

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		2019 APR 30 PM 1:08
a. Full Name	b. Mailing Address (include City, State and Zip Code)	c. ID Number
Committee to Elect Leah Crowley	760 Oaklawn Ave Winston Salem, NC 27104	82-4720456
		d. Date Filed
		10/26/18
		e. Phone Number
		336-918-6043

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2018	7/1/18	10/20/18	Stephanie Fisher Kennedy

6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
☒ Candidate Campaign	☐ Party	Municipal	State/County	Referendum
☐ PAC	☐ Referendum	☐ Organizational	☐ Organizational	☐ Organizational
☐ Independent Expenditure	☐ Joint Fundraiser	☐ Thirty-five day	☐ Quarterly	☐ Pre-referendum
☐ Legal Expense Fund		☐ 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)		10. Special Report Name		
☐ Booster Fund				
☐ Building Fund				
☐ Other:				
8. Number of Fundraisers this Report				
0				

11. Account Information		11. Account Information	
a. Financial Institution Full Name	b. Purpose	a. Financial Institution Full Name	b. Purpose
First National Bank	Committee Funds		
c. Account Code	d. Period Begin Balance	c. Account Code	d. Period Begin Balance
1	\$ 2417.72		\$

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.

S. Fisher-Kennedy S. Kennedy 10/28/18 (3/29)
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: 4/30/19 Employee: [Signature] Delivery Method
☐ Normal Mail
☐ Registered Mail
☒ Hand Delivered
☐ Electronically Filed

Date Postmarked: _____ Employee: _____
 Date Scanned: _____ Employee: _____
 Date Data Entered: _____ Employee: _____

☐ 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
Committee to Elect Leah Crowley		Quarterly	82-4720456
Start of Election Cycle: January 1, 2018		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 2417.72	\$ 0
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 225.00	\$ 1950.00	
6) Contributions from Individuals (CRO-1210)	\$ 1675.00	\$ 14012.00	
7) Contributions from Political Party Committees (CRO-1220)	\$ 75.00	\$ 75.00	
8) Contributions from Other Political Committees (CRO-1230)	\$	\$	
9) Loan Proceeds (CRO-1410)	\$	\$	
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)	\$ 1975.00	\$ 16037.00	
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)	\$ 29.70	\$ 10656.43	
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)	\$ 29.70	\$ 11673.98	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 4363.02	\$ 4363.02	
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)	\$	\$ 1017.59	

Optional form used to report NC Contributions From Individuals of \$50 or less

Amendment

☒ Yes ☐ No[illegible]

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	
Committee to Elect Leah Crowley				82-4720456	
3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (Include city, state, & zip)			b. Job Title/Profession		d. Comments
Charles Hicks 2655 Forest Dr. Winston Salem, NC 27104			General Contractor		(8.30 Fees) Anedot
			c. Employer's Name/Specific Field		e. Election Sum to Date
			Icon Builders		\$ 400.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Credit Online		10/1/2018	\$ 200.00
☒	1	Credit		5/1/2018	\$ 200.00
☐					\$
3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (Include city, state, & zip)			b. Job Title/Profession		d. Comments
Robert Echols 1030 Wellington Rd Northwest Winston Salem, NC 27106			Science Nerd		(4.30 Fees) Anedot
			c. Employer's Name/Specific Field		e. Election Sum to Date
			Self employed		\$ 100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Credit Online		10/1/2018	\$ 100.00
☐					\$
☐					\$
3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (Include city, state, & zip)			b. Job Title/Profession		d. Comments
Dawn Nelson 1925 Buena Vista Road Winston Salem, NC 27104			Retired Pharmaceutical Sales		(3.30 fees) Anedot
			c. Employer's Name/Specific Field		e. Election Sum to Date
			Retired		\$ 75.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Credit Online		10/1/2018	\$ 75.00
☐					\$
☐					\$
4. Total only this Page					\$ 375.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 1675.00

