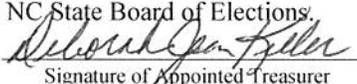
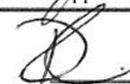


Disclosure Report Cover

JAN 13 2015

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

1. Committee Information			
a. Full Name Elect Deborah Keller		c. ID Number 3J675C	
b. Mailing Address (include City, State and Zip Code) 772 Clark Road Rutherfordon, NC 28139		d. Date Filed 01/08/2015	
		e. Phone Number (828)-287-4809	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2014	10/28/2014	01/13/2015	Deborah Jean Keller
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)	
<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		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 checked="" type="checkbox"/> Organizational Quarterly <input type="checkbox"/> First <input checked="" 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	
7. Type of Fund (if applicable, check one)		10. Special Report Name	
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:			
8. Number of Fundraisers this Report			
11. Account Information		11. Account Information	
a. Financial Institution Full Name BB&T		a. Financial Institution Full Name	
b. Purpose campaign	c. Account Code	b. Purpose	c. Account Code
	d. Period Begin Balance \$		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.			
Deborah Jean Keller Printed Name of Signer		 Signature of Appointed Treasurer	01/08/2015 Date
FOR OFFICE USE ONLY			
Date Received: 2-13-15	Employee: 	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
 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 Deborah Keller		3J675C	
Start of Election Cycle:	January 1, 2014	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 2.81	\$ 0
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 0	\$ 25.00
6) Contributions from Individuals	(CRO-1210)	\$ 210.00	\$ 3758.70
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0	\$ 750.00
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0	\$ 0
9) Loan Proceeds	(CRO-1410)	\$ 0	\$ 193.30
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$ 0	\$ 0
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0	\$ 0
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	\$ 0	\$ 0
11c) Outside Sources of Income	(CRO-1250)	\$ 0	\$ 0
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$ 0	\$ 0
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$ 0	\$ 0
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 210.00	\$ 4727.00
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 212.81	\$ 4483.30
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 0	\$ 200.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0	\$ 0
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 0	\$ 0
15) Loan Repayments	(CRO-1420)	\$ 0	\$ 0
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$ 0	\$ 0
17) In-Kind Contributions	(CRO-1510)	\$ 0	\$ 43.70
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 212.81	\$ 4727.00
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 0	\$ 0
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 0	
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$ 0	
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$ 0	
24) Account Transfers Within the Committee	(CRO-1720)	\$ 0	
25) Administrative Support	(CRO-1710)	\$ 0	\$ 0
26) Forgiven Loans	(CRO-1440)	\$ 193.30	\$ 193.30
27) 48-Hour Notice Reports Sum	(CRO-2200)	\$ 0	\$ 0
28) Contributions to be Refunded	(CRO-1215)	\$ 0	\$ 0

Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Elect Deborah Keller					31675C	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Deborah Keller 772 Clark Road Rutherfordton, NC 28139			Author			
			c. Employer's Name/Specific Field			
			self			
					e. Election Sum to Date	
					\$ 210.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		11/11/14	\$ 210.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
			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"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
			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"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 210.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 210.00	

Disbursements

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

1. Committee Full Name (and Fund if applicable)					2. ID Number
Elect Deborah Keller					3J675C
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)					
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Staples Forest City, NC		b. Coordinated Committee Name		d. Comments printing	
		c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County; <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ 67.24	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
		A	11/03/14	\$67.24	printing
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Facebook		b. Coordinated Committee Name		d. Comments Sponsored Ads	
		c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County; <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ 84.79	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
		A	11/05/14	\$48.11	Ads
		A	11/03/14	\$36.68	Ads
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) City Computer Forest City, NC		b. Coordinated Committee Name		d. Comments	
		c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County; <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ 50.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
		A	11/03/14	\$50.00	Ads
				\$	
5. Total only this Page					\$ 202.03
6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (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)					\$ 212.81
7. Purpose Codes (List detailed expenditure code in (h.) above)					
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)					

