



North Carolina  
 State Board of Elections  
 506 N Harrington Street  
 Raleigh, NC 27603

Kimberly Westbrook-Strach  
 Deputy Director – Campaign Reporting

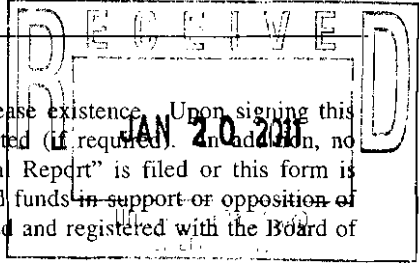
Mailing Address  
 PO Box 27255  
 Raleigh, NC 27611-7255  
 (919) 733-7173  
 Fax: (919) 715-8047

**Certification to Close Committee**

This Certification is used to express the intent to close the committee after all funds have been properly disbursed.

**FILED BY:**

Committee Name: Elect Daniel Kennedy 2010  
 Treasurer Name: Nancy Shelton  
 Treasurer Address: 2008 Bauer Place  
 (include city, state, & zip) Waxhaw, NC 28173  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Treasurer Phone: 704-243-3321



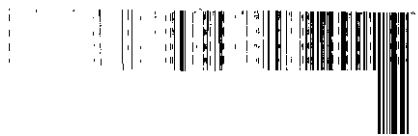
I certify that the above mentioned Committee intends to close and cease existence. Upon signing this certification, I declare that all funds have been distributed and reported (if required). In addition, no contributions will be accepted or disbursements made after the "Final Report" is filed or this form is signed. If the Committee at any future time intends to accept or spend funds in support or opposition of any candidate or ballot issue, a new political committee must be formed and registered with the Board of Elections before such activities may commence.

Committees that have filed under the \$3,000 threshold will only be required to sign this Certification. No "Final Report" will be required for committees meeting this criterion. Any Committee that did not file under the \$3,000 threshold must submit a "Final Report" with this Certification. This report must have a zero balance with no outstanding loans or debts.

1/20/11  
 Date Signed

Nancy B. Shelton  
 Signature

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.



# 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

<b>1. Committee Information</b>			
<b>a. Full Name</b> ELECT DANIEL KENENDY 2010		<b>c. ID Number</b> 27-3416342	
<b>b. Mailing Address (include City, State and Zip Code)</b> 403 CONAWAY CT WAXHAW NC 28173		<b>d. Date Filed</b> 01/11/2011	
		<b>c. Phone Number</b> 704-350-5217	
<b>2. Report Year</b> 2010	<b>3. Period Start Date (mm/dd/yy)</b> 10/01/2010	<b>4. Period End Date (mm/dd/yy)</b> 12/31/2010	<b>5. Treasurer Full Name</b> NANCY SHELTON
<b>6. Type of Committee (Check One)</b>		<b>9. Type of Report (check only one type of report from one category)</b>	
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser		<b>Municipal</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
<b>7. Type of Fund (if applicable, check one)</b>		<b>State/County</b>	
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input checked="" type="checkbox"/> Other:		<input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input checked="" type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
<b>8. Number of Fundraisers this Report</b> 0		<b>10. Special Report Name</b>	
<b>11. Account Information</b>		<b>11. Account Information</b>	
<b>a. Financial Institution Full Name</b> Wachovia Bank		<b>a. Financial Institution Full Name</b>	
<b>b. Purpose</b> Fundraising Advertising	<b>c. Account Code</b> 1	<b>b. Purpose</b>	<b>c. Account Code</b>
	<b>d. Period Begin Balance</b> \$ 145.86		<b>d. Period Begin Balance</b>

RECEIVED

JAN 20 2011

UNION COUNTY BOARD OF ELECTIONS

**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.

Nancy B Shelton \_\_\_\_\_ *Nancy B. Shelton* \_\_\_\_\_ 01/11/2011 \_\_\_\_\_  
 Printed Name of Signer Signature of Appointed Treasurer Date

**FOR OFFICE USE ONLY**

Date Received: <u>1-20-2011</u>	Employee: <u>Ushia Owen</u>	<b>Delivery Method</b> <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training
Date Postmarked: _____	Employee: _____	
Date Scanned: _____	Employee: _____	
Date Data Entered: _____	Employee: _____	

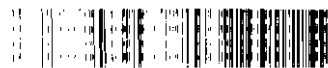
**Please Note:** This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.  
 You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

