

Disclosure Report Cover

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.
Do not use this form to update information.

Amendment

☐ Yes ☒ No

1. Committee Information

a. Full Name

DEANNA KAPLAN 4 SCHOOL BOARD

c. ID Number

DCQ6LQ

b. Mailing Address (include City, State and Zip Code)

1514 CLOVERDALE AVENUE
WINSTON-SALEM, NC 27104

d. Date Filed

10-24-2018

e. Phone Number

336-577-9980

2. Report Year

2018

3. Period Start Date (mm/dd/yy)

7-1-18

4. Period End Date (mm/dd/yy)

10-20-18

5. Treasurer Full Name

ERNEST V. LOGEMANN

6. Type of Committee (Check One)

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

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

- | Municipal | State/County | Referendum |
|--|---|---|
| ☐ Organizational | ☐ Organizational | ☐ Organizational |
| ☐ Thirty-five day | ☐ Quarterly | ☐ Pre-referendum |
| ☐ Pre-primary | ☐ First | ☐ Final |
| ☐ Pre-election | ☐ Second | ☐ Supplemental Final |
| ☐ Pre-runoff | ☒ Third | ☐ Annual |
| ☐ Semi-annual | ☐ Fourth | ☐ Special |
| ☐ Mid Year | ☐ Semi-annual | |
| ☐ Year End | ☐ Mid Year | |
| ☐ Final | ☐ Year End | |
| ☐ Special | ☐ Final | |
| | ☐ Special | |

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

- ☐ Booster Fund
☐ Building Fund
☐ Other:

8. Number of Fundraisers this Report

- 0 -

10. Special Report Name

11. Account Information

a. Financial Institution Full Name

BB&T

b. Purpose

CAMPAIGN
RECEIPTS +
DISBURSEMENTS

c. Account Code

5478

d. Period Begin Balance

\$ 1,520.65

11. Account Information

a. Financial Institution Full Name

b. Purpose

c. Account Code

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.

ERNEST V. LOGEMANN

Printed Name of Signer

Ernest V. Logemann

Signature of Appointed Treasurer

10/24/2018

Date

FOR OFFICE USE ONLY

Date Received:

10/24/18

Employee:

Y

Date Postmarked:

Employee:

Date Scanned:

Employee:

Date Data Entered:

Employee:

Delivery Method

- ☐ Normal Mail
☐ Registered Mail
☒ Hand Delivered
☐ Electronically Filed

☐ Signer has not received mandatory training

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Detailed Summary

Amendment

☐ 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
DEANNA KAPLAN 4 SCHOOL BOARD		CAMPAIGN	OCQ6LQ
Start of Election Cycle: January 1, <u>2018</u>		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ <u>1520.65</u>	\$ <u>-0-</u>
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)		\$	\$
6) Contributions from Individuals (CRO-1210)		\$ <u>1700.00</u>	\$ <u>24,299.00</u>
7) Contributions from Political Party Committees (CRO-1220)		\$ <u>50.00</u>	\$ <u>150.00</u>
8) Contributions from Other Political Committees (CRO-1230)		\$ <u>500.00</u>	\$ <u>500.00</u>
9) Loan Proceeds (CRO-1410)		\$	\$ <u>6233.30</u>
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)		\$ <u>2250.00</u>	\$ <u>31,182.30</u>
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$ <u>831.80</u>	\$ <u>26,932.31</u>
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$	\$
13c) Coordinated Party Expenditures (CRO-1310)		\$	\$ <u>1311.14</u>
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)		\$ <u>831.80</u>	\$ <u>28,243.45</u>
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ <u>2,938.85</u>	\$ <u>2,938.85</u>
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 1 of 2

Amendment

☐ Yes ☒ No

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	
DEANNA KAPLAN 4 SCHOOL BOARD					OCQ6LQ	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
ERIC & VIVIAN FRAZIER 1405 LYNTHURST DRIVE HIGH POINT, NC 27262				RETIREED		
				c. Employer's Name/Specific Field		e. Election Sum to Date
						\$ 1,000.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐					\$	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
ALDONA TOWNER 113 GLOUSMAN ROAD WINSTON-SALEM, NC 27104				HOMEMAKER		
				c. Employer's Name/Specific Field		e. Election Sum to Date
						\$ 100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐					\$	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
EDWARD PLEASANTS 1084 W. 4TH STREET WINSTON-SALEM, NC 27101				RETIREED		
				c. Employer's Name/Specific Field		e. Election Sum to Date
						\$ 250.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐					\$	
☐					\$	
☐					\$	
4. Total only this Page					\$ 1350.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 1700.00	

