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JUL 27 2007

Disclosure Report Cover

GUILFORD COUNTY

Amendment
[checked] Yes [] No

Please note that this cover sheet 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 those kinds of committee changes. Use the Addendum form (CRO-1010) if more entries are needed.

1. Committee Information

a. Full Name: Concerned Citizens for Summerfield
c. ID Number:
b. Mailing Address: 1106 NC Hwy 150 W, Summerfield, NC 27358
d. Date Filed: 07/27/2007
e. Phone Number: 336-643-1245

2. Report Year:
3. Period Start Date: 07/01/2006
4. Period End Date: 12/31/2006
5. Treasurer Full Name: Jack Dwayne Crawford

6. Type of Committee: [] Candidate Campaign, [] Party, [] Joint Fundraiser, [] PAC, [x] Referendum
7. Type of Fund: [] Soft Money Account, [] "Booster Fund", [] Building Fund, [] NC Political Party Financing Fund, [] Presidential Election Year Candidates Fund, [] NC Public Campaign Financing Fund, [] Other:
8. Type of Report: [] Organizational, [] Thirty-five day, [] Pre-primary, [] Pre-election, [] Pre-runoff, [] Semi-annual, [] Mid Year, [x] Year End, [] Final, [] Special
State/County: [] Organizational, [] Quarterly, [] First Plus, [] Second, [] Third Plus, [] Fourth, [] Semi-annual, [] Mid Year, [] Year End, [] Final, [] Special
9. Special Report Name:

10. Account Information
a. Financial Institution Full Name: Bank of America
b. Purpose: PAC Contributions and Expenditures
c. Code: CC4S1
d. Period Begin Balance: \$ 235.71

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.

Jack Dwayne Crawford

Printed Name of Signer

Signature of Appointed Treasurer

07/27/2007

Date

FOR OFFICE USE ONLY

Date Received: _____

Employee: _____

Date Postmarked: _____

Employee: _____

Date Scanned: _____

Employee: _____

Delivery Method

- [] Normal Mail
[] Registered Mail
[] Hand Delivered
[] Electronically Filed

Detailed Summary

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number	
Concerned Citizens for Summerfield	Year End - Semi Annual		
Start of Election Cycle: January 1, _____	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start	\$ 235.71	\$ 235.71	
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 0.00	\$ 0.00	
6) Contributions from Individuals (CRO-1210)	\$	\$	
7) Contributions from Political Party Committees (CRO-1220)	\$	\$	
8) Contributions from Other Political Committees (CRO-1230)	\$	\$	
9) Loan Proceeds (CRO-1410)	\$	\$	
10) Refunds/Reimbursements To the Committee (CRO-1240)	\$ 0.00	\$ 0.00	
11) Other Receipt Sources (CRO-1250)			
11a) Interest on Bank Accounts (CRO-1250)	\$	\$	
11b) Contributions from Not-for-Profit Organizations (CRO-1250)	\$	\$	
11c) Outside Sources of Income (CRO-1250)	\$	\$	
12) "Goods and Services" Contributions (CRO-1260)	\$	\$	
13) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)	\$ 0.00	\$ 0.00	
EXPENDITURES			
14) Disbursements (CRO-1310)			
14a) Operating Expenditures (CRO-1310)	\$ 60.00	\$ 60.00	
14b) Contributions to Candidates/Political Committees (CRO-1310)	\$	\$	
14c) Coordinated Party Expenditures (CRO-1310)	\$	\$	
15) Loan Repayments (CRO-1420)	\$	\$	
16) Refunds/Reimbursements From the Committee (CRO-1320)	\$	\$	
17) In-Kind Contributions (CRO-1510)	\$	\$	
18) TOTAL EXPENDITURES (Add lines 14a, 14b, 14c, 15, 16, and 17)	\$ 60.00	\$ 60.00	
19) Cash on Hand at End (Add lines 4 and 13 together, then subtract line 18)	\$ 175.71	\$ 175.71	
ADDITIONAL INFORMATION			
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	\$	\$	

Disbursements

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Concerned Citizens for Summerfield					
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 checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Bank of America PO Box 25118 Tampa, FL 33622-5188			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date
					\$ 0.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
cc4s1	Account Debit	Account Maintenance Fee	08/31/2006	\$ 12.00	
cc4s1	Account Debit	Account Maintenance Fee	09/29/2006	\$ 12.00	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Bank of America PO Box 25118 Tampa, FL 33622-5188			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date
					\$ 0.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
cc4s1	Account Debit	Account Maintenance Fee	10/31/2006	\$ 12.00	
cc4s1	Account Debit	Account Maintenance Fee	11/30/2006	\$ 12.00	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Bank of America PO Box 25118 Tampa, FL 33622-5188			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date
					\$ 0.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
cc4s1	Account Debit	Account Maintenance Fee	12/29/2006	\$ 12.00	
				\$	
5. Total only this Page				\$ 60.00	
6. Total of ALL CRO-1310 Pages				\$ 60.00	
<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>					