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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.

1. Committee Information	ate miormation.				
a. Full Name			1		In TD N
TED KAPLAN FOR COUNTY COMMISSIONER. b. Mailing Address (include City, State and Zip Code)					c. ID Number
b. Mailing Address (include City,	JER	6CQ40Q			
1514 CLOVE		d. Date Filed			
What when a	1-30-18				
WINSTON- SA	LEM, NO	C 27104	•		e. Phone Number
2. Report Year 3. Period St	art Date (mm/dd	(mu) A Donied	E.J.D.	1	336-577-9980
					er Full Name
6. Type of Committee (Chec	- 2017	12	-31-2017	ERNEST	V.LOBEMANN
	Party	9. Type of Re Municipal	State/County	type of repo	rt from one category)
PAC D	Referendum	Organization	nal Organizat		Referendum
Independent Expenditure	loint Fundraiser	Thirty-five d	Barring C		<ul> <li>Organizational</li> <li>Pre-referendum</li> </ul>
Legal Expense Fund		Pre-primary	D First		Final
7 7		Pre-election	Seco	nd	Supplemental Final
	le, check one)	Pre-runoff	D Third		Annual
<ul> <li>Booster Fund</li> <li>Building Fund</li> </ul>		Semi-annual	E Fourt	h	Special
Building Fund		Mid Ye	ar Semi-annu	al	
Other:	1	Year En	hand wind	Year	10. Special Report Name
8. Number of Fundraisers th	Donort	Final	X Year	End	
-0 -	is Report	Special	Final	1	
11. Account Information	women a surgery and the	Providence of the second s	Special		
. Financial Institution Full Name			11. Account Inform	ation	and a static static static
BB+T			a. Financial Institution F	uli Name	0
. Purpose					
CAMPAIGN	c. Account Code		b. Purpose	c.	Account Code
the state of the state of the state	545	1			E 32
RECEIPTS +	d. Period Begin	Balance		d	Period Regis Palan
DISBURGEMENTS	\$ 663.5	0		4	Period Begin Balance
CERTIFICATION					
I certify that the Committee or Fu of the NC General Statutes and th	nd is in compliand	ce with all applie	cable provisions of Artic	10 224 220 B	12D 12M - COL - C
e enterni otalales and th	at no runus are co	mmingled with	prohibited or other nen	disalered C 1	s I further certify that the
report is complete, true and correct	ct and that I have I	been trained by t	the NC State Board of E	lections.	s. I further certify that this
		50 1	. C		1
ErNest V. LOG	SEMANN	most.	tamam		1-30-18
Printed Name of Sign OR OFFICE USE ONLY	ler	Signa	ature of Appointed Treasure	er	Date
A 1	1.1.0		10		
Date Received: 2	1118	Employe	e: P		y Method
Dete De te de la			0		rmal Mail
Date Postmarked:		Employe	e:		gistered Mail
Date Scanned:					nd Delivered
		Employe	e:		ectronically Filed
Date Data Entered:		Employee		mai	ner has not received ndatory training
Please Note: This form car	not be used to a	mend committ	ee information such a	s the committ	ee address treasurer
assistant	ueasurer, custoc	lian of books in	nformation, or account	t information	
You must amend the	he Statement of	Organization (	CRO-2100A-E) to ma	ke committee	e changes
0-1000		NC State Board	of Elections		August 2008
					142431 2000

Detailed Summary			Amendment	
Use this form to summarize all disclosure reporting forms	and to total me	onetary information		
1. Committee Full Name (and Fund if applicable)	f Report	3. ID Number		
TED KAPLAN FOR COUNTY COMMISSION	NER C	AMPAIEN	660400	
Start of Election Cycle: January 1, <u>201</u>		Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start		\$ 663.50	\$ - 0-	
RECEIPTS				
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$	
6) Contributions from Individuals	(CRO-1210)	\$	\$ 61,350.00	
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$ 4,500.00	
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$	
9) Loan Proceeds	(CRO-1410)	\$ 100.00	\$ 24,300.15	
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 Organization			\$	
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,11		,		
EXPENDITURES		• 100,00	\$ 90150.15	
13) Disbursements				
13a) Operating Expenditures	(CRO-1310)	\$ 60.00	\$ 89245.65	
13b) Contributions to Candidates/Political Committee	s (CRO-1310)	\$	\$	
13c) Coordinated Party Expenditures	· · ·	<u> </u>	\$	
14) Aggregated Non-Media Expenditures	- J-	<u> </u>	\$	
15) Loan Repayments	· -	<u> </u>	\$	
16) Refunds/Reimbursements from the Committee	ŕ –	\$	\$	
17) In-Kind Contributions	· · · - · · - · · - · · - · · - · · · - · · - · · · · · - ·	\$		
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1		\$ 60.00	\$ 201.0D \$ 89446.65	
19) Cash on Hand at End (Add lines 4 and 12 together, then su		\$ 703.50	\$ 703,50	
ADDITIONAL INFORMATION		* 103.30	<u> </u>	
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)	\$	Later and the second	
25) Administrative Support	(CRO-1710)	\$	\$	
26) Forgiven Loans	(CRO-1440)	\$	\$	
27) 48-Hour Notice Reports Sum	(CRO-2220)	β	\$	
8) Contributions to be Refunded	(CRO-1215) §	β	\$	