Contributions from Individuals

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Amendment

☐ Yes ☒ No

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	
DEANNA KAPLAN 4 SCHOOL BOARD				DCB6LQ	
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments
JOE + CHRISTINE KISSICK 2848 BARTRAM ROAD WINSTON-SALEM, NC 27106			Retired		
			c. Employer's Name/Specific Field		
					e. Election Sum to Date
					\$ 250.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐					\$
☐					\$
☐					\$
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments
TIMOTHY CHARLES KEPLER P.O. BOX 24 WELCOME, NC 27374			LANDSCAPER		
			c. Employer's Name/Specific Field		
			MALLARD CREEK LANDSCAPING		
					e. Election Sum to Date
					\$ 100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐					\$
☐					\$
☐					\$
3. Contributor Information ☐ Add ☐ 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
☐					\$
☐					\$
☐					\$
4. Total only this Page					\$ 350.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 1,700.00

Contributions from Political Party Committees

Use this form to report contributions from a political party

Amendment
☐ Yes
☒ No

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1. Committee, Full Name (and Fund if applicable)		DEANNA KAPLAN 4 SCHOOL BOARD	
2. ID Number		DC 2662	

3. Contributor Information			
a. Full Name, Mailing Address & Phone (include city, state, & zip) DEMOCRATIC WOMEN OF FORSYTH COUNTY 1516 PLEASANT STREET WINSTON-SALEM, NC 27107			
b. Comments			
c. Election Sum to Date			
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)
h. Amount			

3. Contributor Information			
a. Full Name, Mailing Address & Phone (include city, state, & zip)			
b. Comments			
c. Election Sum to Date			
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)
h. Amount			

3. Contributor Information			
a. Full Name, Mailing Address & Phone (include city, state, & zip)			
b. Comments			
c. Election Sum to Date			
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)
h. Amount			

4. Total only this Page		\$ 50.00	
5. Total of ALL CRO-1220 Pages (This line must be on line 7 of Detailed Summary Page CRO-1100)		\$ 50.00	

Contributions from Other Political Committees Pg 1 of 1

Amendment

☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
DEANNA KAPLAN 4 SCHOOL BOARD				OCQ6LQ	
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Type of Committee		d. Comments
PIEDMONT STONE CENTER POLITICAL ACTION COMMITTEE P.O. BOX 25866 WINSTON-SALEM, NC 27114-5866			☐ Candidate ☒ PAC		
			☐ Referendum		
			c. Level Registered (Specify)		
			☐ Federal ☒ County:		e. Election Sum to Date
			☐ State ☐ Municipality:		\$ 500.00
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
				\$	
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Type of Committee		d. Comments
			☐ Candidate ☐ PAC		
			☐ Referendum		
			c. Level Registered (Specify)		
			☐ Federal ☐ County:		e. Election Sum to Date
			☐ State ☐ Municipality:		\$
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
				\$	
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Type of Committee		d. Comments
			☐ Candidate ☐ PAC		
			☐ Referendum		
			c. Level Registered (Specify)		
			☐ Federal ☐ County:		e. Election Sum to Date
			☐ State ☐ Municipality:		\$
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
				\$	
4. Total only this Page				\$ 500.00	
5. Total of ALL CRO-1230 Pages (This line must be on line 8 of Detailed Summary Page CRO-1100)				\$ 500.00	

Disbursements

Pg 1 of 1

Amendment
☐ Yes ☒ No

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	
DEANNA KAPLAN 4 SCHOOL BOARD						DCQ64Q	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)							
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures							
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
CONNECT MARKETING 5484 SPINDLETOP COURT WINSTON-SALEM, NC 27106							
				c. Level Registered (Specify)			
				☐ Federal ☒ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 568.50	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
5478	CHECK	0	8/16/18	\$ 568.50	WEBSITE		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
KEY LINE DESIGNS 6040 GREENHAVEN DRIVE WINSTON-SALEM, NC 27103							
				c. Level Registered (Specify)			
				☐ Federal ☒ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 245.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
5478	CHECK	0	8/16/18	\$ 245.00	Website Host/MAINT		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
BB+T WINSTON-SALEM, NC							
				c. Level Registered (Specify)			
				☐ Federal ☒ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 18.30	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
5478	DEBIT	0	10/17/18	\$ 18.30	PAY PAL FEES		
				\$			
5. Total only this Page						\$ 831.80	
6. Total of ALL CRO-1310 Pages						\$ 831.80	
(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)							
7. Purpose Codes (List detailed expenditure code in (h.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k).							