Use this form for ger Do not use this form	neral report and committee to update information	information, must be	e signed and sub	omitted along with	other detailed forms.			
1. Committee Information								
a. Full Name c. ID Number								
BETH GORDON IS	9DURD6							
b. Mailing Address (incl	d. Date Filed							
PO BOX 506 NEWTON, NC 28658 01/11/2017								
JAN 1 1 2017 J								
828-464-2812								
2. Report Year		4. Period End Date (mm/dd/yy) 5. Treasurer						
2016	10/23/2016	12/3	31/2016	DONALD DAI	LE ISENHOUR			
6. Type of Committ		9. Type of Report	t (check or	nly one type of repo	ort from one category)			
Candidate Campa	· <u> </u>	Municipal	State/C		Referendum			
PAC	Referendum	Organizationa	al 🔲	Organizational	Organizational			
Independent Expenditure Legal Expense Fu	Joint Fundraiser	Thirty-five da	ıy	Quarterly	Pre-referendum			
7. Type of Fund	(if applicable, check one)	Pre-primary		First	☐ Final			
"Booster Fund"		Pre-election	ΙĦ	Second	Supplemental Final			
Building Fund		Pre-runoff		Third	Annual			
_		Semi-annual		Fourth	Special			
94-194		Mid Yea	ır	Semi-annual				
Other:		Year End	d 🔲	Mid Year	10. Special Report Name			
9		Final		Year End				
8. Number of Fund	raisers this Report	Special Special	Final					
	0	1 Age 10 (100)		Special				
11. Account Inform	ation		11. Account	Information				
a. Financial Institution l	Full Name		a. Financial Ins	titution Full Name				
PEOPLES BANK								
b. Purpose	c. Account Code		b. Purpose		c. Account Code			
ISENHOUR FOR SCHOOL BOARD	ВС	3I						
	d. Period Begin Balanc	e			d. Period Begin Balance			
	\$ 776.30				\$			
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 of Elections.								
DONALD DALE ISENHOUR DOLL 13 Le 1 1-11-17								
8 	Printed Name of Signer	S	Signature of Appoir	nted Treasurer	Date			
FOR OFFICE USE ONLY								
Date Received:		Employee:	-		Delivery Method Normal Mail			
Date Postmarke	d:	Employee: Registered Mail Hand Delivered						
Date Scanned: Employee: Employee: Electronically Filed Signer has not received								
Date Data Enter	ed:	Employee:			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 State	ment of Organization	n (CRO-2100A	-E) to make comm	ittee changes.			

Disclosure Report Cover

Amendment

Amendment **Detailed Summary** \boxtimes No Use this form to summarize all disclosure reporting forms and to total monetary information.

1. Committee Full Name (and Fund if applicable) BETH GORDON ISENHOUR FOR SCHOOL BOARD		3. ID Number 9DURD6	
BETTI GORDON ISENITOOK FOR SCHOOL BOARD	4 TH QTR 2016		9DORD0
Start of Election Cycle: January 1,	2016	Total this Reporting Period	
4) Cash on Hand at Start	\$ 776.30	\$ 0	
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
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	\$ 0	\$ 3500.00	
10) Refunds/Reimbursements To the Committee	\$	\$	
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$
11b) Contributions from Not-for-Profit Organizati	ions (CRO-1250)	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund - Other Sources	\$	\$	
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 1	lc, 11d and 11e)	\$ 0	\$ 3500.00
EXPENDITURES	第	801 中国党党的	
13) Disbursements		· 一定 / / / / / / / / / / / / / / / / / /	安 建筑 不能是
13a) Operating Expenditures	(CRO-1310)	\$ 2.00	\$ 2725.70
13b) Contributions to Candidates/Political Commi	ittees (CRO-1310)	\$	\$
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$
15) Loan Repayments	(CRO-1420)	\$	\$
16) Refunds/Reimbursements From the Committee	\$	\$	
17) In-Kind Contributions	(CRO-1510)	\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14,	\$ 2.00	\$ 2725.70	
19) Cash on Hand at End (Add lines 4 and 12 together, then su	btract line 18)	\$ 774.30	\$ 774.30
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaig	gns) (CRO-1430)	\$ 3500.00	
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$	19 Ann 19 Ann
23) Debts and Obligations owed To the Committee	\$		
24) Account Transfers Within the Committee	\$	· 图像	
25) Administrative Support	(CRO-1710)	\$	\$
26) Forgiven Loans	\$	\$	
27) 48-Hour Notice Reports Sum	\$	\$	
28) Contributions to be Refunded	(CRO-1215)	\$	\$

D'-L					Amer	idment		
Disbursements	Pg	1	of	1		Yes	\bowtie	No
Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political								
committees and coordinated party expenditures.						35.55.55.55.5		

1. Committee Full Name (and Fund if applicable) 2. ID Number							
BETH GORDO	9DURD6						
	3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)						
Operating E		Contributions to Ca	ndidates/Political Committees	Coc	ordinated Party Expenditures		
4. Payee Inforn			Add	Remove			
	ing Address & Phone		b. Coordinated Committee N	ame	d. Comments		
(include city, state,			-				
PEOPLES BAN	NK						
PO BOX 467	20650		c. Level Registered (Specify)				
NEWTON, NC	28638		Federal	County:			
828-464-5620			State	Municipality:	e. Election Sum to Date		
					\$ 2.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy) j. Amount		k. Required Remarks		
BGI	DRAFT	K	10-31-2016	\$2.00	BANK SERVICE		
					CHARGES		
				\$			
4. Payee Inform	nation	7.00	Add	Remove			
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee N	ame	d. Comments		
(include city, state,	& zip)						
			c. Level Registered (Specify)				
			Federal	County:			
			State	Municipality:	e. Election Sum to Date		
					\$		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
I				\$2.00			
				\$			
4. Payee Inform	ation		Add	Remove			
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee N	ame	d. Comments		
(include city, state,	& zip)						
			c. Level Registered (Specify)				
			Federal	County:			
		State	Municipality:	e. Election Sum to Date			
					\$		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
				\$			
				¢.			
				\$			
5. Total only the	CRO-1310 Pages				\$ 6.00		
(This line goes in							
	\$ 6.00						
(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)							
7. Purpose Codes (List detailed expenditure code in (h.) above)							
A* - Media	B* - Printing	C* - Fund		D - To Anothe	r Candidate		
E - Salaries	F* - Equipment	G - Politic			Public Office Expenses		
I - Postage	J - Penalties	K* - Offic	ce Expenses		to Legal Expense Fund		
O* - Other							
* Codes require detailed explanation in required remarks field (k)							