-

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.

Do not use this form to update information.			
1. Committee Information		9 1-911 inne	<u>x 3, 58</u>
a. Full Name	Winder	- Calzon	c. ID Number
b. Mailing Address (include City, State and Zip Cod	e)	10000	d. Date Filed
3661 MARLOUR AL			02/26/2020
W-5, NC 22106	-	Amended	e. Phone Number
2. Report Year 3. Period Start Date (mm/d	d/yy) 4. Period H	Ind Date (mm/dd/yy) 5. Tre	asurer Full Name
2020 10/18/2020	12/3	1/2020 1)	SNESS DATEL Adams
6. Type of Committee (Check One)	9. Type of Rep	ort (check only one type of	
💹 Candidate Campaign 🔲 Party	Muzicipal	State/County	Referendum
PAC Referendum	Organizationa	l Organizational	Organizationa)
🔲 Independent Expenditure 🔲 Joint Fundraiser	Thirty-five da	y Quarterly	Pre-referendum
Legal Expense Fund	Pre-primary	First	E Final
	Pre-election	Second	Supplemental Final
7. Type of Fund (if applicable, check one)		Thurd	Annual
Booster Fund	Semi-annual	Fourth	Special
Building Fund	Mid Yea		
Building Long	Year End		10. Special Report Name
—		Year End	10. Opterar report runde
Other:	Final		
8. Number of Fundraisers this Report	Special	Final	
		Special	
11. Account Information		11. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Nat	me
a. Financial institution roll ivance			-
BBT Invist			
b. Purpose c. Account C	ode	b. Purpose	c. Account Code
Compaign			
C		4	d. Period Begin Balance
GMMITEE d. Period Be	gin Balance		u. refiou begin balance
\$ 70	4.78		\$
CERTIFICATION			
I certify that the Committee or Fund is in comp	liance with all app	licable provisions of Article 22	A, 22B & 22D-22M of Chapter 163
of the NC General Statutes and that no funds a	re commingled with	n prohibited or other non-disclo	osed funds. I further certify that this
report is complete, true and correct and that I h	ave been trained by	the NC State Board of Electic	ons.
	$\left(\right)$		
1) Jankel) Adamac	11-	Li Lolla	- 02/26/2020
Printed Name of Signer	Sic	gnature of Appointed Treasurer	Daie
FOR OFFICE USE ONLY			Dellama Mathe
Date Received: 314121	Emplo	vee: 10	Delivery Method
Date Accorreg.		-0	Normal Mail
Date Postmarked:	Emplo	VAP.	Registered Mail
Date Postmarked:			Hand Delivered
Data Saannodi	Emplo	Nee.	Electronically Filed
Date Scanned:	Empto	y	
Date Data Entered:	Emplo	yee:	Signer has not received mandatory training
Please Note: This form cannot be use	d to amend comr	nittee information such as th	e committee address, treasurer,
		is information, or account in	
assistant treasurer. (JUNIOGIZIE DE DOOK	a mounation, or account in	AVA () (MAXAVA)/
		- (CDO 2100A E) to make	committee changes
You must amend the Stateme	ent of Organizatio	on (CRO-2100A-E) to make ard of Elections	committee changes. August 2008

Detailed Summary Use this form to summarize all disclosure reporting forms and	Amendment Yes 🗖 No		
	2. Type of		3. ID Number
D.D. Adams for Winston Sola	Free	th Ote	·
Start of Election Cycle: January 1, <u>262</u>	0	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 704.78	\$9,428,20
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	S
6) Contributions from Individuals	(CRO-1210)	\$	\$9,48,90
7) Contributions from Political Party Committees	(CRO-1220)	\$	S
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$	\$
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$ 119.00	\$ 209.66
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CR0-1250)	\$	\$ 47.49
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$	S S
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,	lld and lle)	\$ 119.00	\$9,400,05
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 568.00	> \$16,126,64
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 100.00	\$ 1,800.00
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)	\$	\$ 251,83
17) In-Kind Contributions	(CRO-1510)	\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15		\$ 668,00	\$18,678,47
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	stract line 18)	\$ 155.78	\$ 155,78
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
	(CRO-1430)	\$	
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$	
	(CRO-1620)	\$	
24) Account Transfers Within the Committee	(CRO-1720)	\$	
25) Administrative Support	(CRO-1710)	\$	\$
26) Forgiven Loans	(CRO-1440)	\$	\$
	(CRU-2220)	\$	\$
28) Contributions to be Refunded	(CRO-1215)	\$	\$

.

