

# Disclosure Report Cover

Amendment

☐ Yes ☐ No

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

a. Full Name

c. ID Number

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

d. Date Filed

e. Phone Number

2. Report Year

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

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

5. Treasurer Full Name

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

10. Special Report Name

## 11. Account Information

a. Financial Institution Full Name

## 11. Account Information

a. Financial Institution Full Name

b. Purpose

c. Account Code

b. Purpose

c. Account Code

d. Period Begin Balance

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.

Lida Calvert Hayes

Printed Name of Signer

Lida Calvert Hayes July 1, 2022

Signature of Appointed Treasurer

Date

## FOR OFFICE USE ONLY

Date Received:

Employee:

Delivery Method

Date Postmarked:

Employee:

☐ Normal Mail

Date Scanned:

Employee:

☐ Registered Mail

Date Data Entered:

Employee:

☐ 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

Use this form to summarize all disclosure reporting forms and to total monetary information

Amendment

☐ Yes

☐ No

1. Committee Full Name (and Fund if applicable)		2. Type of Report	3. ID Number
Elect Lida Calvert Hayes School Board		2nd quarter	4EQQETJ
Start of Election Cycle: January 1, 2022		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$13,066.67	\$13,066.67
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals (CRO-1205)	\$	\$	
6) Contributions from Individuals (CRO-1210)	\$	\$	
7) Contributions from Political Party Committees (CRO-1220)	\$	\$	
8) Contributions from Other Political Committees (CRO-1230)	\$	\$	
9) Loan Proceeds (CRO-1410)	\$ 2,500.00	\$ 2,500.00	
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)	\$ 2,500.00	\$ 2,500.00	
<b>EXPENDITURES</b>			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)	\$ 15,067.30	\$ 15,067.30	
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)	\$ 499.37	\$ 499.37	
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)	\$ 15,566.67	\$ 15,566.67	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ -0-	\$ -0-	
<b>ADDITIONAL INFORMATION</b>			
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)	\$ 2,000.63	\$ 2,000.63	
27) 48-Hour Notice Reports Sum (CRO-2220)	\$	\$	
28) Contributions to be Refunded (CRO-1215)	\$	\$	

# Loan Proceeds

Use this form to report proceeds from a loan and loan endorser's information

A loan proceeds statement must accompany each loan that is from an individual

Pg 1 of 1

Amendment

☒ Yes

☐ No

## 1. Committee Full Name (and Fund if applicable)

Elect Lida Calvert Hayes School Board

## 2. ID Number

4E Q Q E J

## 3. Lender Information

☐ Add ☐ Remove

### a. Full Name, Mailing Address & Phone

(include city, state, & zip)

Lida Calvert Hayes  
1011 West Northwest Blvd  
Winston-Salem, NC  
27101

### b. Job Title/Profession

President

### d. Comments

### e. Start Date (mm/dd/yyyy)

5/26/22

### f. End Date (mm/dd/yyyy)

### g. Rate

~6%

### h. Security Pledged

None Needed

### i. Account Code

LCH 7777

### j. Form of Payment

check

### k. Amount

\$ 2,500.00

### l. Full Name of Lending Institution

Lida Calvert Hayes

### m. Loan Number

-0-

## 4. Endorsers/Makers (The people who guarantee the loan.)

### a. Full Name, Mailing Address & Phone

(include city, state, & zip)

~~XXXX~~

### b. Job Title/Profession

### c. Employer's Name/Specific Field

### d. Percentage

%

### e. Amount

\$

### a. Full Name, Mailing Address & Phone

(include city, state, & zip)

### b. Job Title/Profession

### c. Employer's Name/Specific Field

### d. Percentage

%

### e. Amount

\$

### a. Full Name, Mailing Address & Phone

(include city, state, & zip)

### b. Job Title/Profession

### c. Employer's Name/Specific Field

### d. Percentage

%

### e. Amount

\$

### a. Full Name, Mailing Address & Phone

(include city, state, & zip)

### b. Job Title/Profession

### c. Employer's Name/Specific Field

### d. Percentage

%

### e. Amount

\$

## 5. Total of ALL CRO-1410 Pages

(This line must be on line 9 of Detailed Summary Page CRO-1100)

\$ 2,500.00

CRO-1410

NC State Board of Elections

April 2007





# NORTH CAROLINA

## STATE BOARD OF ELECTIONS

### Loan Proceeds Statement

This Statement is used to report detailed information about a new loan and is required to accompany the Loan Proceeds Form in the report for which the loan is initially disclosed. If the loan is from an individual, the lender's signature is required on this form.

