COPY

Disclosure Report Cover

Amendment ☐ Yes ☒ 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
DAN BESSE COMMITTEE	000-9C08C4-0-000
b. Mailing Address (include City, State and Zip Code)	**d. Date Filed**
PO BOX 15306 WINSTON-SALEM, NC 27113	10/28/2013
	e. Phone Number
	(336) 687-0193

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2013	08/28/2013	10/21/2013	JACK H CAMPBELL JR

6. Type of Committee (Check One)

- ☒ Candidate Campaign
- ☐ Party
- ☐ Joint Fundraiser
- ☐ PAC
- ☐ Referendum
- ☐ Legal Expense Fund

7. Type of Fund *(If applicable, check one)*

- ☐ "Booster Fund"
- ☐ Building Fund
- ☐ Presidential Election Year Candidates Fund
- ☐ NC Public Campaign Financing Fund
- ☐ Other:

8. Number of Fundraisers this Report

1

9. Type of Report *(check only one type of report from one category)*

Municipal	State/County	Referendum
☐ Organizational	☐ Organizational	☐ Organizational
☐ Thirty-five day	Quarterly	☐ Pre-referendum
☐ Pre-primary	☐ First	☐ Final
☒ Pre-election	☐ Second	☐ Supplemental Final
☐ Pre-runoff	☐ Third	☐ Annual
Semi-annual	☐ Fourth	☐ Special
☐ Mid Year	Semi-annual	
☐ Year End	☐ Mid Year	**10. Special Report Name**
☐ Final	☐ Year End	
☐ Special	☐ Final	
	☐ Special	

13. Account Information

a. Financial Institution Full Name	b. Purpose	c. Account Code	d. Period Begin Balance
NEWBRIDGE BANK	GENERAL CAMPAIGN PURPOSES	NB-1	$ 20,487.44

13. Account Information

a. Financial Institution Full Name	b. Purpose	c. Account Code	d. Period Begin Balance
			$

CERTIFICATION

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

JACK H CAMPBELL JR — Printed Name of Signer

Jack Campbell — Signature of Appointed Treasurer

10/28/2013 — Date

FOR OFFICE USE ONLY

Date Received: 10/28/2013 Employee Judy Speas

Date Postmarked: _____ Employee _____

Date Scanned: _____ Employee _____

Date Data Entered: _____ Employee _____

Delivery Method

- ☐ Normal Mail
- ☐ Registered Mail
- ☒ Hand Delivered
- ☐ Electronically Filed

☐ 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	3. ID Number
DAN BESSE COMMITTEE	2013 Pre-Election	000-9C08C4-0-000

Start of Election Cycle: January 1, 2010		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$ 20,487.44	$ 2,107.98
RECEIPTS			
5) Aggregated Contributions from Individuals	*(CRO-1205)*	$ 325.00	$ 1,652.01
6) Contributions from Individuals	*(CRO-1210)*	$ 544.05	$ 12,002.21
7) Contributions from Political Party Committees	*(CRO-1220)*	$ 0.00	$ 0.00
8) Contributions from Other Political Committees	*(CRO-1230)*	$ 1,534.08	$ 2,915.15
9) Loan Proceeds	*(CRO-1410)*	$ 0.00	$ 8,000.00
10) Refunds/Reimbursements to the Committee	*(CRO-1240)*	$ 0.00	$ 7.00
11) Other Receipt Sources			
11a) Interest on Bank Accounts	*(CRO-1250)*	$ 0.00	$ 0.00
11b) Contributions from Not-For-Profit Organizations	*(CRO-1250)*	$ 0.00	$ 0.00
11c) Outside Sources of Income	*(CRO-1250)*	$ 0.00	$ 0.00
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)		$ 2,403.13	$ 24,576.37
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	*(CRO-1310)*	$ 3,542.94	$ 4,738.94
13b) Contributions to Candidates/Political Committees	*(CRO-1310)*	$ 0.00	$ 600.00
13c) Coordinated Party Expenditures	*(CRO-1310)*	$ 0.00	$ 0.00
14) Aggregated Non-Media Expenditures	*(CRO-1315)*	$ 0.00	$ 0.00
15) Loan Repayments	*(CRO-1420)*	$ 0.00	$ 0.00
16) Refunds/Reimbursements from the Committee	*(CRO-1320)*	$ 80.00	$ 417.61
17) In-Kind Contributions	*(CRO-1510)*	$ 928.13	$ 2,588.30
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		$ 4,551.07	$ 8,344.85
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		$ 18,339.50	$ 18,339.50
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	*(CRO-1330)*	$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns)	*(CRO-1430)*	$ 10,000.00	
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)*	$ 0.00	
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