# 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	
ELECT DAN KENNEDY 2010		Quarterly		27-3416342	
Start of Election Cycle: <b>January 1, 2010</b>		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 145.86		\$ 0.00	
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 45.00		\$ 141.00	
6) Contributions from Individuals (CRO-1210)		\$ 43.23		\$ 662.17	
7) Contributions from Political Party Committees (CRO-1220)		\$		\$	
8) Contributions from Other Political Committees (CRO-1230)		\$ 0.00		\$ 228.00	
9) Loan Proceeds (CRO-1410)		\$		\$	
10) Refunds/Reimbursements To the Committee (CRO-1240)		\$		\$	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$		\$	
11b) Contributions from Not-for-Profit Organizations (CRO-1250)		\$		\$	
11c) Outside Sources of Income (CRO-1250)		\$		\$	
11d) Legal Expense Fund – Other Sources (CRO-1270)		\$		\$	
11 e) Exempt Purchase Price Sales (CRO-1265)		\$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 88.23		\$ 1031.17	
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 0.00		\$ 5.44	
13b) Contributions to Candidates/Political Committees (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 (CRO-1320)		\$ 234.09		\$ 956.79	
17) In-Kind Contributions (CRO-1510)		\$		\$ 68.94	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 234.09		\$ 1031.17	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 0.00		\$ 0.00	
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 (CRO-2200)		\$		\$	
28) Contributions to be Refunded (CRO-1215)		\$ 234.09		\$ 956.79	

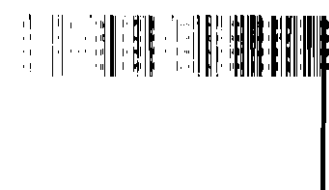




# Contributions from Individuals

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>	
ELECT DANIEL KENNEDY 2010					27-3416342	
<b>3. Contributor Information</b> <input checked="" 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>	
DANIEL KENNEDY 403 CONAWAY CT WAXHAW, NC 28173 704-243-0138			CONSULTANT		Candidate	
			<b>c. Employer's Name/Specific Field</b>			
			NOUVEON TECHNOLOGY		<b>c. Election Sum to Date</b>	
				\$ 362.17		
<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"/>	1	check		11/12/2010	\$ 43.23	
<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>c. 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>c. 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>					\$ 43.23	
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 43.23	



# Refunds/Reimbursements From the Committee

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

<b>1. Committee Full Name (and Fund if applicable)</b>			<b>2. ID Number</b>		
Elect Daniel Kennedy 2010			27-3416342		
<b>3. Payee Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>d. Type of Committee</b>		<b>h. Original Receipt Date</b>	
Nancy B. Shelton 2008 Bauer Place Waxhaw, NC 28173 704-243-3321		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		10/21/2010	
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party			
		<b>e. Level Registered (Specify)</b>		<b>i. Original Receipt Amount</b>	
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 107.75	
<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>		<b>g. Comments</b>	
homemaker		n/a		campaign treasurer	
<b>f. Purpose Code</b>		<b>j. Election Sum to Date</b>			
literature		\$ 830.45			
<b>k. Account Code</b>		1			
<b>l. Form of Payment</b>	<b>m. Required Remarks</b>	<b>n. Date (mm/dd/yyyy)</b>	<b>o. Amount</b>		
card	reimbursed for printed material	10/21/2010	\$ 107.75		
<b>3. Payee Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>d. Type of Committee</b>		<b>h. Original Receipt Date</b>	
Nancy B. Shelton 2008 Bauer Place Waxhaw, NC 28173 704-243-3321		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		11/08/2010	
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party			
		<b>e. Level Registered (Specify)</b>		<b>i. Original Receipt Amount</b>	
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 126.34	
<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>		<b>g. Comments</b>	
homemaker		n/a		campaign treasurer	
<b>f. Purpose Code</b>		<b>j. Election Sum to Date</b>			
literature		\$ 956.79			
<b>k. Account Code</b>		1			
<b>l. Form of Payment</b>	<b>m. Required Remarks</b>	<b>n. Date (mm/dd/yyyy)</b>	<b>o. Amount</b>		
card	reimbursed for printed material	11/08/2010	\$ 126.34		
<b>3. 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>d. Type of Committee</b>		<b>h. Original Receipt Date</b>	
		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC			
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party			
		<b>e. Level Registered (Specify)</b>		<b>i. Original Receipt Amount</b>	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>		<b>g. Comments</b>	
<b>f. Purpose Code</b>		<b>j. Election Sum to Date</b>			
		\$			
<b>k. Account Code</b>					
<b>l. Form of Payment</b>	<b>m. Required Remarks</b>	<b>n. Date (mm/dd/yyyy)</b>	<b>o. Amount</b>		
			\$		
<b>4. Total only this Page</b>				\$ 234.09	
<b>5. Total of ALL CRO-1320 Pages (This line must be on line 16 of Detailed Summary Page CRO-1100)</b>				\$ 234.09	
L - Returned to Contributor                      M - Overpayment for Service                      N - Exceeded Contribution Limit P* - Reimbursement of In-Kind                      O* Other * Codes require detailed explanation in required remarks field (m)					

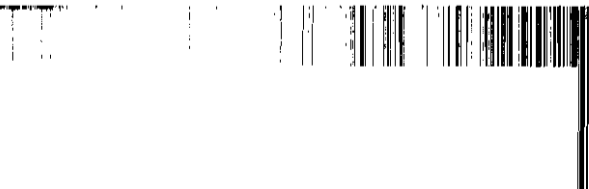


**Contributions to be Reimbursed**

Use this form to report Contributions of \$1,000 or less to be reimbursed within 7 days.

