# 48-Hour Notice

Page 1 of 2

Amendment ☐ Yes ☑ No

Use this form to report all contributions of $1,000 or more. Notice must be filed within 48 hours of receipt of contribution.
The 48-Hour reporting period begins the day after the last day of the 1st Qrtr-Plus report period and ends the day of the Primary and begins the day after the last day of the 3rd Qrtr-Plus report and ends the day of the General Election.
All 48 Hour In-Kind Contributions must be recorded on CRO-1510 and attached.
This notice may be faxed in order to meet the 48 hour deadline.

**1. Committee Information**

| a. Full Name | c. ID Number |
|---|---|
| Committee To Elect John Carroll | XDHUL8 |
| **b. Mailing Address (include City, State and Zip Code)** | **d. Report Date** |
| PO Box 8967<br>Asheville, NC 28814 | 10/25/08 |
| | **e. Phone Number** |
| | 828-645-7475 |

**2. Contribution Information**

| a. Full Name, Mailing Address & Phone (include city, state, and zip) ☐ Add ☐ Remove | 2. Contribution Information<br>a. Full Name, Mailing Address & Phone (include city, state, and zip) ☐ Add ☐ Remove |
|---|---|
| Antonio O. Fraga<br>50 Westgate Parkway<br>Asheville, NC 28806 828/252-0218 | Isabel A. Fraga<br>50 Westgate Parkway<br>Asheville, NC 28806 828/252-0218 |
| **b. Type of Contributor** | **b. Type of Contributor** |
| ☑ Individual *(if checked, must specify b2 and b3)*<br>☐ Political Party<br>☐ Other Political Committee *(if checked, must specify b1)*<br>☐ Not-for-Profit *(if checked, must specify b4)*<br>☐ Other Source: | ☑ Individual *(if checked, must specify b2 and b3)*<br>☐ Political Party<br>☐ Other Political Committee *(if checked, must specify b1)*<br>☐ Not-for-Profit *(if checked, must specify b4)*<br>☐ Other Source: |
| **b1. Type of Committee** | **b1. Type of Committee** |
| ☐ Federal ☑ County: ☐ State ☐ Municipality: | ☐ Federal ☑ County: ☐ State ☐ Municipality: |
| **b2. Job Title/Profession** / **b4. Federal ID Number** | **b2. Job Title/Profession** / **b4. Federal ID Number** |
| Self Employed / | Housewife / |
| **b3. Employer's Name/Specific Field** / **c. Form of Payment** | **b3. Employer's Name/Specific Field** / **c. Form of Payment** |
| FIGA / Check | / Check |
| **d. Date (mm/dd/yyyy)** / **f. Amount** | **d. Date (mm/dd/yyyy)** / **f. Amount** |
| 10/24/2008 / $1,000 — | 10/24/2008 / $1,000 — |
| **e. Account Code** / **g. Election Sum to Date** | **e. Account Code** / **g. Election Sum to Date** |
| / $1,000 — | / $1,000 — |

| | |
|---|---|
| **3. Total Contributions THIS Page** *(sum all the '2f' entries on this page)* | $2,000 — |
| **4. Total Contributions ALL Pages** *(if multi-page, only list on page 1)* | $4,000 — |

**CERTIFICATION**

I certify that the Committee or Fund is in compliance with all 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, correct and that I have been trained by the NC State Board of Elections. The contributions were received no more than 48 hours prior to this notice being filed. I understand that all contributions including those reported on this notice must also be reported on the next scheduled campaign disclosure report.

| John W. Carroll | John W Carroll | 10-25-08 |
|---|---|---|
| Printed Name of Signer | Signature of Appointed Treasurer | Date |