

**BUNCOMBE COUNTY**

**BOARD OF ELECTIONS**

Jones P. Byrd, Chairman  
Lucy Smith, Secretary  
Bob Van Wagner, Member  
Trena Parker, Director

P.O. Box 7468  
Asheville, NC 28802  
Telephone 828-250-4200  
Fax 828-250-6262

**RECEIPT OF CAMPAIGN REPORT**

FILING DATE: 1/28/10  
RECEIVED FROM:

Holly Jones for County Comm  
(FULL NAME OF CANDIDATE OR COMMITTEE)

County Comm

(OFFICE OF CANDIDATE OR PAC)

Holly Jones

(PERSON FILING REPORT)

CANDIDATE

Title (CIRCLE ONE): TREASURER

828-281-4804  
(PHONE NUMBER)

322 Western Drive, Asheville 28801  
(ADDRESS OF COMMITTEE)

**TYPE OF REPORT**

- |  |                                  |                                 |                               |
|--|----------------------------------|---------------------------------|-------------------------------|
| <input type="checkbox"/> ORGANIZATIONAL          | CONTRIB <input type="checkbox"/> | EXPEND <input type="checkbox"/> | LOAN <input type="checkbox"/> |
| <input type="checkbox"/> PRE-PRIMARY             | CONTRIB <input type="checkbox"/> | EXPEND <input type="checkbox"/> | LOAN <input type="checkbox"/> |
| <input type="checkbox"/> PRE-ELECTION            | CONTRIB <input type="checkbox"/> | EXPEND <input type="checkbox"/> | LOAN <input type="checkbox"/> |
| <input type="checkbox"/> AMENDMENT               | CONTRIB <input type="checkbox"/> | EXPEND <input type="checkbox"/> | LOAN <input type="checkbox"/> |
| <input type="checkbox"/> 1 <sup>ST</sup> QUARTER | CONTRIB <input type="checkbox"/> | EXPEND <input type="checkbox"/> | LOAN <input type="checkbox"/> |
| <input type="checkbox"/> 2 <sup>ND</sup> QUARTER | CONTRIB <input type="checkbox"/> | EXPEND <input type="checkbox"/> | LOAN <input type="checkbox"/> |
| <input type="checkbox"/> SEMI-ANNUAL             | CONTRIB <input type="checkbox"/> | EXPEND <input type="checkbox"/> | LOAN <input type="checkbox"/> |
| <input type="checkbox"/> 3 <sup>RD</sup> QUARTER | CONTRIB <input type="checkbox"/> | EXPEND <input type="checkbox"/> | LOAN <input type="checkbox"/> |
| <input type="checkbox"/> 4 <sup>TH</sup> QUARTER | CONTRIB <input type="checkbox"/> | EXPEND <input type="checkbox"/> | LOAN <input type="checkbox"/> |
| <input type="checkbox"/> FINAL                   | <u>2009 Year End</u>             |                                 |                               |

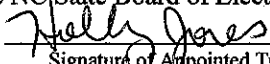

RECEIVED BY: [Signature]  
BUNCOMBE COUNTY BOARD OF ELECTIONS

AUDIT DATE: \_\_\_\_\_

# 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

<b>1. Committee Information</b>			
a. Full Name		c. ID Number	
Holly Jones for County Commission		136	
b. Mailing Address (include City, State and Zip Code)		d. Date Filed	
322 Westover Drive Asheville NC 28801		1/28/2010	
		e. Phone Number	
		828-281-4804	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2009	7/1/2009	12/31/2009	Holly Jones
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"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser		<b>Municipal</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
		<b>State/County</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input checked="" type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
		<b>Referendum</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special	
7. Type of Fund (if applicable, check one)		10. Special Report Name	
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:			
8. Number of Fundraisers this Report			
0			
11. Account Information		11. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
HomeTrust Bank			
b. Purpose	c. Account Code	b. Purpose	c. Account Code
Campaign expenditures	HT		
	d. Period Begin Balance		d. Period Begin Balance
	\$ 4295.90		\$
<b>CERTIFICATION</b>			
I certify that the Committee or Fund is in compliance with all applicable 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 and correct and that I have been trained by the NC State Board of Elections.			
Holly Jones			7/30/2009
Printed Name of Signer		Signature of Appointed Treasurer	Date
<b>FOR OFFICE USE ONLY</b>			
Date Received:	<u>1/28/10</u>	Employee:	
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
<b>Please Note:</b> 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		3. ID Number	
Holly Jones for County Commission		Semi-Annual (Yr-End) County Election		136	
Start of Election Cycle: <b>January 1, 2008</b>		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 4,295.90		\$ 0.00	
<b>RECEIPTS</b>					
5) Aggregated Contributions from Individuals (CRO-1205)		\$		\$ 8,011.46	
6) Contributions from Individuals (CRO-1210)		\$		\$ 50,262.94	
7) Contributions from Political Party Committees (CRO-1220)		\$		\$	
8) Contributions from Other Political Committees (CRO-1230)		\$		\$ 1,820.79	
9) Loan Proceeds (CRO-1410)		\$		\$	
10) Refunds/Reimbursements To the Committee (CRO-1240)		\$		\$ 1,039.10	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$ 7.21		\$ 31.47	
11b) Contributions from Not-for-Profit Organizations (CRO-1250)		\$		\$	
11c) Outside Sources of Income (CRO-1250)		\$		\$ 0.23	
11d) Legal Expense Fund – Other Sources (CRO-1270)		\$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c and 11d)		\$ 7.21		\$ 61,165.99	
<b>EXPENDITURES</b>					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 190.00		\$ 53,965.94	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$		\$ 125.00	
13c) Coordinated Party Expenditures (CRO-1310)		\$		\$	
14) Aggregated Non-Media Expenditures (CRO-1315)		\$		\$ 681.01	
15) Loan Repayments (CRO-1420)		\$		\$	
16) Refunds/Reimbursements From the Committee (CRO-1320)		\$		\$	
17) In-Kind Contributions (CRO-1510)		\$		\$ 2,280.93	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 190.00		\$ 57,052.88	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 4,113.11		\$ 4,113.11	
<b>ADDITIONAL INFORMATION</b>					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$			
22) Debts and Obligations owed By the Committee (CRO-1610)		\$			
23) Debts and Obligations owed To the Committee (CRO-1620)		\$			
24) Account Transfers Within the Committee (CRO-1720)		\$			
25) Administrative Support (CRO-1710)		\$		\$	
26) Forgiven Loans (CRO-1440)		\$		\$	
27) 48-Hour Notice Reports Sum (CRO-2200)		\$		\$	
27) Contributions to be refunded (CRO-1215)		\$		\$	