Reimbursements must be disclosed on the Refunds/Reimbursements Form (CRO-1320).

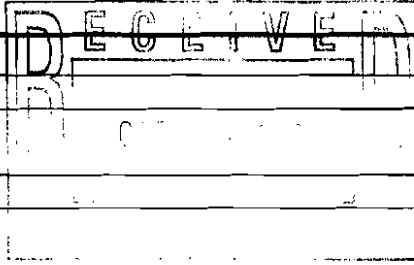
<b>1. Committee Full Name</b>		<b>2. ID Number</b>	
Elect Daniel Kennedy 2010		27-3416342	
<b>3. Contributor Information</b> <input checked="" type="checkbox"/>		<b>Add</b> <input type="checkbox"/>	<b>Remove</b>
<b>Full Name &amp; Mailing Address of the Payee (the original vendor)</b>		<b>Full Name &amp; Mailing Address of the Reimbursee (the person to whom the campaign check is written)</b>	
BP Printing and Copying 3756 Pleasant Plains Road Stallings, NC 28104		Nancy B. Shelton 2008 Bauer Place Waxhaw, NC 28173	
<b>a. Contribution Description</b>	<b>b. Date (mm/dd/yyyy)</b>	<b>c. Credit Card Y/N</b>	<b>d. Amount</b>
fliers and brochures	10/21/2010	y	\$ 107.75
<b>3. Contributor Information</b> <input checked="" type="checkbox"/>		<b>Add</b> <input type="checkbox"/>	<b>Remove</b>
<b>Full Name &amp; Mailing Address of the Payee (the original vendor)</b>		<b>Full Name &amp; Mailing Address of the Reimbursee (the person to whom the campaign check is written)</b>	
BP Printing and Copying 3756 Pleasant Plains Road Stallings, NC 28104		Nancy B. Shelton 2008 Bauer Place Waxhaw, NC 28173	
<b>a. Contribution Description</b>	<b>b. Date (mm/dd/yyyy)</b>	<b>c. Credit Card Y/N</b>	<b>d. Amount</b>
fliers and brochures	11/08/2010	Y	\$ 126.34
<b>3. Contributor Information</b> <input type="checkbox"/>		<b>Add</b> <input type="checkbox"/>	<b>Remove</b>
<b>Full Name &amp; Mailing Address of the Payee (the original vendor)</b>		<b>Full Name &amp; Mailing Address of the Reimbursee (the person to whom the campaign check is written)</b>	
<b>a. Contribution Description</b>	<b>b. Date (mm/dd/yyyy)</b>	<b>c. Credit Card Y/N</b>	<b>d. Amount</b>
			\$
<b>3. Contributor Information</b> <input type="checkbox"/>		<b>Add</b> <input type="checkbox"/>	<b>Remove</b>
<b>Full Name &amp; Mailing Address of the Payee (the original vendor)</b>		<b>Full Name &amp; Mailing Address of the Reimbursee (the person to whom the campaign check is written)</b>	
<b>a. Contribution Description</b>	<b>b. Date (mm/dd/yyyy)</b>	<b>c. Credit Card Y/N</b>	<b>d. Amount</b>
			\$
<b>4. Total only this Page</b>			\$ 234.09
<b>5. Total of ALL CRO-1215 Pages</b> <i>(This line goes in line 28 of Detailed Summary Page CRO-1100)</i>			\$ 234.09