This Statement is to be filed with the Election Board where the committee's reports are filed.

- Name of committee to receive loan: Elect Lida Calvert Hayes
- Person or committee to make loan: Lida Calvert Hayes
- Date of loan to committee: 5/26/22
- Name of lending institution (source):  
Self
- Amount of loan: 2,500.00
- Description (if in-kind loan): \_\_\_\_\_
- Names of all parties responsible for payment of loan (guarantors):  
Lida Calvert Hayes
- Period of loan: \_\_\_\_\_
- Rate of interest of loan: - 0 -
- Security pledged for loan: \_\_\_\_\_

I, Lida Calvert Hayes, acknowledge that all of the information  
(Person lending money to committee)  
provided is complete, true, and accurate. I further understand I may not forgive a loan  
that has an outstanding balance to any source.

Lida Calvert Hayes  
Signature of Lender

5-26-22

Date Signed

Lida Calvert Hayes  
Signature of Treasurer of Committee

5-26-22

Date Signed

# Disbursements

Pg 1 of 3

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)

Elect Lida Calvert Hayes

## 2. ID Number

4EQQET

## 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)

Samar Billboard

b. Coordinated Committee Name

d. Comments

c. Level Registered (Specify)

☐ Federal

☐ County:

☐ State

☐ Municipality:

e. Election Sum to Date

\$ 4,700.00

f. Account Code

g. Form of Payment

h. Purpose Code

i. Date (mm/dd/yyyy)

j. Amount

k. Required Remarks

LC H777

check

A

5/19/2022

\$ 4700.00

billboard

## 4. Payee Information

☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone  
(include city, state, & zip)

Art Signs  
Wellcome, N.C.

b. Coordinated Committee Name

d. Comments

c. Level Registered (Specify)

☐ Federal

☐ County:

☐ State

☐ Municipality:

e. Election Sum to Date

\$ 400.00

f. Account Code

g. Form of Payment

h. Purpose Code

i. Date (mm/dd/yyyy)

j. Amount

k. Required Remarks

LC H777

check

A

may 19 2022

\$ 400.00

Signs

## 4. Payee Information

☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone  
(include city, state, & zip)

art breen  
N.C.

b. Coordinated Committee Name

d. Comments

c. Level Registered (Specify)

☐ Federal

☐ County:

☐ State

☐ Municipality:

e. Election Sum to Date

\$ 700.00

f. Account Code

g. Form of Payment

h. Purpose Code

i. Date (mm/dd/yyyy)

j. Amount

k. Required Remarks

LC 777

check

E

may 16 2022

\$ 700.00

Pole Worker

## 5. Total only this Page

\$ 5,800.00

## 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)

(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)

\$ 15,067.30

## 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)

CRO-1310

NC State Board of Elections

December 2009



# Disbursements

Pg 2 of 3

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) <u>Elect Lida Calvert Hayes</u>						2. ID Number <u>4EQPET</u>	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Pam Lofland</u>				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date <u>\$ 2565.00</u>	
f. Account Code <u>LCH777</u>	g. Form of Payment <u>check</u>	h. Purpose Code <u>E</u>	i. Date (mm/dd/yyyy) <u>5/19/22</u>	j. Amount <u>\$ 2,565.00</u>	k. Required Remarks <u>Pole Worker</u>		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Geneva Thompson</u>				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date <u>\$ 130.00</u>	
f. Account Code <u>LCH777</u>	g. Form of Payment <u>check</u>	h. Purpose Code <u>E</u>	i. Date (mm/dd/yyyy) <u>5/18</u>	j. Amount <u>\$ 130.00</u>	k. Required Remarks <u>pole worker</u>		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Salem One, N.C.</u>				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date <u>\$ 4,372.30</u>	
f. Account Code <u>LCH777</u>	g. Form of Payment <u>check</u>	h. Purpose Code <u>O</u>	i. Date (mm/dd/yyyy) <u>May 27, 2022</u>	j. Amount <u>\$ 4,372.30</u>	k. Required Remarks <u>IT-Advisor</u>		
5. Total only this Page						<u>\$ 11,067.30</u>	
6. Total of ALL CRO-1310 Pages						<u>\$ 15,067.30</u>	
(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)							