# Other Receipt Sources

Use this form to report income not reported on another form. i.e. interest income, not for profit contributions etc.

<b>1. Committee Full Name (and Fund if applicable)</b> Holly Jones for County Commission				<b>2. ID Number</b>	
<b>3. Type of Receipt Source</b> <i>(Please use separate CRO-1250 forms for each type of Receipt Source.)</i>					
<input checked="" type="checkbox"/> Interest		<input type="checkbox"/> Contributions from Not-for-Profit Organizations		<input type="checkbox"/> Outside Sources of Income	
<b>4. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Not-for-Profit Federal ID #</b>	<b>d. Comments</b>	
HomeTrust Bank 10 Woodfin Street Asheville NC 28801			<b>c. Outside Source Explanation</b>		
			<b>e. Election Sum to Date</b> \$ 26.21		
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. In-Kind Description</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
HT	Account Credit		7/8/2009	\$ 1.06	
HT	Account Credit		8/10/2009	\$ 1.16	
HT	Account Credit		9/8/2009	\$ 1.02	
HT	Account Credit		10/8/2009	\$ 1.05	
<b>4. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Not-for-Profit Federal ID #</b>	<b>d. Comments</b>	
HomeTrust Bank 10 Woodfin Street Asheville NC 28801			<b>c. Outside Source Explanation</b>		
			<b>e. Election Sum to Date</b> \$ 29.13		
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. In-Kind Description</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
HT	Account Credit		11/9/2009	\$ 1.12	
HT	Account Credit		12/8/2009	\$ 1.01	
			12/31/2009	\$ 0.79	
<b>4. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Not-for-Profit Federal ID #</b>	<b>d. Comments</b>	
			<b>c. Outside Source Explanation</b>		
			<b>e. Election Sum to Date</b> \$		
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. In-Kind Description</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
				\$	
				\$	
<b>5. Total only this Page</b>				\$ 7.21	
<b>6. Total of ALL CRO-1250 Pages</b> <i>(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest)</i> <i>(This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution)</i> <i>(This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)</i>				\$ 7.21	

# Disbursements

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures

<b>1. Committee Full Name (and Fund if applicable)</b> Holly Jones for County Commission					<b>2. ID Number</b> 136
<b>3. Type of Disbursement</b> <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	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i> Purple Cat.Net 40 Highland St Asheville NC 28801 828-250-9446			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
			<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b>
					\$ 300.00
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>
HT	Check 201	K	8/1/2009	\$ 30.00	E-newsletter
	Check 202	K	10/10/2009	\$ 30.00	E-newsletter
HT	Check 204	K	12/28/2009	\$ 30.00	E-newsletter
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i> Buncombe County Democratic Men 951 Old Fairview Rd Asheville NC 28803			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
			<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b>
					\$ 350.00
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>
HT	Check 203	O	11/21/2009	\$ 100.00	Organizational dues
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i>			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
			<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b>
					\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>
				\$	
				\$	
<b>5. Total only this Page</b>					\$ 190.00
<b>6. Total of ALL CRO-1310 Pages</b> <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>					\$ 190.00
<b>7. Purpose Codes</b> <i>(List detailed expenditure code in (h.) above)</i>					
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)					