

Disclosure Report Cover

Amendment
<input type="checkbox"/> Yes <input type="checkbox"/> 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.

a. Full Name Donnie H. Henson	c. ID Number AJ6146
b. Mailing Address (include City, State and Zip Code) 157 Rosemont Farm Rd Rutherfordton, NC 29139	d. Date Filed
	e. Phone Number 828-245-3909

Dwayne Clark Duncan

<input type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Booster Fund <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:	<input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser	Municipal <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	State/County <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	Referendum <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special
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a. Financial Institution Full Name State Employees Credit Union	a. Financial Institution Full Name
b. Purpose	b. Purpose
c. Account Code	c. Account Code
d. Period Begin Balance \$ 0	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 of Elections.

Dwayne Duncan Dwayne Duncan 2-19-10
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: <u>2-19-10</u>	Employee: <u>DL</u>	Delivery Method <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
<input type="checkbox"/> Yes <input type="checkbox"/> 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
Donnie H Henson			
Start of Election Cycle: January 1, _____	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start	\$	\$	
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)	\$	\$	
6) Contributions from Individuals (CRO-1210)	\$ 750.00	\$	
7) Contributions from Political Party Committees (CRO-1220)	\$	\$	
8) Contributions from Other Political Committees (CRO-1230)	\$	\$	
9) Loan Proceeds (CRO-1410)	\$ 884.01	\$	
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)	\$	\$	
11e) Exempt Purchase Price Sales (CRO-1265)	\$	\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$ 1634.01	\$	
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)	\$ 824.01	\$	
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)	\$	\$	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 824.01	\$	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 810.00	\$	
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 (CRO-2220)	\$	\$	
28) Contributions to be Refunded (CRO-1215)	\$	\$	

Contributions from Individuals

Pg _____ of _____

Amendment Yes No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

Donnie H Henson					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments
Kathleen Henson 191 Jack McKinney Rd Forest City NC 28043			Retired		
			c. Employer's Name/Specific Field		
			e. Election Sum to Date		\$
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	check		2-15-10	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments
Thadd Hodge 910 Dark Corner Rd Rutherfordton, NC 28135			Stock Boy		
			c. Employer's Name/Specific Field		
			e. Election Sum to Date		\$
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	check		2-14-10	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments
Carolyn Allen 1072 Piedmont Rd Rutherfordton, NC 28139			Retired		
			c. Employer's Name/Specific Field		
			e. Election Sum to Date		\$
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	check		2-12-10	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
					\$ 750.00
					\$ 750.00

Loan Proceeds

Pg ____ of ____

Amendment
 Yes No

Use this form to report proceeds from a loan and loan endorser's information

A loan proceeds statement must accompany each loan that is from an individual

Donnie H Henson				
<input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments
				e. Start Date (mm/dd/yyyy)
				c. Employer's Name/Specific Field
		f. End Date (mm/dd/yyyy)		
g. Rate %	h. Security Pledged	i. Account Code	j. Form of Payment Cash	k. Amount \$ 60.00
l. Full Name of Lending Institution				m. Loan Number
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field
				d. Percentage %
				e. Amount \$
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field
				d. Percentage %
				e. Amount \$
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field
				d. Percentage %
				e. Amount \$
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field
				d. Percentage %
				e. Amount \$
5. Total of ALL CRO Amounts (This line must be filled in.)				\$ 60.00

RECEIVED

FEB 22 2010

Loan Proceeds Statement

The individual making a loan to the committee must provide the following information. Failure to provide all of the information requested could be a violation of campaign reporting disclosure laws.

- Name of committee to receive loan: Donnie H Henson
- Person lending money to committee (Lender): Donnie H Henson
- Date of loan to committee: 2-12-10
- Name of lending institution and account number (source): _____
- Amount of loan: 60.00
- Names of all parties responsible for payment of loan (guarantors): _____
- Period of loan: _____
- Rate of interest of loan: _____
- Security pledged for loan: _____

I, Donnie H Henson, acknowledge that all of the information
(Person lending money to committee)
provided is complete, true, and accurate. I further understand I may not forgive a loan that has an outstanding balance to any source.

Donnie H Henson

Signature of Lender

Dwayne C. Dumas

Signature of Treasurer of Committee

This form must be submitted with the disclosure report for which the loan is initially disclosed.

Loan Proceeds

Pg ____ of ____

Amendment	
<input type="checkbox"/> Yes	<input type="checkbox"/> No

Use this form to report proceeds from a loan and loan endorser's information
 A loan proceeds statement must accompany each loan that is from an individual

Donnie H Henson				
<input type="checkbox"/> <input type="checkbox"/>				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments	
Donnie Haynes Hensen 157 Rosemont Farm Rd Rutherfordton NC 28139			e. Start Date (mm/dd/yyyy)	
		c. Employer's Name/Specific Field	f. End Date (mm/dd/yyyy)	
g. Rate %	h. Security Pledged	i. Account Code	j. Form of Payment Check	k. Amount \$ 824.01
l. Full Name of Lending Institution			m. Loan Number	
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field		
	d. Percentage %	e. Amount \$		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field		
	d. Percentage %	e. Amount \$		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field		
	d. Percentage %	e. Amount \$		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field		
	d. Percentage %	e. Amount \$		
				\$ 824.01

RECEIVED

FEB 22 2010

Loan Proceeds Statement

The individual making a loan to the committee must provide the following information. Failure to provide all of the information requested could be a violation of campaign reporting disclosure laws.

- Name of committee to receive loan: Donnie H Henson
- Person lending money to committee (Lender): Donnie H Henson
- Date of loan to committee: 2-12-10
- Name of lending institution and account number (source): _____
- Amount of loan: 224.01
- Names of all parties responsible for payment of loan (guarantors): _____
- Period of loan: _____
- Rate of interest of loan: _____
- Security pledged for loan: _____

I, Donnie H Henson, acknowledge that all of the information
(Person lending money to committee)
provided is complete, true, and accurate. I further understand I may not forgive a loan that has an outstanding balance to any source.

Donnie H Henson
Signature of Lender

Debra C. Quinn
Signature of Treasurer of Committee

This form must be submitted with the disclosure report for which the loan is initially disclosed.

