

# Disclosure Report Cover

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.

Amendment  
 Yes  No

**1. Committee Information**

a. Full Name: TRIPPOWERS FOR COMMISSIONER c. ID Number: \_\_\_\_\_

b. Mailing Address (include City, State and Zip Code):  
1537 LITTLE HILL ROAD  
NEWTON, NC 28658 d. Date Filed: 1/19/11

e. Phone Number: 1/65-2143

2. Report Year: 2010 3. Period Start Date (mm/dd/yy): 10/15/2010 4. Period End Date (mm/dd/yy): 1/3/10 5. Treasurer Full Name: C. VANDALL TRIPPOWERS

**6. Type of Committee (Check One)**

Candidate Campaign  Party  
 PAC  Referendum  
 Independent Expenditure  Joint Fundraiser  
 Legal Expense Fund

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

Booster Fund  
 Building Fund  
 Other: \_\_\_\_\_

**8. Number of Fundraisers this Report**: \_\_\_\_\_

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

Municipal	State/County	Referendum
<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Thirty-five day	Quarterly	<input type="checkbox"/> Pre-referendum
<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
Semi-annual	<input checked="" type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> Mid Year	Semi-annual	
<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	
<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
<input type="checkbox"/> Special	<input type="checkbox"/> Final	
	<input type="checkbox"/> Special	

**10. Special Report Name**: \_\_\_\_\_

**11. Account Information**

a. Financial Institution Full Name: FIRST CITIZENS BANK

b. Purpose: CAMPAIGN ACCOUNT c. Account Code: CR2

d. Period Begin Balance: \$ 2342.55

**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.

C. VANDALL TRIPPOWERS [Signature] 1/19/11  
 Printed Name of Signer Signature of Appointed Treasurer Date

**FOR OFFICE USE ONLY**

Date Received: \_\_\_\_\_ Date Postmarked: JAN 19 2011 Date Scanned: \_\_\_\_\_ Date Data Entered: \_\_\_\_\_

Employee: \_\_\_\_\_ Employee: \_\_\_\_\_ Employee: \_\_\_\_\_ 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		
<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/> No

Use this form to summarize all disclosure reporting forms and to total monetary information.

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. Type of Report</b>		<b>3. ID Number</b>	
ISENHOWER FOR COMMISSIONER		2010 4 <sup>TH</sup> QUARTER		TDU7NW	
<b>Start of Election Cycle:</b>		<b>January 1, 2010</b>		<b>Total this Reporting Period</b>	
<b>4) Cash on Hand at Start</b>				\$ 2,342.55	
				\$	
<b>RECEIPTS</b>					
<b>5) Aggregated Contributions from Individuals</b>		<i>(CRO-1205)</i>		\$ 1,180.00	
<b>6) Contributions from Individuals</b>		<i>(CRO-1210)</i>		\$ 100.00	
<b>7) Contributions from Political Party Committees</b>		<i>(CRO-1220)</i>		\$	
<b>8) Contributions from Other Political Committees</b>		<i>(CRO-1230)</i>		\$ 1,350.00	
<b>9) Loan Proceeds</b>		<i>(CRO-1410)</i>		\$	
<b>10) Refunds/Reimbursements To the Committee</b>		<i>(CRO-1240)</i>		\$	
<b>11) Other Receipt Sources</b>					
<b>11a) Interest on Bank Accounts</b>		<i>(CRO-1250)</i>		\$	
<b>11b) Contributions from Not-for-Profit Organizations</b>		<i>(CRO-1250)</i>		\$	
<b>11c) Outside Sources of Income</b>		<i>(CRO-1250)</i>		\$	
<b>11d) Legal Expense Fund – Other Sources</b>		<i>(CRO-1270)</i>		\$	
<b>11 e) Exempt Purchase Price Sales</b>		<i>(CRO-1265)</i>		\$	
<b>12) TOTAL RECEIPTS</b> <i>(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)</i>				\$ 100.00	
				\$ 18,163.23	
<b>EXPENDITURES</b>					
<b>13) Disbursements</b>					
<b>13a) Operating Expenditures</b>		<i>(CRO-1310)</i>		\$ 2,338.40	
<b>13b) Contributions to Candidates/Political Committees</b>		<i>(CRO-1310)</i>		\$	
<b>13c) Coordinated Party Expenditures</b>		<i>(CRO-1310)</i>		\$	
<b>14) Aggregated Non-Media Expenditures</b>		<i>(CRO-1315)</i>		\$	
<b>15) Loan Repayments</b>		<i>(CRO-1420)</i>		\$	
<b>16) Refunds/Reimbursements From the Committee</b>		<i>(CRO-1320)</i>		\$	
<b>17) In-Kind Contributions</b>		<i>(CRO-1510)</i>		\$ 3,283.23	
<b>18) TOTAL EXPENDITURES</b> <i>(Add lines 13a, 13b, 13c, 14, 15, 16 and 17)</i>				\$ 2,338.40	
				\$ 18,059.08	
<b>19) Cash on Hand at End</b> <i>(Add lines 4 and 12 together, then subtract line 18)</i>				\$ 104.15	
				\$ 104.15	
<b>ADDITIONAL INFORMATION</b>					
<b>20) Non-Monetary Gifts Given to Other Committees</b>		<i>(CRO-1330)</i>		\$	
<b>21) Outstanding Loans (incl. ones from other campaigns)</b>		<i>(CRO-1430)</i>		\$	
<b>22) Debts and Obligations owed By the Committee</b>		<i>(CRO-1610)</i>		\$	
<b>23) Debts and Obligations owed To the Committee</b>		<i>(CRO-1620)</i>		\$	
<b>24) Account Transfers Within the Committee</b>		<i>(CRO-1720)</i>		\$	
<b>25) Administrative Support</b>		<i>(CRO-1710)</i>		\$	
<b>26) Forgiven Loans</b>		<i>(CRO-1440)</i>		\$	
<b>27) 48-Hour Notice Reports Sum</b>		<i>(CRO-2200)</i>		\$	
<b>28) Contributions to be Refunded</b>		<i>(CRO-1215)</i>		\$	