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## Disbursements

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				Amendment			
Pg	1	of	1	Yes			

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

1. Committee	e Full Name (and H	und if applicable	)	and the second		and the second second	2. ID Number
TED K	APLAN FOI	2 COUNTY	Con	iniesi	ANCA		6CQ40Q
3. Type of Dis	sbursement (Ple	ase use separate (	'RO-131	1 forms for	ONER .	( Distant	IOCA FOR
Operating E	Planting to	Contributions to Candi	dates/Poli	tical Committee	euch type of		
I. Payee Infor	rmation	Contraction of the second s	lates tom	Add	Remove	Coordin	ated Party Expenditures
a. Full Name, Mailing Address & Phone				a gradient and the second states and	ted Committee	Name	d. Comments
include city, stat					ted conditienter	Traine	d. Comments
RRAT	_						
15/51 1	TON- SALE	,		c. Level Reg	istered (Specif		1
WINSI	TON- SALE	MNC		Federal	X Co		
		/		L State	L Mu	nicipality:	e. Election Sum to Date
							\$
Account Code	g. Form of Payment	h. Purpose Code	i. Date (	mm/dd/yyyy)	j. Amount	IL B	Required Remarks
5451	DEBITS	0			1		
	Deros 1=		Mon	They	\$ 60.00	, 3	Ervie Charger
Deres F 4	1				\$		
Payee Inform				Add 🗖	Remove	Sat Billio	A THE STREAM OF
(include city, sta	ling Address & Phone			b. Coordinate	d Committee	Name	d. Comments
(include city, sta	ie, & zip)						
				. I 1.D	1.00 10		
				C. Level Regis	tered (Specify		
				State	Cour	-	
				L State	L Mun	icipality:	e. Election Sum to Date
							\$
Account Code	g. Form of Payment	h. Purpose Code	i. Date (n	m/dd/yyyy)	j. Amount	k. Re	equired Remarks
					\$		•
		1			**		
			and the second second	-	\$		
Payee Inform				Add 🔲 I	Remove		
	ng Address & Phone		1	o. Coordinated	Committee N	ame	d. Comments
include city, state	e, & zip)						
			H				
				Federal	ered (Specify)		
			li	State	Count	-	EL d' C i D
		ľ	State		apanty: e	. Election Sum to Date	
							\$
ccount Code	g. Form of Payment	h. Purpose Code i	. Date (mi	m/dd/yyyy) j.	Amount	k. Rec	uired Remarks
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		++					
		1					
			Concernant and	\$	No		
the second s				5			\$ 60.00
otal of ALL	CRO-1310 Pages						\$ 60.00
Fotal of ALL	CRO-1310 Pages ine 13a of Detailed Sum	umary Page CRO-1106	) if Operat	ing Expenses)			
<b>Cotal of ALL</b> his line goes in li his line goes in li	<b>CRO-1310 Pages</b> ine 13a of Detailed Sum ine 13h of Detailed Sum	mary Page CRO-1100	) if Contril	ing Expenses) b to Candidate:	x/Political Com		\$ 60.00 \$ 60.00
Fotal of ALL his line goes in li his line goes in li his line goes in li	<b>CRO-1310 Pages</b> ine 13a of Detailed Sum ine 13b of Detailed Sum ine 13c of Detailed Sum	nmary Page CRO-1100 mary Page CRO-1100	) if Contril if Coordi	ing Expenses) b to Candidate: nated Party Ex	x/Political Com		¢
'his line goes in li 'his line goes in li 'his line goes in li	<b>CRO-1310 Pages</b> ine 13a of Detailed Sum ine 13b of Detailed Sum ine 13c of Detailed Sum	nmary Page CRO-1100 mary Page CRO-1100	) if Contril if Coordi	ing Expenses) b to Candidate: nated Party Ex	x/Political Com		2
Fotal of ALL his line goes in li his line goes in li his line goes in li Purpose Coo - Media	CRO-1310 Pages ine 13a of Detailed Sum ine 13b of Detailed Sum ine 13c of Detailed Sum des (List detailed B* - Printin	amary Page CRO-1100 mary Page CRO-1100 expenditure code i ng	) if Contril if Coordi n (h.) ab	ing Expenses) b to Candidate: nated Party Ex	s/Political Com penditures)	(m)	\$ 60.CO
Fotal of ALL his line goes in li his line goes in li his line goes in li Purpose Coe - Media Salaries	CRO-1310 Pages ine 13a of Detailed Sum ine 13b of Detailed Sum ine 13c of Detailed Sum des (List detailed B* - Printin F* - Equipt	amary Page CRO-1100 mary Page CRO-1100 expenditure code i ng C nent G	if Contril if Coordi n (h.) ab C* - Fun G - Politi	ing Expenses) b to Candidates nated Party Ex ove) draising cal Party	s/Political Com penditures) D - Te H* - J	o Anothe	\$ 60.00 er Candidate
Fotal of ALL his line goes in li his line goes in li his line goes in li Purpose Coo - Media	CRO-1310 Pages ine 13a of Detailed Sum ine 13b of Detailed Sum ine 13c of Detailed Sum des (List detailed B* - Printin	amary Page CRO-1100 mary Page CRO-1100 expenditure code i ng C nent G	if Contril if Coordi n (h.) ab C* - Fun G - Politi	ing Expenses) b to Candidate: nated Party Ex ove) draising	s/Political Com penditures) D - Ta H* - 1	o Anothe Holding	\$ 60.00

