

Disclosure Report Cover

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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		c. ID Number	
Committee to Elect Bryan Freeborn			
b. Mailing Address (include City, State and Zip Code)		d. Date Filed	
63 Carrier Street Asheville NC 28806		10-29-2007	
		e. Phone Number	
		828 251 2176	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2007	09-25-07	10-22-07	Yuri Koslen
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)	
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	Municipal	State/County
<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> PAC	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Referendum		<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First Plus
<input type="checkbox"/> "Booster Fund"		<input checked="" type="checkbox"/> Pre-election	<input type="checkbox"/> Second
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third Plus
<input type="checkbox"/> NC Political Party Financing Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual
<input type="checkbox"/> NC Public Campaign Financing Fund		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year
<input type="checkbox"/> Other:		<input type="checkbox"/> Final	<input type="checkbox"/> Year End
		<input type="checkbox"/> Special	<input type="checkbox"/> Final
			<input type="checkbox"/> Special
8. Number of Fundraisers this Report		10. Special Report Name	
II. Account Information		II. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
Asheville Savings Bank			
b. Purpose	c. Account Code	b. Purpose	c. Account Code
Campaign	SB		
	d. Period Begin Balance		d. Period Begin Balance
	\$		\$
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 and that I have been trained by the NC State Board of Elections according to Article 163.278.9(k).			
Yuri Koslen		[Signature]	10/28/07
Printed Name of Signer		Signature of Appointed Treasurer	Date
FOR OFFICE USE ONLY			
Date Received:	10/29/07	Employee:	[Signature]
Date Postmarked:		Employee:	
Date Scanned:		Employee:	
Date Data Entered:		Employee:	
		Delivery Method	
		<input type="checkbox"/> Normal Mail	
		<input type="checkbox"/> Registered Mail	
		<input checked="" type="checkbox"/> Hand Delivered	
		<input type="checkbox"/> Electronically Filed	
		<input type="checkbox"/> 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

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		2. ID Number	
Committee to Elect Bryan Freeborn		Pre Election			
Start of Election Cycle:		January 1, 2007		Total this Reporting Period	
4) Cash on Hand at Start				\$ 4870.13	
				\$	
RECEIPTS					
5) Aggregated Contributions from Individuals		<i>(CRO-1205)</i>		\$ 185	
6) Contributions from Individuals		<i>(CRO-1210)</i>		\$ 475	
7) Contributions from Political Party Committees		<i>(CRO-1220)</i>		\$ 100	
8) Contributions from Other Political Committees		<i>(CRO-1230)</i>		\$ 500	
9) Loan Proceeds		<i>(CRO-1410)</i>		\$	
10) Refunds/Reimbursements To the Committee		<i>(CRO-1240)</i>		\$	
11) Other Receipt Sources					
11a) Interest on Bank Accounts		<i>(CRO-1250)</i>		\$	
11b) Contributions from Not-for-Profit Organizations		<i>(CRO-1250)</i>		\$	
11c) Outside Sources of Income		<i>(CRO-1250)</i>		\$	
12) TOTAL RECEIPTS				\$ 660	
				\$ 10,600	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures		<i>(CRO-1310)</i>		\$ 2837.23	
13b) Contributions to Candidates/Political Committees		<i>(CRO-1310)</i>		\$	
13c) Coordinated Party Expenditures		<i>(CRO-1310)</i>		\$	
14) Loan Repayments		<i>(CRO-1420)</i>		\$	
15) Refunds/Reimbursements From the Committee		<i>(CRO-1320)</i>		\$	
16) In-Kind Contributions		<i>(CRO-1510)</i>		\$	
17) TOTAL EXPENDITURES				\$ 2837.23	
				\$ 7907.72	
18) Cash on Hand at End				\$ 2692.90	
				\$ 2692.90	
ADDITIONAL INFORMATION					
19) Non-Monetary Gifts Given to Other Committees		<i>(CRO-1330)</i>		\$	
20) Outstanding Loans (incl. ones from other campaigns)		<i>(CRO-1430)</i>		\$	
21) Debts and Obligations owed By the Committee		<i>(CRO-1610)</i>		\$	
22) Debts and Obligations owed To the Committee		<i>(CRO-1620)</i>		\$ 400	
23) Account Transfers Within the Committee		<i>(CRO-1720)</i>		\$	
24) Administrative Support		<i>(CRO-1710)</i>		\$	
25) Forgiven Loans		<i>(CRO-1440)</i>		\$	
26) 48-Hour Notice Reports Sum				\$	

