>							
<small>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</small>							

Disbursements

1. Name of Committee or Fund						2. ID Number		
3. Type of Disbursement <i>(Please use separate CRO-1330 forms for each type of Disbursements.)</i>								
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input checked="" type="checkbox"/> Coordinated Party Expenditures				
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Delaware Cox P.O. Box 1142 Poultney Mount, VT. 2702			Gas	-	Chk	6/25/11	\$ 30.00
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date		
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$ 30.00		
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
								\$
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date		
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$		
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
								\$
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date		
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$		
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
								\$
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date		
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$		
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
								\$
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date		
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$		
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
								\$
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date		
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$		
5. Total only this Page							\$ 30.00	
6. Total of ALL CRO-1310 Related Pages <i>(only show on last page)</i>							\$ 885.11	
<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>								

D.4

In-Kind Contributions

1. Name of Committee or Fund Edgecombe/Wash Political Caucus		2. ID Number 1994 0016		
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip) The Conservative Council of NC Conservative PAC P.O. Box 12671 Raleigh, NC 27605	c. Description Conservative PAC	d. Date (mm/dd/yyyy) 6/25/04	e. Fair Market Amount \$ 3000.00
	b. Type of Contributor <input type="checkbox"/> Individual <input type="checkbox"/> Party Committee <input checked="" type="checkbox"/> Other Political Committee <input type="checkbox"/> Other Receipt Source	f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		g. Election Cycle Sum to Date \$ 3000.00
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	c. Description	d. Date (mm/dd/yyyy)	e. Fair Market Amount \$
	b. Type of Contributor <input type="checkbox"/> Individual <input type="checkbox"/> Party Committee <input type="checkbox"/> Other Political Committee <input type="checkbox"/> Other Receipt Source	f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		g. Election Cycle Sum to Date \$
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	c. Description	d. Date (mm/dd/yyyy)	e. Fair Market Amount \$
	b. Type of Contributor <input type="checkbox"/> Individual <input type="checkbox"/> Party Committee <input type="checkbox"/> Other Political Committee <input type="checkbox"/> Other Receipt Source	f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		g. Election Cycle Sum to Date \$
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	c. Description	d. Date (mm/dd/yyyy)	e. Fair Market Amount \$
	b. Type of Contributor <input type="checkbox"/> Individual <input type="checkbox"/> Party Committee <input type="checkbox"/> Other Political Committee <input type="checkbox"/> Other Receipt Source	f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		g. Election Cycle Sum to Date \$
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	c. Description	d. Date (mm/dd/yyyy)	e. Fair Market Amount \$
	b. Type of Contributor <input type="checkbox"/> Individual <input type="checkbox"/> Party Committee <input type="checkbox"/> Other Political Committee <input type="checkbox"/> Other Receipt Source	f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		g. Election Cycle Sum to Date \$
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	c. Description	d. Date (mm/dd/yyyy)	e. Fair Market Amount \$
	b. Type of Contributor <input type="checkbox"/> Individual <input type="checkbox"/> Party Committee <input type="checkbox"/> Other Political Committee <input type="checkbox"/> Other Receipt Source	f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		g. Election Cycle Sum to Date \$
4. Total only this Page				\$ 3000.00
5. Total of ALL CRO-1510 Pages (only show on last page)				\$ 3000.00
<i>(This line must be on line 16 of Detailed Summary Page CRO-1100)</i>				

Loan Proceeds

1. Name of Committee or Fund				2. ID Number	
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	i. Account Number/Code
		e. Job Title/Profession	f. Employer's Name/Specific Field		j. Form of Payment
		g. Security Pledged			k. Amount \$
		h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	i. Account Number/Code
		e. Job Title/Profession	f. Employer's Name/Specific Field		j. Form of Payment
		g. Security Pledged			k. Amount \$
		h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	i. Account Number/Code
		e. Job Title/Profession	f. Employer's Name/Specific Field		j. Form of Payment
		g. Security Pledged			k. Amount \$
		h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	i. Account Number/Code
		e. Job Title/Profession	f. Employer's Name/Specific Field		j. Form of Payment
		g. Security Pledged			k. Amount \$
		h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	i. Account Number/Code
		e. Job Title/Profession	f. Employer's Name/Specific Field		j. Form of Payment
		g. Security Pledged			k. Amount \$
		h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			
4. Total only this Page					\$
5. Total of ALL CRO-1410 Pages (only show on last page)					\$
<i>(This line must be on line 9 of Detailed Summary Page CRO-1100)</i>					\$