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
DAN BESSE COMMITTEE	000-9C08C4-0-000

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove	NB-1	Electric Funds Tran		10/17/2013	$ 25.00
☐ Add ☐ Remove	NB-1	Check		10/15/2013	$ 50.00
☐ Add ☐ Remove	NB-1	Check		10/16/2013	$ 25.00
☐ Add ☐ Remove	NB-1	Check		10/16/2013	$ 50.00
☐ Add ☐ Remove	NB-1	Check		10/16/2013	$ 50.00
☐ Add ☐ Remove	NB-1	Check		10/18/2013	$ 50.00
☐ Add ☐ Remove	NB-1	Check		10/16/2013	$ 50.00
☐ Add ☐ Remove	NB-1	Check		10/16/2013	$ 25.00

4. Total only this Page	$ $325.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ $325.00

Contributions from Individuals

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
DAN BESSE COMMITTEE	000-9C08C4-0-000

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
DAN BESSE PO BOX 15306 WINSTON-SALEM, NC 27113 (336) 722-1674	ATTORNEY	DANIEL V. BESSE		$ 815.46 ~~64.05~~

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐		In-Kind	FOOD FOR CANVASSING	10/01/2013	$ 21.35
☐		In-Kind	FOOD FOR CANVASSING	10/08/2013	$ 21.35
☐		In-Kind	FOOD FOR CANVASSING	10/09/2013	$ 21.35

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
PEGGY BESSE 1026 16TH AVE PL HICKORY, NC 28601	RETIRED	RETIRED		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	NB-1	Check		09/01/2013	$ 200.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
THOMAS W BRANDON 161 BUCKINGHAM RD WINSTON-SALEM, NC 27104	INSURANCE EXECUTIVE	W N IRELAND		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	NB-1	Check		09/18/2013	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 364.05
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 544.05

Contributions from Individuals

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
DAN BESSE COMMITTEE	000-9C08C4-0-000

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JERRI MCLEMORE 181 E 6TH ST #504 WINSTON-SALEM, NC 27101	PATHOLOGIST	WAKE FOREST SCHOOL OF MEDICINE		$ 350.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	NB-1	Electric Funds Tran		09/03/2013	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
CAROLINE WARREN 3820-I COUNTRY CLUB RD WINSTON-SALEM, NC 27104	SERVER	FOOTHILLS BREWING		$ 0.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐		In-Kind	PAPER	10/03/2013	$ 80.00
☐					$
☐					$

4. Total only this Page	$ 180.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 544.05

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)	2. ID Number
DAN BESSE COMMITTEE	000-9C08C4-0-000

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Committee	d. Comments
JOINES FOR MAYOR CAMPAIGN PO BOX 20397 WINSTON-SALEM, NC 27120	☒ Candidate ☐ PAC ☐ Referendum c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☒ Municipality: Winston Salem	e. Election Sum to Date $ 500.00

f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
NB-1	Check		09/18/2013	$ 500.00
				$
				$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Committee	d. Comments
NC REALTORS PAC 4511 WEYBRIDGE LANE GREENSBORO, NC 27407	☐ Candidate ☒ PAC ☐ Referendum c. Level Registered (Specify) ☐ Federal ☐ County: ☒ State ☐ Municipality:	e. Election Sum to Date $ 250.00

f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
NB-1	Check		10/03/2013	$ 250.00
				$
				$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Committee	d. Comments
SOUTHERN STATES POLICE BENEVOLENT ASSOC, INC 2155 HIGHWAY 42 S MCDONOUGH, GA 30252-7636	☐ Candidate ☒ PAC ☐ Referendum c. Level Registered (Specify) ☒ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 784.08

f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
	In-Kind	W-S CHRONICLE	09/03/2013	$ 97.20
	In-Kind	W-S JOURNAL	09/03/2013	$ 686.88
				$