Contributions from Individuals

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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 Bryan Freeborn							
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	
Lisa Edwards 335 Scarlet Tanager Ct Arden, NC 28704				Homemaker			
				c. Employer's Name/Specific Field			
						e. Election Sum to Date	
						\$ 100	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	sb	check		10/10/2007		\$ 100	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
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	
Vincent J. Smarjesse 32 Orange Street Asheville, NC 28801				member			
				c. Employer's Name/Specific Field			
						e. Election Sum to Date	
						\$ 125	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	sb	paypal		10/15/2007		\$ 125	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
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	
Bernard Arghiere 853 New Haw Creek Rd Asheville, NC 28805				Software Developer			
				c. Employer's Name/Specific Field			
						e. Election Sum to Date	
						\$ 250	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	sb	check		10/22/2007		\$ 250	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 475	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 475	

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)					2. ID Number
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> Office Depot 85 Tunnel Rd Asheville, NC 28805			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify)		e. Election Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 112.08
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
sb	debit	k	10/21/2007	\$4.34	paper
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> Meda Corp 65 Town Mountain Rd Asheville, NC 28804			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify)		e. Election Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 4000
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
sb	check	I	09/31/2007	\$2000	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> Greenlife 70 Merrimon Ave Asheville, NC 28801			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify)		e. Election Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 17.06
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
sb	debit	c	9/26/2007	\$17.06	refreshments
				\$	
5. Total only this Page					\$ 2021.4
6. Total of ALL CRO-1310 Pages <i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					\$ 2837.23
7. Purpose Codes (List detailed expenditure code in (h.) above)					
A* - Media		B* - Printing		C* - Fundraising	
E - Salaries		F* - Equipment		G - Political Party	
I - Postage		J - Penalties		K* - Office Expenses	
				D - To Another Candidate	
				H* - Holding Public Office Expenses	
				O* - Other	
* Codes require detailed explanation in required remarks field (k)					

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)					2. ID Number
Committee to Elect Bryan Freeborn					
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>		b. Coordinated Committee Name		d. Comments	
Growll Graphics 303 Haywood Rd Greenville, Sc 29607					
		c. Level Registered (Specify)		e. Election Sum to Date	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 1867.19	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
sb	debit	A	09/26/2007	\$779.90	mailers
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>		b. Coordinated Committee Name		d. Comments	
Ingles 669 Haywood Rd Asheville, NC 28806					
		c. Level Registered (Specify)		e. Election Sum to Date	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 79	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
sb	debit	C	9/26/2007	\$35.93	refreshments
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>		b. Coordinated Committee Name		d. Comments	
		c. Level Registered (Specify)		e. Election Sum to Date	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				\$	
5. Total only this Page					\$ 815.83
6. Total of ALL CRO-1310 Pages <i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					\$ 2837.23
7. Purpose Codes (List detailed expenditure code in (h.) above)					
A* - Media		B* - Printing		C* - Fundraising	
E - Salaries		F* - Equipment		G - Political Party	
I - Postage		J - Penalties		K* - Office Expenses	
				D - To Another Candidate	
				H* - Holding Public Office Expenses	
				O* - Other	
* Codes require detailed explanation in required remarks field (k)					

Outstanding Loans

Amendment
 Yes No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Committee to Elect Bryan Freeborn			
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
4. Full Name, Mailing Address & Phone (include city, state, & zip)		5. Job Title/Profession	6. Comments
Bryan Freeborn 63 Carriger St Asheville NC 28806 828 251 2176		Media Public relations Top Floor Studio	
7. Rate		8. Security Pledged	9. Original Loan Amount
0 %			\$ 700
			\$ 400.00
10. Full Name of Lending Institution		11. Loan Number	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
4. Full Name, Mailing Address & Phone (include city, state, & zip)		5. Job Title/Profession	6. Comments
7. Rate		8. Security Pledged	9. Original Loan Amount
%			\$
			\$
10. Full Name of Lending Institution		11. Loan Number	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
4. Full Name, Mailing Address & Phone (include city, state, & zip)		5. Job Title/Profession	6. Comments
7. Rate		8. Security Pledged	9. Original Loan Amount
%			\$
			\$
10. Full Name of Lending Institution		11. Loan Number	
Total only this Page		\$ 400	
Total for ATLCRO-1430 Pages		\$ 400	