CRO-1310

Loan Proceeds			Pg _/	of /	Amendment	₫ No
Use this form to report proceeds from a loan A loan proceeds statement must account a	and loan endorser	s informa	ation			
A loan proceeds statement must accompany I. Committee Full Name (and Fund if app	each loan that is fro	om an inc	<u>lividual</u>			
TEA IAPIAN EAD	A	<u> 160 - 194 - 195 - 19</u>		<u>84,9553</u>		
TED IAPLAN FOR COM	VTY COMM	<u>ussi</u>	INER		6CR40A	
3: Lender Information a. Full Name, Mailing Address & Phone	the second s		Remove		<u> Alexandra ann</u>	
(include city, state, & zip)		Job Tiut/			. Comments	
TED KAPLAN		CANE	>IDATE	.		
11695 Double SPRING, Lewisville, NC 2702	and to		's Name/Specific I	e. Field	Start Date (mm/dd/y	ууу)
La sinilla	road -	-	<u> </u>			
LEWISHIE, NC 2702	3			ſ.	End Date (mm/dd/yyy	/ <b>y)</b>
				_	OPEN	
	i. Account C	Code	j. Form of Paym	ent	k. Amount	
0.% N/A			CHECK		\$ 100.00	
Full Name of Lending Institution				m.	Loan Number	
NIA					_	
Endorsers/Makers (The people who guarante	e the loan.) 🖓 👾		S. A. States	1. A. A. A.		i de la
Full Name, Mailing Address & Phone (include city, state, & zip)	b. J	ob Title/P	rofession	c. Empl	oyer's Name/Specific	Field
	1					
	<b>d.</b> P	d. Percentage e. Al		e. Amou	nount	
			%	\$		
Full Name, Mailing Address & Phone	b. Jo	b. Job Title/Profession c. Em		c. Emplo	ployer's Name/Specific Field	
(include city, state, & zip)						
	d. Pe	d. Percentage e. A		e. Amour	nount	
			%	\$		
ull Name, Mailing Address & Phone include city, state, & zip)	b. Jo	b Title/Pro	ofession	c. Employ	yer's Name/Specific Fi	eld
	···					
	a. Per	centage	———	e. Amoun	t	
			%	\$		
ull Name, Mailing Address & Phone nclude city, state, & zip)	b. Job	Title/Pro	fession	c. Employ	er's Name/Specific Fie	ld
	d Dom	centage				
	u. rer	remage		e. Amount	· · · · · · · · · · · · · · · · · · ·	<u>.                                    </u>
Fotal of ALL CRO-1410 Pages			%	\$		

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