Refunds/Reimbursements To the Committee

¢

.

 $P_g \xrightarrow{3} or \underbrace{d}$

n 5 Amendment Yes

Use this form to report refunds received by the committee or reimbursements for a previous expenditure.

1. Committee Full Na	ame (a	nd Fund if appl	icable)	A *		2. 1	D Number
D.D.Adam	15f	DR Wine	ton-Sal	En			
3. Contributor Information							
a. Full Name, Mailing Ad		Phone		d. Type of Comm		g. C	omments
(include city, state, & zi	íp)		· .	Candidate	PAC	1 A 🔨	soud A quest
BBT_				E. Level Register	Party		Account J
2815 Revo	141	Kd-		Federal	County:		riginal Expenditure Date
MSNCZ	-0,c (015	r.Kd 6			Municipality:	1	1/09/2020
						L OF	fginal Expenditure Amt
b. Job Title/Profession		a Emilanata Nam		6 V		\$	119,00
		c. Employer's Nam	especific Field	f. Purpose	hart	j. E li	ection Sum to Date
			<u> </u>	Arthue	baby 10 to mischrize	\$	119,00
k. Account Code L	Form of	f Payment	m. In-Kind Descri	ption	n. Date (mm/dd/yy	yy)	o. Amount
BBT	Ôæ	dit			11/10/202	Ø	\$119.00
3. Contributor Inform				Add 🔲 Re	move		4
a. Full Name, Mailing Add		Phone		d. Type of Comm		g. Co	mments
(include city, state, & zi	p)			Candidate	PAC		
				Referendum	Party		
				e. Level Registere	County:	<u>а.</u> О	riginal Expenditure Date
				State	Municipality:		
						i. Or	iginal Expenditure Amt
b. Job Title/Profession		c. Employer's Nam	e/Specific Field	f. Parpose		j. Ele	ction Sum to Date
k. Account Code 1.	Form of	Payment	m. In-Kind Descri	ption	n. Date (mm/dd/yyy	(77)	o. Amount
							\$
3. Contributor Inform	mation	1 <u>1</u> 1	· D	Add Rei	nove		
a. Full Name, Mailing Add	dress & i	Phone		d. Type of Commi	ittee	g. Co	mments
(include city, state, & zij	p)			Candidate	PAC Party		
				e. Level Registere		h. Or	iginal Expenditure Date
				Federal State	County: Municipality:		
						L Or	iginal Expenditure Amt
						\$	
b. Job Title/Profession		c. Employer's Nam	e/Specific Field	f. Purpose		j. Ele	ction Sum to Date
						\$	
k. Account Code L	Form of	Payment	m. In-Kind Descri	ption	n. Date (mm/dd/yyy	7y)	o. Amount
							\$
4. Total only this 1			, 4 .	· · ·		\$	119,00
5. Total of ALL C (This line must be on line				[.] .	r * -	\$	119,00

