

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	
ELECT BOB WILLIAMS	2018 Second Quarter	000-THC715-0-000	
Start of Election Cycle: January 1, <u>2018</u>		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 198.42	\$ 59.62
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 20.00	\$ 169.00
6) Contributions from Individuals	(CRO-1210)	\$ 350.00	\$ 1,750.00
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0.00	\$ 0.00
8) Contributions from Other Political Committees	(CRO-1230)	\$ 614.99	\$ 614.99
9) Loan Proceeds	(CRO-1410)	\$ 0.00	\$ 2,000.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$ 0.00	\$ 0.00
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0.02	\$ 0.06
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$ 0.00	\$ 0.00
11c) Outside Sources of Income	(CRO-1250)	\$ 0.00	\$ 242.96
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$ 0.00	\$ 0.00
11e) Exempt Purchase Price Sales	(CRO-1265)	\$ 0.00	\$ 0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		\$ 985.01	\$ 4,777.01
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 120.00	\$ 3,389.47
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 0.00	\$ 0.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0.00	\$ 0.00
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 57.08	\$ 197.85
15) Loan Repayments	(CRO-1420)	\$ 0.00	\$ 0.00
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$ 0.00	\$ 0.00
17) In-Kind Contributions	(CRO-1510)	\$ 614.99	\$ 857.95
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 792.07	\$ 4,445.27
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 391.36	\$ 391.36
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 2,000.00	
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$ 0.00	
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$ 0.00	
24) Account Transfers Within the Committee	(CRO-1720)	\$ 358.37	
25) Administrative Support	(CRO-1710)	\$ 0.00	\$ 0.00
26) Forgiven Loans	(CRO-1440)	\$ 0.00	\$ 0.00
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$ 0.00	\$ 0.00
28) Contributions to be Refunded	(CRO-1215)	\$ 0.00	\$ 0.00

Aggregated Contributions from Individuals

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Amendment

Yes No

Optional form used to report NC Contributions From Individuals of \$50 or less

1. Committee Full Name (and Fund if applicable)				2. ID Number	
ELECT BOB WILLIAMS				000-THC715-0-000	
3. Contributor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/> Add	V73A	Credit Card		06/08/2018	\$ 20.00
<input type="checkbox"/> Remove					
4. Total only this Page				\$	\$20.00
5. Total of ALL CRO-1205 Pages				\$	\$20.00
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					

CRO-1205

NC State Board of Elections

April 2007

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) ELECT BOB WILLIAMS					2. ID Number 000-THC715-0-000	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) JAMES HARDEE 623 INDEPENDENCE DR. JACKSONVILLE, NC 28546			b. Job Title/Profession RETIRED		d. Comments	
			c. Employer's Name/Specific Field US MARINE CORPUS		e. Election Sum to Date \$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	V73A	Credit Card		06/06/2018	\$ 250.00	
<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) DONALD JOHNSTONE 5622 GRAYWOOD AVE. LAKEWOOD, CA 90712			b. Job Title/Profession RETIRED		d. Comments	
			c. Employer's Name/Specific Field US AIRFORCE		e. Election Sum to Date \$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	V73A	Credit Card		06/07/2018	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 350.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 350.00	

Contributions from Other Political Committees pg 1 of 1 **Amendment** Yes No

Use this form to report contributions from other candidate, referendum or PAC committees

1. Committee Full Name (and Fund if applicable) ELECT BOB WILLIAMS			2. ID Number 000-THC715-0-000	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee		d. Comments
ONSLow PROTECT OUR STUDENTS 2015 GUM BRANCH ROAD #816 JACKSONVILLE, NC 28540		<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC		
		<input type="checkbox"/> Referendum		
		c. Level Registered (Specify)		e. Election Sum to Date
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County:		
		<input type="checkbox"/> State <input type="checkbox"/> Municipality:		
		Onslow		\$ 614.99
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
	In-Kind	PALM CARDS ORDERED FROM VISTA PRINT	05/04/2018	\$ 104.99
	In-Kind	POLITICAL ADS PLACED IN DAILY NEWS ON MAY 6, MAY 7,	05/08/2018	\$ 510.00
				\$
4. Total only this Page				\$ \$614.99
5. Total of ALL CRO-1230 Pages (This line must be on line 8 of Detailed Summary Page CRO-1100)				\$ \$614.99