# 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



<b>1. Committee Information</b>		<b>c. ID Number</b>	
<b>a. Full Name</b> ELECT DANIEL KENENDY 2010		27-3416342	
<b>b. Mailing Address (include City, State and Zip Code)</b> 403 CONAWAY CT WAXHAW NC 28173		<b>d. Date Filed</b> 10/05/2010	
		<b>e. Phone Number</b> 704-350-5217	
<b>2. Report Year</b>	<b>3. Period Start Date (mm/dd/yy)</b>	<b>4. Period End Date (mm/dd/yy)</b>	<b>5. Treasurer Full Name</b>
2010	09/09/2010	09/30/2010	NANCY SHELTON
<b>6. Type of Committee (Check One)</b>		<b>9. Type of Report (check only one type of report from one category)</b>	
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser		<b>Municipal</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-clcction <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
<b>7. Type of Fund (if applicable, check one)</b>		<b>State/County</b>	
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input checked="" type="checkbox"/> Other:		<input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input checked="" type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
<b>8. Number of Fundraisers this Report</b>		<b>10. Special Report Name</b>	
0			
<b>11. Account Information</b>		<b>11. Account Information</b>	
<b>a. Financial Institution Full Name</b> Wachovia Bank		<b>a. Financial Institution Full Name</b>	
<b>b. Purpose</b> Fundraising Advertising	<b>c. Account Code</b> 1	<b>b. Purpose</b>	<b>c. Account Code</b>
	<b>d. Period Begin Balance</b> \$ 350		<b>d. Period Begin Balance</b> \$
<b>CERTIFICATION</b>			
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.			
Nancy B Shelton Printed Name of Signer		Nancy B. Shelton Signature of Appointed Treasurer	10/05/2010 Date
<b>FOR OFFICE USE ONLY</b>			
Date Received:	10-21-2010	Employee:	Vicki Owe
Date Postmarked:	10-19-2010	Employee:	Vicki Owe
Date Scanned:		Employee:	
Date Data Entered:		Employee:	
<b>Delivery Method</b> <input type="checkbox"/> Normal Mail <input checked="" type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training			
<b>Please Note:</b> 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	
ELECT DAN KENNEDY 2010		Quarterly		27-3416342	
Start of Election Cycle: <b>January 1, 2010</b>		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 0		\$ 0	
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 96.00		\$ 96.00	
6) Contributions from Individuals (CRO-1210)		\$ 618.94		\$ 618.94	
7) Contributions from Political Party Committees (CRO-1220)		\$		\$	
8) Contributions from Other Political Committees (CRO-1230)		\$ 228.00		\$ 228.00	
9) Loan Proceeds (CRO-1410)		\$		\$	
10) Refunds/Reimbursements To the Committee (CRO-1240)		\$		\$	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$		\$	
11b) Contributions from Not-for-Profit Organizations (CRO-1250)		\$		\$	
11c) Outside Sources of Income (CRO-1250)		\$		\$	
11d) Legal Expense Fund – Other Sources (CRO-1270)		\$		\$	
11 e) Exempt Purchase Price Sales (CRO-1265)		\$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 942.94		\$ 942.94	
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 5.44		\$ 5.44	
13b) Contributions to Candidates/Political Committees (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 (CRO-1320)		\$ 722.70		\$ 722.70	
17) In-Kind Contributions (CRO-1510)		\$ 68.94		\$ 68.94	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 797.08		\$ 797.08	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 145.86		\$ 145.86	
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 (CRO-2200)		\$		\$	
28) Contributions to be Refunded (CRO-1215)		\$ 722.70		\$ 722.70	



**Contributions from Individuals**

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>	
ELECT DANIEL KENNEDY 2010						27-3416342	
<b>3. Contributor Information</b> <input checked="" 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>	
DANIEL KENNEDY 403 CONAWAY CT WAXHAW, NC 28173 704-243-0138				CONSULTANT		Candidate	
				<b>e. Employer's Name/Specific Field</b>			
				NOUVEON TECHNOLOGY			
						<b>e. Election Sum to Date</b>	
						\$ 318.94	
<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"/>	1	check		09/11/2010		\$ 250	
<input type="checkbox"/>		in-kind	website	09/07/2010		\$ 38.95	
<input type="checkbox"/>		in-kind	business cards	09/07/2010		\$ 29.99	
<b>3. Contributor Information</b> <input checked="" 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>	
Nancy B Shelton 2008 Bauer Place Waxhaw, NC 28173 704-243-3321				homemaker		campaign treasurer	
				<b>c. Employer's Name/Specific Field</b>			
				n/a			
						<b>e. Election Sum to Date</b>	
						\$ 100	
<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"/>	1	check		09/09/2010		\$ 100	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input checked="" 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>	
Liza Boyajian 1208 Glynwater Lane Waxhaw, NC 28173 704-849-2538				Sr. Vice President			
				<b>c. Employer's Name/Specific Field</b>			
				Bank of America			
						<b>e. Election Sum to Date</b>	
						\$ 100	
<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"/>	1	PayPal		09/23/2010		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>4. Total only this Page</b>						\$ 518.94	
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 618.94	

**Contributions from Individuals**

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>	
ELECT DANIEL KENNEDY 2010						27-3416342	
<b>3. Contributor Information</b> <input checked="" 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>	
Susan Garcelon 4017 Whitaker Place Waxhaw, NC 28173 704-243-3190				homemaker			
				<b>c. Employer's Name/Specific Field</b>			
				n/a			
						<b>e. Election Sum to Date</b>	
						\$ 100	
<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"/>	1	check		09/30/2010		\$ 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>						\$ 618.94	

**Contributions to be Reimbursed**

Use this form to report Contributions of \$1,000 or less to be reimbursed within 7 days.

