

Federal PAC Report of Contributions to NC Political Committees

Pg _____ of _____ Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)		2. NC ID Number	
IBEW-COPE			
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee	
N/A		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party	
		c. Level Registered (Specify)	
		<input type="checkbox"/> State <input type="checkbox"/> County: <input type="checkbox"/> Municipality:	
		d. Office/District	f. Election Cycle Sum to Date
			\$
g. Form of Payment	h. Non-Monetary Gift Description	i. Date (mm/dd/yyyy)	j. Amount
			\$
			\$
			\$
			\$
			\$
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee	
		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party	
		c. Level Registered (Specify)	
		<input type="checkbox"/> State <input type="checkbox"/> County: <input type="checkbox"/> Municipality:	
		d. Office/District	f. Election Cycle Sum to Date
			\$
g. Form of Payment	h. Non-Monetary Gift Description	i. Date (mm/dd/yyyy)	j. Amount
			\$
			\$
			\$
			\$
			\$
4. Total only this Page			\$ 0.00
5. Total of ALL CRO-4200 Pages <i>(This line goes in line 5 of Federal PAC NC Disclosure Report Cover Page CRO-4100)</i>			\$ 0.00

Contributions from Individuals

1. Committee Full Name (and Fund if applicable)					2. ID Number	
IBEW-COPE						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Steadly E. Ruff 2593 Live Oak Dr., S.W. Supply, NC 28562			International Rep.			
			c. Employer's Name/Specific Field			
			IBEW		e. Election Cycle Sum to Date	
					\$ 600.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input checked="" type="checkbox"/>		Payroll		10/27/2006	\$ 50.00	
<input checked="" type="checkbox"/>		Payroll		11/22/2006	\$ 50.00	
<input checked="" type="checkbox"/>		Payroll		12/29/2006	\$ 50.00	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Ernest H. Massey 201 W. Houston St. Monroe, NC 28112			Retired			
			c. Employer's Name/Specific Field			
			IBEW		e. Election Cycle 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 checked="" type="checkbox"/>		Payroll		10/27/2006	\$ 25.00	
<input checked="" type="checkbox"/>		Payroll		11/22/2006	\$ 25.00	
<input checked="" type="checkbox"/>		Payroll		12/29/2006	\$ 25.00	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
IBEW Local Unions within N. Carolina			n/a			
			c. Employer's Name/Specific Field			
			IBEW Local Unions		e. Election Cycle Sum to Date	
					\$ 11,617.80	
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					\$ 1,186.43	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 1,186.43	



STATE BOARD OF ELECTIONS
6400 Mail Service Center • Raleigh, North Carolina 27699-6400

GARY O. BARTLETT
Executive Director

MAILING ADDRESS:
P.O. BOX 27255
RALEIGH, NC 27611-7255

CERTIFICATION

I certify that the Committee is in compliance with all provisions of Article 22A and that this report is true and correct to the best of my knowledge. N. C. Gen. Stat. 163-278.9 provides that all reports filed after October 1, 2006 must be filed by a treasurer or assistant treasurer that has completed the mandatory treasurer training requirement. The State Board of Elections is required to provide this training. I have not completed this training but am signing this report with the understanding that I will complete treasurer training by the filing of the next regularly scheduled report for my committee, if the State Board of Elections is able to provide such training by all means described in N.C. Gen. Stat. 163-278.7(f).

If I make this certification knowing it to be untrue I may be prosecuted for perjury under N. C. Gen. Stat. 14-209.

Jon F. Walters

Printed name of appointed treasurer

Handwritten signature of Jon F. Walters in cursive script.

Signature of appointed treasurer

Jan 8, 2007

Date