# Disbursements

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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) <b>Elect Lida Calvert Hayes</b>						2. ID Number <b>4E QQ&amp;T</b>	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>Maurice Attwood N.C.</b>				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date <b>\$1,000.00</b>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
<b>LCH 777</b>	<b>check</b>	<b>E</b>	<b>6/1/2022</b>	<b>\$1,000.00</b>	<b>Pole worker</b>		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>James Knox N.C.</b>				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date <b>\$12,000.00</b>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
<b>LCH 777</b>	<b>check</b>	<b>E</b>	<b>may 30, 2022</b>	<b>\$800.00</b>	<b>Pole Worker</b>		
<b>LCH 777</b>	<b>check</b>	<b>E</b>	<b>may 31, 2022</b>	<b>\$400.00</b>	<b>Pole Worker</b>		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date <b>\$</b>	
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						<b>\$2,200.00</b>	
6. Total of ALL CRO-1310 Pages						<b>\$15,067.30</b>	
(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)							



# Loan Repayments

Use this form to report payments on an existing loan.

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Amendment

☐ Yes

☐ No

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Elect Lida Calvert Hayes				4EQQET	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
Lida Calvert Hayes 1011 West Northwest Blvd Winston-Salem, NC 27109					
				c. Original Loan Date	
				5-26-22	
				d. Original Loan Amount	
				\$ 2,500.00	
e. Remaining Loan Balance	f. Account Code	g. Form of Payment	h. Date (mm/dd/yyyy)	i. Repayment Amount	
\$ 2,000.63	LEH7777	check	6/29/2022	\$ 499.37	
\$				\$	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
				c. Original Loan Date	
				d. Original Loan Amount	
				\$	
e. Remaining Loan Balance	f. Account Code	g. Form of Payment	h. Date (mm/dd/yyyy)	i. Repayment Amount	
\$				\$	
\$				\$	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
				c. Original Loan Date	
				d. Original Loan Amount	
				\$	
e. Remaining Loan Balance	f. Account Code	g. Form of Payment	h. Date (mm/dd/yyyy)	i. Repayment Amount	
\$				\$	
\$				\$	
4. Total only this Page				\$ 499.37	
5. Total of ALL CRO-1420 Pages (This line must be on line 15 of Detailed Summary Page CRO-1100)				\$ 499.37	



# Forgiven Loans

Pg 1 of 1

Amendment

☐ Yes

☐ No

Use this form to report any loan which has been forgiven by the lender.

A Forgiven loan statement (CRO-6200) must accompany each forgiven loan.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Elect Lida Calvert Hayes		4EQQES	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Comments	
Elect Lida Calvert Hayes 1011 North West Blvd Winston-Salem, NC 27101			
c. Original Loan Date (mm/dd/yyyy)		f. Election Sum to Date	
526.22		\$ 2500.00	
d. Original Loan Amount		g. Date (mm/dd/yyyy)	
\$ 2500.00		6/30/2022	
e. Remaining Loan Balance		h. Forgiven Amount	
\$ 2000.63		\$ 2000.63	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Comments	
c. Original Loan Date (mm/dd/yyyy)		f. Election Sum to Date	
		\$	
d. Original Loan Amount		g. Date (mm/dd/yyyy)	
\$			
e. Remaining Loan Balance		h. Forgiven Amount	
\$		\$	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Comments	
c. Original Loan Date (mm/dd/yyyy)		f. Election Sum to Date	
		\$	
d. Original Loan Amount		g. Date (mm/dd/yyyy)	
\$			
e. Remaining Loan Balance		h. Forgiven Amount	
\$		\$	
4. Total only this Page		\$ 2000.63	
5. Total of ALL CRO-1440 Pages (This line must be on line 26 of Detailed Summary Page CRO-1100)		\$ 2000.63	
The lender information should contain the same information as supplied on the original loan proceed statement.			