Reimbursements must be disclosed on the Refunds/Reimbursements Form (CRO-1320).

<b>1. Committee Full Name</b>		<b>2. ID Number</b>	
Elect Daniel Kennedy 2010		27-3416342	
<b>3. Contributor Information</b> <input checked="" type="checkbox"/>		<b>Add</b> <input type="checkbox"/>	<b>Remove</b>
<b>Full Name &amp; Mailing Address of the Payee (the original vendor)</b>		<b>Full Name &amp; Mailing Address of the Reimbursee (the person to whom the campaign check is written)</b>	
A. G. E. Graphics 52231 State Route 248 Long Bottom, OH 45743		Nancy B. Shelton 2008 Bauer Place Waxhaw, NC 28173	
<b>a. Contribution Description</b>	<b>b. Date (mm/dd/yyyy)</b>	<b>c. Credit Card Y/N</b>	<b>d. Amount</b>
yard signs	09/27/2010	Y	\$ 275.00
<b>3. Contributor Information</b> <input checked="" type="checkbox"/>		<b>Add</b> <input type="checkbox"/>	<b>Remove</b>
<b>Full Name &amp; Mailing Address of the Payee (the original vendor)</b>		<b>Full Name &amp; Mailing Address of the Reimbursee (the person to whom the campaign check is written)</b>	
BP Printing and Copying 3756 Pleasant Plains Road Stallings, NC 28104		Nancy B. Shelton 2008 Bauer Place Waxhaw, NC 28173	
<b>a. Contribution Description</b>	<b>b. Date (mm/dd/yyyy)</b>	<b>c. Credit Card Y/N</b>	<b>d. Amount</b>
fliers and brochures	10/04/2010	Y	\$ 447.70
<b>3. Contributor Information</b> <input type="checkbox"/>		<b>Add</b> <input type="checkbox"/>	<b>Remove</b>
<b>Full Name &amp; Mailing Address of the Payee (the original vendor)</b>		<b>Full Name &amp; Mailing Address of the Reimbursee (the person to whom the campaign check is written)</b>	
<b>a. Contribution Description</b>	<b>b. Date (mm/dd/yyyy)</b>	<b>c. Credit Card Y/N</b>	<b>d. Amount</b>
			\$
<b>3. Contributor Information</b> <input type="checkbox"/>		<b>Add</b> <input type="checkbox"/>	<b>Remove</b>
<b>Full Name &amp; Mailing Address of the Payee (the original vendor)</b>		<b>Full Name &amp; Mailing Address of the Reimbursee (the person to whom the campaign check is written)</b>	
<b>a. Contribution Description</b>	<b>b. Date (mm/dd/yyyy)</b>	<b>c. Credit Card Y/N</b>	<b>d. Amount</b>
			\$
<b>4. Total only this Page</b>			\$ 722.70
<b>5. Total of ALL CRO-1215 Pages</b> <i>(This line goes in line 28 of Detailed Summary Page CRO-1100)</i>			\$ 722.70

# Contributions from Other Political Committees

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

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
Elect Daniel Kennedy 2010				27-3416342	
<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Type of Committee</b>		<b>d. Comments</b>	
Elect TracyK Committee 1229 Farm Creek Road Waxhaw, NC 28173 704-843-7117		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC			
		<input type="checkbox"/> Referendum			
		<b>c. Level Registered (Specify)</b>			
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County:		<b>e. Election Sum to Date</b>	
		<input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 228.00	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. In-Kind Description</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
1	check		09/26/2010	\$ 228.00	
				\$	
				\$	
<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. Type of Committee</b>		<b>d. Comments</b>	
		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC			
		<input type="checkbox"/> Referendum			
		<b>c. Level Registered (Specify)</b>			
		<input type="checkbox"/> Federal <input type="checkbox"/> County:		<b>e. Election Sum to Date</b>	
		<input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. In-Kind Description</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
				\$	
				\$	
				\$	
<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. Type of Committee</b>		<b>d. Comments</b>	
		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC			
		<input type="checkbox"/> Referendum			
		<b>c. Level Registered (Specify)</b>			
		<input type="checkbox"/> Federal <input type="checkbox"/> County:		<b>e. Election Sum to Date</b>	
		<input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. In-Kind Description</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
				\$	
				\$	
				\$	
<b>4. Total only this Page</b>				\$ 228.00	
<b>5. Total of ALL CRO-1230 Pages</b> <i>(This line must be on line 8 of Detailed Summary Page CRO-1100)</i>				\$ 228.00	