4. Total only this Page	$ $1,534.08
5. Total of ALL CRO-1230 Pages *(This line must be on line 8 of Detailed Summary Page CRO-1100)*	$ $1,534.08

Disbursements

Amendment ☐ 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
DAN BESSE COMMITTEE	000-9C08C4-0-000

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
EXCALIBUR ENTERPRISES, INC PO BOX 7372 WINSTON-SALEM, NC 27109	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 1,348.82

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
NB-1	Check	BIO	10/16/2013	$ 1,348.82	PRINTING & MAILING SERVICES
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
PAYITSQUARE.COM 605 SEWARD AVE NW GRAND RAPIDS, MI 49504	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 3.96 ~~2.97~~

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
NB-1	Electric Funds Tran	O	09/03/2013	$ 0.99	WEBSITE DONATION FEE
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
PAYITSQUARE.COM 605 SEWARD AVE NW GRAND RAPIDS, MI 49504	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 3.96 ~~0.99~~

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
NB-1	Electric Funds Tran	O	10/17/2013	$ 0.99	WEBSITE DONATION FEE
				$	

5. Total only this Page	$ 1,350.80
6. Total of ALL CRO-1310 Pages *(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)* *(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)* *(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)*	$ 3,542.94

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)**

Disbursements

Amendment ☐ 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
DAN BESSE COMMITTEE	000-9C08C4-0-000

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
PAYPAL 2211 N FIRST ST SAN JOSE, CA 95131	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 6.43 ~~5.40~~

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
NB-1	Electric Funds Tran	O	09/03/2013	$ 3.20	ONLINE PAYMENT FEE
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
PAYPAL 2211 N FIRST ST SAN JOSE, CA 95131	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 6.43 ~~1.03~~

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
NB-1	Electric Funds Tran	O	10/17/2013	$ 1.03	ONLINE PAYMENT FEE
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
SIGNS NOW 246 JONESTOWN RD WINSTON-SALEM, NC 27104	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 637.91

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
NB-1	Check	B	08/29/2013	$ 158.92	POSTCARDS
NB-1	Check	B	09/06/2013	$ 478.99	DOOR HANGERS

5. Total only this Page	$ 642.14
6. Total of ALL CRO-1310 Pages *(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)* *(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)* *(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)*	$ 3,542.94

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)**

Disbursements

Amendment ☐ 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
DAN BESSE COMMITTEE	000-9C08C4-0-000

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
CAROLINE WARREN 3820-I COUNTRY CLUB RD WINSTON-SALEM, NC 27104	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 1550.00 ~~350.00~~

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
NB-1	Check	O	08/28/2013	$ 150.00	FIELD DIRECTOR
NB-1	Check	O	09/06/2013	$ 200.00	FIELD DIRECTOR

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
CAROLINE WARREN 3820-I COUNTRY CLUB RD WINSTON-SALEM, NC 27104	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 1550.00 ~~1,200.00~~

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
NB-1	Check	O	09/12/2013	$ 200.00	FIELD DIRECTOR
NB-1	Check	O	09/20/2013	$ 200.00	FIELD DIRECTOR

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
CAROLINE WARREN 3820-I COUNTRY CLUB RD WINSTON-SALEM, NC 27104	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 1550.00 ~~1,200.00~~

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
NB-1	Check	O	09/25/2013	$ 200.00	FIELD DIRECTOR
NB-1	Check	O	10/03/2013	$ 200.00	FIELD DIRECTOR

5. Total only this Page	$ 1,150.00
6. Total of ALL CRO-1310 Pages *(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)* *(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)* *(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)*	$ 3,542.94

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)**

Disbursements

Amendment ☐ 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
DAN BESSE COMMITTEE	000-9C08C4-0-000

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
CAROLINE WARREN 3820-I COUNTRY CLUB RD WINSTON-SALEM, NC 27104	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 1550.00 ~~1,200.00~~