Other Receipt Sources

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
ELECT BOB WILLIAMS				000-THC715-0-000	
3. Type of Receipt Source <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					
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #	d. Comments	
NAVY FEDERAL CREDIT UNION 1171 WESTERN BLVD. JACKSONVILLE, NC 28546 (888) 842-6328			c. Outside Source Explanation		
			e. Election Sum to Date		
			\$ 0.05		
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
5518	Electric Funds Tran		04/30/2018	\$ 0.01	
				\$	
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #	d. Comments	
NAVY FEDERAL CREDIT UNION 1171 WESTERN BLVD. JACKSONVILLE, NC 28546 (888) 842-6328			c. Outside Source Explanation		
			e. Election Sum to Date		
			\$ 0.01		
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
5518	Electric Funds Tran		05/31/2018	\$ 0.01	
				\$	
5. Total only this Page				\$ 0.02	
6. Total of ALL CRO-1250 Pages				\$ 0.02	
<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>					

Disbursements

Amendment

Pg 1 of 1 Yes No

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	
ELECT BOB WILLIAMS				000-THC715-0-000	
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 (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
FACEBOOK, INC. P.O. BOX 10005 PALO ALTO, CA 94303 (800) 606-5589			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Sum to Date
					\$ 120.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
V73A	Electric Funds Tran	A	05/25/2018	\$ 120.00	FACEBOOK ADS
				\$	
5. Total only this Page					\$ 120.00
6. Total of ALL CRO-1310 Pages					\$ 120.00
<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>					
7. Purpose Codes (List detailed expenditure code in (h.) above)					
A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate		
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses		
I - Postage	J - Penalties	K* - Office Expenses	Q* - Donation to Legal Expense Fund		
O* Other					
* Codes require detailed explanation in required remarks field (k)					

Aggregated Non-Media Expenditures

Optional form used to report NC Non-Media Expenditures of \$50 or less.

1. Committee Full Name (and Fund if applicable)					2. ID Number	
ELECT BOB WILLIAMS					000-THC715-0-000	
3. Payee Information						
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
<input type="checkbox"/> Add <input type="checkbox"/> Remove	V73A	Electric Funds Tran	C	06/06/2018	\$ 7.55	BANK CHARGE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	V73A	Electric Funds Tran	C	06/07/2018	\$ 3.20	BANK CHARGE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	V73A	Electric Funds Tran	C	06/08/2018	\$ 0.88	BANK CHARGE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	5518	Debit Card	B	04/25/2018	\$ 45.45	PRINTING SIGN DECALS
4. Total only this Page					\$ 57.08	
5. Total of ALL CRO-1315 Pages <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>					\$ 57.08	
6. Purpose Codes (List detailed expenditure code in (d) above)						
B* - Printing		C* - Fundraising		D - To Another Candidate		
E - Salaries		F* - Equipment		G - Political Party		
I - Postage		J - Penalties		H* - Holding Public Office Expenses		
O* - Other				K* - Office Expenses		
				Q* - Donations to Legal Expense Fund		
* Codes require detailed explanation in required remarks field (g)						

In-Kind Contributions

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.
Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
ELECT BOB WILLIAMS		000-THC715-0-000	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
ONslow PROTECT OUR STUDENTS 2015 GUM BRANCH ROAD #816 JACKSONVILLE, NC 28540		<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		\$	614.99
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
PALM CARDS ORDERED FROM VISTA PRINT		05/04/2018	\$ 104.99
POLITICAL ADS PLACED IN DAILY NEWS ON MAY 6, MAY 7, AND MAY 8, 2018.		05/08/2018	\$ 510.00
			\$
4. Total only this Page		\$	614.99
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		\$	614.99

Outstanding Loans

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
ELECT BOB WILLIAMS			000-THC715-0-000
3. Lender 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
ROBERT E WILLIAMS 929 COMMONS DR. N JACKSONVILLE, NC 28546		RETIRED	
		e. Start Date (mm/dd/yyyy)	
		c. Employer's Name/Specific Field	02/23/2018
		f. End Date (mm/dd/yyyy)	12/23/2018
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
0.00%	NONE	\$ 1,000.00	\$ 1,000.00
k. Full Name of Lending Institution			l. Loan Number
3. Lender 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
ROBERT E WILLIAMS 929 COMMONS DR. N JACKSONVILLE, NC 28546		RETIRED	
		e. Start Date (mm/dd/yyyy)	
		c. Employer's Name/Specific Field	03/08/2018
		f. End Date (mm/dd/yyyy)	01/08/2019
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
0.00%	NONE	\$ 1,000.00	\$ 1,000.00
k. Full Name of Lending Institution			l. Loan Number
4. Total only this Page			\$ 2,000.00
5. Total of ALL CRO-1430 Pages <i>(This line must be on line 21 of Detailed Summary Page CRO-1100)</i>			\$ 2,000.00