# 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> Elect Daniel Kennedy 2010					<b>2. ID Number</b> 27-3416342
<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 checked="" type="checkbox"/> <b>Add</b> <input type="checkbox"/> <b>Remove</b>					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) PayPal.com P.O. Box 45950 Omaha, NE 68145 888-221-1161		<b>b. Coordinated Committee Name</b>		<b>d. Comments</b> processing fees for donations	
		<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> \$ 5.44	
<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>
1	deduct	C	9/30/2010	\$5.44	processing fees for donations
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> <b>Add</b> <input type="checkbox"/> <b>Remove</b>					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<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>4. Payee Information</b> <input type="checkbox"/> <b>Add</b> <input type="checkbox"/> <b>Remove</b>					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<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>					\$ 5.44
<b>6. Total of ALL CRO-1310 Pages</b> <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>					\$ 5.44
<b>7. Purpose Codes</b> <i>(List detailed expenditure code in (h.) above)</i>					
A* - Media		B* - Printing		C* - Fundraising	
E - Salaries		F* - Equipment		G - Political Party	
I - Postage		J - Penalties		K* - Office Expenses	
O* - Other				D - To Another Candidate	
				H* - Holding Public Office Expenses	
				Q* - Donation to Legal Expense Fund	
* Codes require detailed explanation in required remarks field (k)					

# Refunds/Reimbursements From the Committee

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

<b>1. Committee Full Name (and Fund if applicable)</b>			<b>2. ID Number</b>		
Elect Daniel Kennedy 2010			27-3416342		
<b>3. Payee Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>d. Type of Committee</b>		<b>h. Original Receipt Date</b>	
Nancy B. Shelton 2008 Bauer Place Waxhaw, NC 28173 704-243-3321		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		09/27/2010	
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party			
		<b>e. Level Registered (Specify)</b>		<b>i. Original Receipt Amount</b>	
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 275.00	
<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>		<b>g. Comments</b>	
homemaker		n/a		campaign treasurer	
<b>f. Purpose Code</b>		<b>j. Election Sum to Date</b>			
yard signs		\$ 275.00			
<b>l. Form of Payment</b>		<b>m. Required Remarks</b>		<b>n. Date (mm/dd/yyyy)</b>	
card		reimbursed for yard signs		09/30/2010	
<b>o. Amount</b>		\$ 275.00			
<b>3. Payee Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>d. Type of Committee</b>		<b>h. Original Receipt Date</b>	
Nancy B. Shelton 2008 Bauer Place Waxhaw, NC 28173 704-243-3321		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		10/04/2010	
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party			
		<b>e. Level Registered (Specify)</b>		<b>i. Original Receipt Amount</b>	
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 447.70	
<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>		<b>g. Comments</b>	
homemaker		n/a		campaign treasurer	
<b>f. Purpose Code</b>		<b>j. Election Sum to Date</b>			
		\$			
<b>l. Form of Payment</b>		<b>m. Required Remarks</b>		<b>n. Date (mm/dd/yyyy)</b>	
card		reimbursed for printed materials		10/04/2010	
<b>o. Amount</b>		\$ 447.70			
<b>3. 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>d. Type of Committee</b>		<b>h. Original Receipt Date</b>	
		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC			
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party			
		<b>e. Level Registered (Specify)</b>		<b>i. Original Receipt Amount</b>	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>		<b>g. Comments</b>	
<b>f. Purpose Code</b>		<b>j. Election Sum to Date</b>			
		\$			
<b>l. Form of Payment</b>		<b>m. Required Remarks</b>		<b>n. Date (mm/dd/yyyy)</b>	
<b>o. Amount</b>		\$			
<b>4. Total only this Page</b>				\$ 722.70	
<b>5. Total of ALL CRO-1320 Pages</b> (This line must be on line 16 of Detailed Summary Page CRO-1100)				\$ 722.70	
L - Returned to Contributor      M - Overpayment for Service      N - Exceeded Contribution Limit P* - Reimbursement of In-Kind      O* Other					
* Codes require detailed explanation in required remarks field (m)					