Disbursements

а Э

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

Pg

commuces and c	coordinated party ex	penanaros.			
1. Committee Fu	ull Name (and Fund	i if applicable)			2. ID Number
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)					
3. Type of Disbu					
Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures					
4. Payee Inform			Add	Remove	d. Comments
	ng Address & Phone		b. Coordinated Committee Na		d. Comments
(include city, state, d	-				Convassing to
Distin	Sellers				Convosesing to
QLOCK	afford Force	f.Rd.	c. Level Registered (Specify)		VET WI HIL
160 000	anor) are		Federal	County:	e, Election Sum to Date
U-SM	C27127			Municipality:	e. clection solit to bate
· - / ·	Controll				\$
		b. Purpose Code	1 D-4- (())	: A	k. Required Remarks
f. Account Code	g. Form of Payment	u. renpose Code	i. Date (mm/dd/yyyy)	j. Amount	K. Required Remarks
DDT	Check	0	10/19/2020	\$150.00	Canaccing
DOI	I DECH		10/18/2020	150.00	CAN-CO. !!
				\$	
4.D. 1.0	- 41			Remove	
4. Payee Inform			Add		d. Comments
	ng Address & Phone		D. COOPEINATES COMMITTEE INS		C C L
(include city, state, o			1		Convoseing to
Christian	phen Hac	het-	a Lauri Dinina a (Orinité A		Ef antithe
			c. Level Registered (Specify)		Note Affed hasin
ILA AI	CEST.		Federal	County:	c. Election Sum to Date
11511	C27105		State 🔀	Municipality	e. Election Sum to Date Croty
ina, nu	(allos				\$
					h. Deswined Demarks
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
DDT	CL		1-10 /2020	\$150,00	Canaceline
001	Check	0	10/13/2020	1.20,00	an in Basing
DOT	Check	0	11/20/2020	\$125.00	Cantacaloc
DBI	and the second se				Charles 1
4. Payee Inform			Add	Remove	d. Comments
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee Na	ame	d. comments
(include city, state,	& zip)		4		Comparge Dark
PPT		11	1 10 11 10 15		hat '
2015-D	eynolde f	公.	c. Level Registered (Specify)	Caustra	CU
2015 K		-	Federal	County:	e. Election Sum to Date
MS NIC	21106		State 🔀	Municipality:	C. EACTION SUIL IN DATE
vu / ici					\$ 98,50
		h Durnasa Cada		i Amou-t	k. Required Remarks
f. Account Code	g. Form of Payment	b. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	
BBT	Debit	Ø	11/05/2020	\$ 12.00	Maint, Fas
PAT	Debit	0	12/04/2020	\$12,00	Mount FEE
5. Total only th	is Page	L			\$ 2449
	CRO-1310 Pages				
(This line goes in	line 13a of Detailed Sun	nmary Page CRO-110	10 if Operating Expenses)		SILEM
(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) \$ (68.00)					" Apo.ce
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)					
7. Purpose Cod		penditure code in			
A*- Media B*- Printing C*- Fundraising D - To Another Candida					
E - Salaries F* - Equipment G - Political Party H* - Holding			g Public Office Expenses		
I - Postage	J - Penalties	K* - Offi	ice Expenses	Q* - Donatio	on to Legal Expense Fund
O* - Other		ion in required -	emarks field (k)		
i " Codes requir	e detailed explanat	ton in reduited t	varat no tretti (n/		

Amendment

Yes

 \Box

No

5

of

Disbursements

.

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

	ull Name (and Fund				2. ID Number	
T. Committee A	James for	Winster	-Salco			
3. Type of Disbi				one of Dishursem	ent)	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.) Image: Operating Expenses Image: Contributions to Candidates/Political Committees Image: Coordinated Party Expenditures						
4. Payee Inform			Add	Remove		
<u> </u>	ng Address & Phone		b. Coordinated Committee Na		d. Comments	
	-					
(include city, state, o	1				Acct mistekenly	
AMAZON	.com/all		c. Level Registered (Specify)		charged by	
LINTE	WA 9850	all	Federal	County:	Amazon	
The lea	NY FRE N	007 3	State 🕅	Municipality:	e. Election Sum to Date	
Seattle	, WA 9850	9-5250		······································		
•					\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
					BBT filed claim	
PRT	26hit	\bigcirc	11/09/2020	\$ 119.00	TO PECQUEN	
		· · · · ·	19 112-2-			
				\$		
4. Payee Inform	ation		Add 🗌	Remove		
	ng Address & Phone		b. Coordinated Committee Na	eme	d. Comments	
(include city, state,	-					
(include engistate)	(
			c. Level Registered (Specify)			
			Federal	County:		
			State	Municipality:	e. Election Sum to Date	
					۵.	
					\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				r		
				\$		
				\$		
				\$		
4. Payee Inform	ation		Add 🗌	Remove		
	ng Address & Phone		b. Coordinated Committee Na	eme	d. Comments	
(include city, state,	& zip)					
• •						
			c. Level Registered (Specify)			
			Federal	County:		
			State	Municipality:	c. Election Sum to Date	
					\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				s		
				\$		
5. Total only this Page 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) \$ (OBC)						
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 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						
A* - MediaB* - PrintingC* - FundraisingE - SalariesF* - EquipmentG - Political Party				D - 16 Anomer Candidate H* - Holding Public Office Expenses		
I - Postage	J - Penalties		ce Expenses		n to Legal Expense Fund	
O* - Other						
* Codes require detailed explanation in required remarks field (k)						