Disbursements

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

1. Committee Full Name (and Fund if applicable)					2. ID Number
Elect Deborah Keller					3J675C
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 type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
D & S Signs Spindale, NC					
		c. Level Registered (Specify)		e. Election Sum to Date	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 9.67	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
		B	10/29/14	\$9.67	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Deborah Keller 772 Clark Road Rutherfordton, NC 2839					
		c. Level Registered (Specify)		e. Election Sum to Date	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 1.11	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
		O	0/08/15	\$1.11	Amt. refunded from BB&T
				\$	acct. closed
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
		c. Level Registered (Specify)		e. Election Sum to Date	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
		A		\$	
				\$	
5. Total only this Page					\$ 10.78
6. Total of ALL CRO-1310 Pages					\$ 212.81
<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>					
7. Purpose Codes (List detailed expenditure code in (h.) above)					
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)					

Outstanding Loans

Amendment

Pg 1 of 1 Yes No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable)			2. ID Number
Elect Deborah Keller			3J675C
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
Deborah Keller 772 Clark Road Rutherfordton, NC 28139		freelance writer	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
			02/22/2014
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$	\$ 26.35
k. Full Name of Lending Institution			l. Loan Number
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
Clyde Keller 772 Clark Road Rutherfordton, NC 28139		chemist	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
			02/22/2014
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$	\$ 66.95
k. Full Name of Lending Institution			l. Loan Number
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
Clyde Keller 772 Clark Road Rutherfordton, NC 28139		chemist	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
			02/22/2014
			f. End Date (mm/dd/yyyy)
			100.00
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$	\$
k. Full Name of Lending Institution			l. Loan Number
4. Total only this Page			\$ 193.30
5. Total of ALL CRO-1430 Pages (This line must be on line 21 of Detailed Summary Page CRO-1100)			\$ 193.30

Forgiven Loans

Use this form to report any loan which has been forgiven by the lender.
 A Forgiven loan statement (CRO-6200) must accompany each forgiven loan.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Elect Deborah Keller		316750	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Comments	
Clyde Keller 772 Clark Road Rutherfordton, NC 28139 828-287-4809		c. Original Loan Date (mm/dd/yyyy)	
		2/22/14	
		f. Election Sum to Date	
		\$ 166.95	
		d. Original Loan Amount	
		\$ 166.95	
e. Remaining Loan Balance		g. Date (mm/dd/yyyy)	
\$ 166.95		11/11/14	
e. Remaining Loan Balance		h. Forgiven Amount	
\$ 166.95		\$ 166.95	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Comments	
Deborah Keller 772 Clark Road Rutherfordton, NC 28139 828-257-4809		c. Original Loan Date (mm/dd/yyyy)	
		2/22/14	
		f. Election Sum to Date	
		\$ 26.35	
		d. Original Loan Amount	
		\$ 26.35	
e. Remaining Loan Balance		g. Date (mm/dd/yyyy)	
\$ 26.35		11/11/14	
e. Remaining Loan Balance		h. Forgiven Amount	
\$ 26.35		\$ 26.35	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Comments	
		c. Original Loan Date (mm/dd/yyyy)	
		f. Election Sum to Date	
		\$	
		d. Original Loan Amount	
		\$	
e. Remaining Loan Balance		g. Date (mm/dd/yyyy)	
\$		\$	
e. Remaining Loan Balance		h. Forgiven Amount	
\$		\$	
4. Total only this Page		\$ 193.30	
5. Total of ALL CRO-1440 Pages <i>(This line must be on line 26 of Detailed Summary Page CRO-1100)</i>		\$ 193.30	
The lender information should contain the same information as supplied under the original loan proceed.			



North Carolina
State Board of Elections

441 N Harrington Street
Raleigh, NC 27603

JAN 13 2015

Kim Westbrook Strach
Executive Director

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 Deborah Keller

Treasurer Name: Deborah Jean Keller

Treasurer Address: 772 Clark Road

(include city, state, & zip) Rutherfordton, NC 28139

Treasurer Phone: 828-287-4809

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 \$1,000 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 \$1,000 threshold must submit a "Final Report" with this Certification. This report must have a zero balance with no outstanding loans or debts.

01/08/2015

Date Signed

Deborah Jean Keller
Signature

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