# 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.

<b>1. Committee Full Name (and Fund if applicable)</b> ELECT DANIEL KENNEDY 2010		<b>2. ID Number</b> 27-3416342	
<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) DANIEL M KENNEDY 403 CONAWAY CT WAXHAW NC 28173 704-243-0138		<b>b. Type of Contributor</b> <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		<b>c. Comments</b>	
		<b>d. Election Sum to Date</b> \$ 68.94	
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	<b>g. Fair Market Amount</b>
DOMAIN NAME KENNEDY2010.COM		09/07/2010	\$ 14.95
WEBSITE HOSTING (3 MONTHS)		09/07/2010	\$ 24.00
BUSINESS CARD FORMS		09/07/2010	\$ 29.99
<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. Type of Contributor</b> <input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		<b>c. Comments</b>	
		<b>d. Election Sum to Date</b> \$	
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	<b>g. Fair Market Amount</b>
			\$
			\$
			\$
<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. Type of Contributor</b> <input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		<b>c. Comments</b>	
		<b>d. Election Sum to Date</b> \$	
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	<b>g. Fair Market Amount</b>
			\$
			\$
			\$
<b>4. Total only this Page</b>		\$ 68.94	
<b>5. Total of ALL CRO-1510 Pages</b> <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		\$ 68.94	

# Statement of Organization - Candidate Committee

Amendment

Yes  No

Use this form to create a new or update an existing candidate committee.

This form must be accompanied by forms CRO-3100 and CRO-3500.

<b>1. Committee Information</b>			
<b>a. Full Name</b>		<b>c. ID Number</b>	
ELECT DANIEL KENNEDY 2010		27-3416342	
<b>b. Mailing Address (include City, State and Zip Code)</b>		<b>d. Date Organized</b>	
403 CONAWAY CT WAXHAW, NC 28173		9/4/2010	
		<b>e. Phone Number</b>	
		704-350-5217	
<b>2. Candidate Information</b>		<input type="checkbox"/> <b>Candidate's Primary Committee</b>	
<b>a. Full Name</b>		<b>c. Candidate ID Number</b>	<b>d. Party Affiliation</b>
DANIEL M KENNEDY			NONPARTISAN
<b>b. Mailing Address (include City, State, and Zip Code)</b>		<b>e. Office Sought</b>	<b>f. Jurisdiction</b>
403 CONAWAY CT WAXHAW, NC 28173		UNION COUNTY BOARD OF EDUCATION	DISTRCT 6
		<i>(If office sought is nonpartisan, write "Nonpartisan" in [d] Party Affiliation.)</i>	
<b>3. Treasurer Information</b>		<b>4. Custodian of Books Information</b>	
<b>a. Full Name</b>		<b>a. Full Name</b>	
NANCY SHELTON		NANCY SHELTON	
<b>b. Mailing Address (include City, State, and Zip Code)</b>		<b>b. Mailing Address (include City, State, and Zip Code)</b>	
2008 Bauer Place Waxhaw, NC 28173		2008 Bauer Place Waxhaw, NC 28173	
<b>c. Phone Number</b>	<b>d. Email Address</b>	<b>c. Phone Number</b>	<b>d. Email Address</b>
704-243-3321	nancy.shelton65 @yahoo.com	704-243-3321	nancy.shelton65 @yahoo.com
<b>5. Assistant Treasurer Information</b>		<b>6. Account Information</b> <i>(incl. CRO-3500)</i>	
<b>a. Full Name</b>		<input type="checkbox"/> Add	<input checked="" type="checkbox"/> Add
		<input type="checkbox"/> Remove	<input type="checkbox"/> Remove
<b>b. Mailing Address (include City, State, and Zip Code)</b>		Wachovia Bank	Union County
		<b>b. Purpose</b>	SEP 14 2010
		Fundraising	
		Advertising	
<b>c. Phone Number</b>	<b>d. Email Address</b>	<b>c. Account Code</b>	<b>d. Type</b>
		1	Board of Elections checking
			non-profit
<b>CERTIFICATION</b>			
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.			
<u>Nancy B. Shelton</u>		<u>Nancy B. Shelton</u>	<u>9/12/10</u>
Printed Name of Signer		Signature of Appointed Treasurer	Date