Amendment

of .

Yes

No

Disbursements

з

Pg

Amendment Yes

No

of 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 Fu	d if applicable)		0			2. ID Number
DO.L	Loands to	J Winste	$p - \epsilon$	Salem			
3. Type of Dis	A DESCRIPTION OF THE OWNER OWNER OF THE OWNER OWNER OF THE OWNER	<u>ase use separate (</u>	CRO-13	10 forms for ed	ach t	pe of Disbursem	ent.)
Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures							
4. Payee Infor	mation		Add			Remove	
a. Full Name, Mai	iling Address & Phone		b. Coc	rdinated Commit	tee Na	Ame	d. Comments
(include city, state	, & zip)	Seira Nom					C. 6 (. (. L
Commette	c blats		Carrontion 10				
TRA	10391		c. Lev	el Registered (Spe	cify)		held combaign
the bay	1051	(Federal County:			1 3 3	
KALEigh	ALC 2960	5		State		Municipality:	e. Election Sum to Date
							\$
C. A. Starting C. A.							
f. Account Code	g. Form of Payment	b. Purpose Code	i. D	ate (mm/dd/yyyy))	j. Amount	k. Required Remarks
DAT	Tract		10	59 600		Simo	
ces.	Levi		n	120/202	0	, 100.00	
						\$	
4. Payee Inform	mation		Add			Pamaua	
	ling Address & Phone		1	rdinated Commit	tee Na	Remove	d. Comments
(include city, state	-		0,000	onared Commit	ICC INE		
(include city, state	, dt ap)		1				
			c. Leve	Registered (Spe	cify)		
				Federal County:			
				State		Municipality:	e. Election Sum to Date
							\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. D	ate (mm/dd/yyyy)	1	j. Amount	k. Required Remarks
						\$	
						æ	
						\$	
4. Payee Inform	nation		Add			Remove	
a. Full Name, Mail	ing Address & Phone		b. Coo	rdinated Committ	lee Na	me	d. Comments
(include city, state,	& zip)						
			c. Leve	Registered (Spec	cify)		
				Federal [County:	
				State [Municipality:	e. Election Sum to Date
							\$
f. Account Code	g. Form of Payment	b. Purpose Code	i. D:	ate (mm/dd/yyyy)		j. Amount	k. Required Remarks
						\$	
						\$	
5 Total cale +h	is Paga						: 10000
5. Total only th							\$ 100,000
6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)							
5. Total only this Page \$ 00000 6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) \$ 6. Contrib to Candidates/Political Comm)							
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Condinated Party Expenditures)							
	es (List detailed ex		-				
A* - Media	B* - Printing	C* - Fund				D - To Anothe	r Candidate
E - Salaries	E - Salaries F* - Equipment G - Political Party H* - Holding					H* - Holding	Public Office Expenses
I - Postage J - Penalties K* - Office Expenses Q* - Donation to Legal Expense Fund							
0* - Other * Codes requir	e detailed explanati	on in required	marke	field (14)			
CRO-1310	e deranen exhianati			d of Elections			December 2009
CN0-1510		110.3	vare post	a or creedons			LACCENTOCI Z009