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
NB-1	Check	O	10/10/2013	$ 200.00	FIELD DIRECTOR
NB-1	Check	O	10/15/2013	$ 200.00	FIELD DIRECTOR

5. Total only this Page	$ 400.00
6. Total of ALL CRO-1310 Pages *(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)* *(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)* *(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)*	$ 3,542.94

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)**

Refunds/Reimbursements From the Committee

Pg 1 of 1

Amendment ☐ Yes ☒ No

Use this form to report refunds/reimbursements, including contributions returned to the contributor

1. Committee Full Name (and Fund if applicable)	2. ID Number
DAN BESSE COMMITTEE	000-9C08C4-0-000

3. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Type of Committee	g. Comments
CAROLINE WARREN 3820-I COUNTRY CLUB RD WINSTON-SALEM, NC 27104	☐ Candidate ☐ PAC ☐ Referendum ☐ Party	
	e. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	h. Original Receipt Date 10/03/2013
		i. Original Receipt Amount $ 80.00

b. Job Title/Profession	c. Employer's Name/Specific Field	f. Purpose Code	j. Election Sum to Date
SERVER	FOOTHILLS BREWING	P	$ 0.00

k. Account Code	l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount
NB-1	Check	PAPER	10/03/2013	$ 80.00

4. Total only this Page	$ 80.00
5. Total of ALL CRO-1320 Pages *(This line must be on line 15 of Detailed Summary Page CRO-1100)*	$ 80.00

6. Purpose Codes (List detailed disbursement code in (f) above)

L - Returned to Contributor M - Overpayment for Service N - Exceeded Contibution Limit

P* - Reimbursement of In-Kin O* Other

*** Codes require detailed explanation in required remarks field (m)**

In-Kind Contributions

Pg 1 of 1 Amendment ☐ Yes ☒ No

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
DAN BESSE COMMITTEE	000-9C08C4-0-000

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments / d. Election Sum to Date
DAN BESSE PO BOX 15306 WINSTON-SALEM, NC 27113 (336) 722-1674	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date: $ 815.44 ~~64.05~~

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
FOOD FOR CANVASSING	10/01/2013	$ 21.35
FOOD FOR CANVASSING	10/08/2013	$ 21.35
FOOD FOR CANVASSING	10/09/2013	$ 21.35

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments / d. Election Sum to Date
SOUTHERN STATES POLICE BENEVOLENT ASSOC, INC 2155 HIGHWAY 42 S MCDONOUGH, GA 30252-7636	☐ Individual ☐ Candidate ☐ Party ☒ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date: $ 784.08

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
W-S CHRONICLE	09/03/2013	$ 97.20
W-S JOURNAL	09/03/2013	$ 686.88
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments / d. Election Sum to Date
CAROLINE WARREN 3820-I COUNTRY CLUB RD WINSTON-SALEM, NC 27104	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date: $ 0.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
PAPER	10/03/2013	$ 80.00
		$
		$

4. Total only this Page	$ 928.13
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 928.13

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
DAN BESSE COMMITTEE	000-9C08C4-0-000

3. Lender Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Start Date (mm/dd/yyyy)	f. End Date (mm/dd/yyyy)
DAN BESSE PO BOX 15306 WINSTON-SALEM, NC 27113 (336) 722-1674	ATTORNEY	DANIEL V. BESSE		12/31/2008	

g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance	k. Full Name of Lending Institution	l. Loan Number
0.00%	NONE	$ 2,000.00	$ 2,000.00		

3. Lender Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Start Date (mm/dd/yyyy)	f. End Date (mm/dd/yyyy)
DAN BESSE PO BOX 15306 WINSTON-SALEM, NC 27113 (336) 722-1674	ATTORNEY	DANIEL V. BESSE		06/28/2013	06/27/2014

g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance	k. Full Name of Lending Institution	l. Loan Number
0.00%	NONE	$ 8,000.00	$ 8,000.00		

4. Total only this Page	$ 10,000.00
5. Total of ALL CRO-1430 Pages *(This line must be on line 21 of Detailed Summary Page CRO-1100)*	$ 10,000.00