

48-Hour Notice

Page 1 of 1 Amendment  Yes  No

To be Used by Committees to Report Contributions of \$1,000 or more			
<b>I. Committee Information</b>			
a. Full Name Edencombe Nash Black Political Committee		c. ID Number 7940016	
b. Mailing Address (include City, State and Zip Code) P.O. Box Q Pinebluffs, NC 27869		d. Report Date 11/1/04	
		e. Phone Number (252) 827-4856	
<b>2. Contribution Information</b>		<b>2. Contribution Information</b>	
a. Full Name, Mailing Address & Phone (include city, state, and zip) The National Leadership PAC P.O. Box 5577 Monticello, NY 10827		a. Full Name, Mailing Address & Phone (include city, state, and zip) <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	
b. Type of Contributor <input type="checkbox"/> Individual (if checked, must specify c2 and c3) <input checked="" type="checkbox"/> Political Party <input type="checkbox"/> Other Political Committee (if checked, must specify c1) <input type="checkbox"/> Not-for-Profit (if checked, must specify c4) <input type="checkbox"/> Other Source:		b. Type of Contributor <input type="checkbox"/> Individual (if checked, must specify c2 and c3) <input type="checkbox"/> Political Party <input type="checkbox"/> Other Political Committee (if checked, must specify c1) <input type="checkbox"/> Not-for-Profit (if checked, must specify c4) <input type="checkbox"/> Other Source:	
b1. Type of Committee <input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality:		b1. Type of Committee <input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality:	
b2. Job Title/Profession	b4. Federal ID Number	b2. Job Title/Profession	b4. Federal ID Number
b3. Employer's Name/Specific Field	c. Form of Payment Check	b3. Employer's Name/Specific Field	c. Form of Payment
d. Date (mm/dd/yyyy) 10/29/04	f. Amount \$ 3,000.00	d. Date (mm/dd/yyyy)	f. Amount \$
e. Account Code 021000021	g. Election Cycle Sum to Date \$ 3,000.00	e. Account Code	g. Election Cycle Sum to Date \$
<b>3. Total Contributions THIS Page</b> (sum all the '2f' entries on this page)		\$ 3,000.00	
<b>4. Total Contributions ALL Pages</b> (if multi-page, only list on page 1)		\$ 3,000.00	
<b>CERTIFICATION</b>			
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, correct, and the contributions were received no more than 48 hours prior to this notice being filed. All contributions received, not over \$1,000, will be reported on the next scheduled filing report.			
Dennis Hoosey Printed Name of Signer		Signature of Appointed Treasurer	
		11/1/04 Date	

CRO-2220

NC State Board of Elections

March 2003