# 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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
ISENHOWER FOR COMMISSIONER					TDU7NW	
<b>3. 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. Job Title/Profession</b>		<b>d. Comments</b>	
WILLIAM F. ROBINSON PO BOX 274 NEWTON, NC 28658			RETIRE			
			<b>c. Employer's Name/Specific Field</b>			
					<b>e. Election Sum to Date</b>	
					\$      100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>
<input type="checkbox"/>	CRI	CHECK		10/19/2010		\$      100.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
<b>3. 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. Job Title/Profession</b>		<b>d. Comments</b>	
			<b>c. Employer's Name/Specific Field</b>			
					<b>e. Election Sum to Date</b>	
					\$	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
<b>3. 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. Job Title/Profession</b>		<b>d. Comments</b>	
			<b>c. Employer's Name/Specific Field</b>			
					<b>e. Election Sum to Date</b>	
					\$	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
<b>4. Total only this Page</b>					\$      100.00	
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$      100.00	

# 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>						<b>2. ID Number</b>
ISENHOWER FOR COMMISSIONER						TDU7NW
<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> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
WNNC RADIO 1666 RADIO STATION RD NEWTON, NC 28658 828-464-4041						
			<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 2125.00	
<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>	
CRI	CHECK	A	10/18/2010	\$800.00	RADIO ADS	
				\$		
<b>4. Payee 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. Coordinated Committee Name</b>		<b>d. Comments</b>	
WHKY RADIO PO BOX 1059 HICKORY, NC 28603 828-322-5115						
			<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 2161.00	
<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>	
CRI	CHECK	A	10/18/2010	\$794.00	RADIO ADS	
				\$		
<b>4. Payee 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. Coordinated Committee Name</b>		<b>d. Comments</b>	
CATAWBA COUNTY BRANCH OF NAACP PO BOX 1444 NEWTON, NC 28658						
			<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 45.00	
<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>	
CRI	CHECK	A	10/24/2010	\$45.00	BROCHURE	
				\$		
<b>5. Total only this Page</b>						\$ 1639.00
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 2338.40
<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>						
<b>7. Purpose Codes</b> (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

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> ISENHOWER FOR COMMISSIONER						<b>2. ID Number</b> TDU7NW
<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> PIEDMONT BUSINESS FORMS 703 WEST C STREET NEWTON, NC 28658			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
			<b>c. Level Registered (Specify)</b>			
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b>	
					\$ 1737.72	
<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>	
CRI	CHECK	B	10/26/2010	\$599.40	CARDS	
				\$		
<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> WNNC RADIO 1666 RADIO STATION RD NEWTON, NC 28658			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
			<b>c. Level Registered (Specify)</b>			
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b>	
					\$ 2225.00	
<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>	
CRI	CHECK	B	10/25/2010	\$100.00	RADIO ADS	
				\$		
<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>						\$ 699.40
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 2338.40
<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>						
<b>7. Purpose Codes</b> <i>(List detailed expenditure code in (h.) above)</i>						
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)						