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	
Committee to Elect Leah Crowley					82-4720456	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
Kelly Simpson 784 Oaklawn Ave Winston Salem, NC 27104				Therapist		4.30 fees Anedot
				c. Employer's Name/Specific Field		
				Trinity Center		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	
☐	1	creditonline		10/6/2018	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
Michael Gunter 76 Oaklawn Winston Salem, NC 27104				Attorney		
				c. Employer's Name/Specific Field		
				Self employed		e. Election Sum to Date
						\$ 450.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	1	check		10/17/2018	\$ 200.00	
☒	1	check		5/3/2018	\$ 250.00	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
Jean Sherrill 191 Highwood Lane Winston Salem, NC 27104				Homemaker		
				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	
☐	1	check		10/6/2018	\$ 250.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 550.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 1675.00	

Contributions from Individuals

Pg 3 of 4 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	
Committee to Elect Leah Crowley					82 4720456	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (Include city, state, & zip)				b. Job Title/Profession		d. Comments
Alex Turner 2316 Warwick Rd Winston Salem, NC 27104				CFA		
				c. Employer's Name/Specific Field		e. Election Sum to Date
				Pinnacle Financial Partners		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	1	check		10/6/2018	\$ 200.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (Include city, state, & zip)				b. Job Title/Profession		d. Comments
Martha Davis 930 Arbor Rd Winston Salem, NC 27104				Homemaker		
				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	
☐	1	check		10/1/2018	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (Include city, state, & zip)				b. Job Title/Profession		d. Comments
Elizabeth Pleasants 2501 Reynolds Dr Winston Salem, NC 27104				Retired		
				c. Employer's Name/Specific Field		e. Election Sum to Date
				Homemaker		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	1	check		10/3/2018	\$ 100.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 400.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 1675.00	

Amended

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	
Committee to Elect Leah Crowley				82-4720456	
3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments
Urgula Henninger 2461 Reynolds Dr Winston Salem, NC 27104			Attorney		
			c. Employer's Name/Specific Field		
			King and Spalding		
			e. Election Sum to Date		\$ 150.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	check		10/3/2018	\$ 150.00
☐					\$
☐					\$
3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments
Susan Peatross 2794 Acorn Court Winston Salem, NC 27106			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
☐	1	check		10/1/2018	\$ 100.00
☐					\$
☐					\$
3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments
Anne Butler 2670 Reynolds Dr Winston Salem, NC 27104			Retired 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
☐	1	check		10/1/2018	\$ 100.00
☐					\$
☐					\$
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)					\$ 1475.00

Contributions from Political Party Committees

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Amendment

☒ Yes ☐ No

Use this form to report contributions from a political party

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Committee to Elect Leah Crowley				82-4720456	
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
Forsyth County Republican Women PO Box 5841 Winston Salem, NC 27113					
				c. Election Sum to Date	
				\$ 75.00	
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount	
1	check		8/14/2018	\$ 75.00	
				\$	
				\$	
3. Contributor Information ☐ Add ☐ Remove					
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 ☐ Add ☐ Remove					
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				\$ 75 -	
5. Total of ALL CRO-1220 Pages (This line must be on line 7 of Detailed Summary Page CRO-1100)				\$ 75 -	

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	
Committee to Elect Leahi Crowley						82-4720456	
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	
Anedot (website) 1920 McKinney Ave, Dallas TX 75201							
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☐ Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Credit	0	10/20/2018	\$ 29.70	Transaction Charges		
4. Payee Information ☐ Add ☐ 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	
				☐ Federal ☐ County: ☐ State ☐ Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
				\$			
4. Payee Information ☐ Add ☐ 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	
				☐ Federal ☐ County: ☐ State ☐ Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
				\$			
4. Payee Information ☐ Add ☐ 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	
				☐ Federal ☐ County: ☐ State ☐ Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
				\$			
5. Total only this Page						\$ 29.70	
6. Total of ALL CRO-1310 Pages						\$ 29.70	
(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)							