# 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

<b>1. Committee Information</b>	
<b>a. Full Name</b> ELECT DANIEL KENENDY 2010	<b>c. ID Number</b> 27-3416342
<b>b. Mailing Address (include City, State and Zip Code)</b> 403 CONAWAY CT WAXHAW NC 28173	<b>d. Date Filed</b> 09/12/2010
	<b>e. Phone Number</b> 704-350-5217
<b>2. Report Year</b> 2010	<b>3. Period Start Date (mm/dd/yy)</b> 09/09/2010
<b>4. Period End Date (mm/dd/yy)</b> 9/30/10	<b>5. Treasurer Full Name</b> NANCY SHELTON
<b>6. Type of Committee (Check One)</b>	<b>9. Type of Report (check only one type of report from one category)</b>
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser	<b>Municipal</b> <input checked="" type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special
<b>7. Type of Fund (if applicable, check one)</b>	<b>State/County</b>
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input checked="" type="checkbox"/> Other:	<input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special
<b>8. Number of Fundraisers this Report</b> 0	<b>10. Special Report Name</b>
<b>11. Account Information</b>	
<b>a. Financial Institution Full Name</b> Wachovia Bank	<b>a. Financial Institution Full Name</b>
<b>b. Purpose</b> Fundraising Advertising	<b>b. Purpose</b>
<b>c. Account Code</b> 1	<b>c. Account Code</b>
<b>d. Period Begin Balance</b> \$ 350	<b>d. Period Begin Balance</b> \$
<b>CERTIFICATION</b>	
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.	
Nancy B Shelton Printed Name of Signer	<i>Nancy B Shelton</i> Signature of Appointed Treasurer
	09/12/2010 Date
<b>FOR OFFICE USE ONLY</b>	
Date Received: _____	Employee: _____
Date Postmarked: _____	Employee: _____
Date Scanned: _____	Employee: _____
Date Data Entered: _____	Employee: _____
<b>Delivery Method</b> <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input checked="" type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training	
SEP 14 2010	
<b>Please Note:</b> 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	
ELECT DAN KENNEDY 2010		27-3416342	
Start of Election Cycle: <b>January 1, 2010</b>	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start	\$ 0	\$ 0	
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals (CRO-1205)	\$	\$	
6) Contributions from Individuals (CRO-1210)	\$ 418.94	\$ 418.94	
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)	\$	\$	
11) Other Receipt Sources			
11a) Interest on Bank Accounts (CRO-1250)	\$	\$	
11b) Contributions from Not-for-Profit Organizations (CRO-1250)	\$	\$	
11c) Outside Sources of Income (CRO-1250)	\$	\$	
11d) Legal Expense Fund - Other Sources (CRO-1270)	\$	\$	
11 e) Exempt Purchase Price Sales (CRO-1265)	\$	\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$ 418.94	\$ 418.94	
<b>EXPENDITURES</b>			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)	\$	\$	
13b) Contributions to Candidates/Political Committees (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 (CRO-1320)	\$	\$	
17) In-Kind Contributions (CRO-1510)	\$ 68.94	\$ 68.94	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 68.94	\$ 68.94	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 350	\$ 350	
<b>ADDITIONAL INFORMATION</b>			
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 (CRO-2200)	\$	\$	
28) Contributions to be Refunded (CRO-1215)	\$	\$	

**Contributions from Individuals**

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>	
ELECT DANIEL KENNEDY 2010					27-3416342	
<b>3. Contributor Information</b> <input checked="" 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>	
DANIEL KENNEDY 403 CONAWAY CT WAXHAW, NC 28173 704-243-0138			CONSULTANT		Candidate	
			<b>c. Employer's Name/Specific Field</b> NOUVEON TECHNOLOGY			
					<b>e. Election Sum to Date</b>	
					\$ 318.94	
<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"/>	1	check		09/11/2010		\$ 250
<input type="checkbox"/>		in-kind	website	09/07/2010		\$ 38.95
<input type="checkbox"/>		in-kind	business cards	09/07/2010		\$ 29.99
<b>3. Contributor Information</b> <input checked="" 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>	
Nancy B Shelton 2008 Bauer Place Waxhaw, NC 28173 704-243-3321			homemaker		campaign treasurer	
			<b>c. Employer's Name/Specific Field</b> n/a			
					<b>e. Election Sum to Date</b>	
					\$ 100	
<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"/>	1	check		09/09/2010		\$ 100
<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>					\$ 418.94	
<b>5. Total of ALL CRO-1210 Pages</b>					\$ 418.94	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

# In-Kind Contributions

Amendment

Pg 1 of 1  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.

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
ELECT DANIEL KENNEDY 2010		27-3416342	
<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Type of Contributor</b>	<b>c. Comments</b>
DANIEL M KENNEDY 403 CONAWAY CT WAXHAW NC 28173 704-243-0138		<input type="checkbox"/> Individual <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			<b>d. Election Sum to Date</b>
			\$ 68.94
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	<b>g. Fair Market Amount</b>
DOMAIN NAME KENNEDY2010.COM		09/07/2010	\$ 14.95
WEBSITE HOSTING (3 MONTHS)		09/07/2010	\$ 24.00
BUSINESS CARD FORMS		09/07/2010	\$ 29.99
<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. Type of Contributor</b>	<b>c. Comments</b>
		<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			<b>d. Election Sum to Date</b>
			\$
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	<b>g. Fair Market Amount</b>
			\$
			\$
			\$
<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. Type of Contributor</b>	<b>c. Comments</b>
		<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			<b>d. Election Sum to Date</b>
			\$
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	<b>g. Fair Market Amount</b>
			\$
			\$
			\$
<b>4. Total only this Page</b>			\$ 68.94
<b>5. Total of ALL CRO-1510 Pages</b> <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>			\$ 68.94