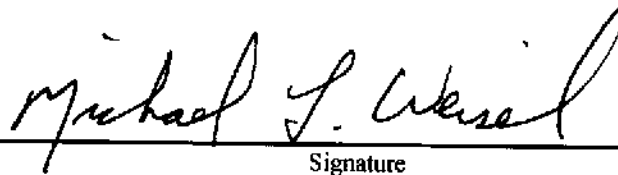


# Electioneering Communications Report

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

This form should be accompanied by forms CRO-2320, CRO-2330 and CRO-2340. For statutory guidance, please refer to N.C.G.S. § 163-278.6(8j), N.C.G.S. § 163-278.6(8k) and N.C.G.S. § 163-278.12C. If the expense incurred is greater than \$5,000 this report shall be filed electronically; free software is available for download from the state Board of Elections website at [www.sboe.state.nc.us](http://www.sboe.state.nc.us)

1. Reporting Entity Information		
a. Full Name of Entity Making Disbursement	c. Type (Check one)	d. Federal ID Number
North Carolina Citizens for Progress	<input type="checkbox"/> Individual <input type="checkbox"/> Other Organization <input checked="" type="checkbox"/> Nonprofit Organization	45-3626206
b. Mailing Address (include City, State and Zip Code) and Phone Number	e. Employer's Name or Principal Place of Business	
P. O. Box 255 Raleigh, North Carolina 27602	Not Applicable	
	f. Occupation	
	Not Applicable	
2. Period Covered		
3. Custodian of Books		
a. Full Name of Entity's Custodian of Books and Accounts	c. Employer's Name or Principal Place of Business	
Michael Schierbeek, CPA	Self Employed	
b. Mailing Address (include City, State and Zip Code) and Phone Number	d. Occupation	
P. O. Box 255 Raleigh, North Carolina 27602	Accountant	
4. Total Contributions ALL Pages	\$0.00	
5. Total Expenditures ALL Pages	\$326,135.00	
CERTIFICATION		
I certify that this statement is complete, true and correct.		
Michael L. Weisel		September 24, 2012
Printed Name of Signer	Signature	Date

CRO-2310

NC State Board of Elections



# Controlling/Directing Entity List

1. Entities Sharing/Exercising Control			
a. Full Name of Entity			
North Carolina Citizens for Progress			
b. Mailing Address (include City, State and Zip Code) and Phone Number		c. Employer's Name or Principal Place of Business	
P. O. Box 255 Raleigh, North Carolina 27602		Not Applicable	
		d. Occupation	
		Michael Schierbeek, CPA	
a. Full Name of Entity			
b. Mailing Address (include City, State and Zip Code) and Phone Number		c. Employer's Name or Principal Place of Business	
		d. Occupation	
a. Full Name of Entity			
b. Mailing Address (include City, State and Zip Code) and Phone Number		c. Employer's Name or Principal Place of Business	
		d. Occupation	
a. Full Name of Entity			
b. Mailing Address (include City, State and Zip Code) and Phone Number		c. Employer's Name or Principal Place of Business	
		d. Occupation	

# Receipts for Electioneering Communications

An organization should use this form to report all electioneering communication donations that exceeds \$1,000 in aggregated amounts from the same donor during the reporting period. This form should be accompanied by forms CRO-2310, CRO-2320 and CRO-2340

1. Receipt Information				
a. Item Num	b. Donor's Full Name, Mailing Address & Phone Number (include city, state, and zip)	c. Principal Occupation of Donor	d. Date (mm/dd/yyyy)	e. Amount
				\$
				\$
				\$
				\$
				\$
				\$
<b>2. Total Receipts THIS Page</b> <i>(sum all the '1e' entries on this page)</i>				\$0.00
<b>3. Total Receipts ALL Pages</b> <i>(sum all the '1e' entries on all receipt pages)</i>				\$0.00

# Incurred Costs for Electioneering Communications

An organization should use this form to report the entity with which costs were incurred for the electioneering communication as well as candidates identified or those to be identified. This form should be accompanied by forms CRO-2310, CRO-2320, and CRO-2330

1. Disbursement Information			
a. Item Num	b. Incurred Date (mm/dd/yyyy)	c. Communication Date (mm/dd/yyyy)	d. Purpose (including title(s) of communication(s))
1	09/21/2012	09/25/2012 - 10/01/2012	Television Advertisement "Come Clean"
e. Full Name, Mailing Address (include city, state, and zip) & Phone Number of the entity/business which was paid to produce the communication.			f. Amount
Shorr Johnson Magnus 1831 Chestnut Street, Suite 602 Philadelphia, PA 19103			\$ 326,135.00
Candidate Full Name		Office Sought	
Patrick L. McCrory		<input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Council of State (specify): GOV. <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Other Officer: _____ Co./Dst. _____	
		Amount	
		\$ 326,135.00	
Candidate Full Name		Office Sought	
		<input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Other Officer: _____ Co./Dst. _____	
		Amount	
		\$	
Candidate Full Name		Office Sought	
		<input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Other Officer: _____ Co./Dst. _____	
		Amount	
		\$	
a. Item Num	b. Incurred Date (mm/dd/yyyy)	c. Communication Date (mm/dd/yyyy)	d. Purpose (including title(s) of communication(s))
e. Full Name, Mailing Address (include city, state, and zip) & Phone Number of the entity/business which was paid to produce the communication.			f. Amount
			\$
Candidate Full Name		Office Sought	
		<input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Other Officer: _____ Co./Dst. _____	
		Amount	
		\$	
Candidate Full Name		Office Sought	
		<input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Other Officer: _____ Co./Dst. _____	
		Amount	
		\$	
<b>2. Total Disbursements THIS Page</b> <i>(sum all the '1' entries on this page)</i>			\$ 326,135.00
<b>3. Total Disbursements ALL Pages</b> <i>(sum all the '1' entries on all Disbursement pages)</i>			\$ 326,135.00