

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

KIMBERLY M STONE FOR SCHOOL BOARD

c. ID Number

2022 AUG 26 PM 2:24

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

1709 GRACE STREET
WINSTON-SALEM, NC 27103

d. Date Filed

05/10/2022

e. Phone Number

(336) 406-5066

2. Report Year

2022

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

03/01/2022

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

04/30/2022

5. Treasurer Full Name

TRACI L FERRIS

6. Type of Committee (Check One)

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

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

- ☐ "Booster Fund"
☐ Building Fund

☐ Other:

9. Type of Report

(check only one type of report from one category)

Municipal

- ☐ Organizational
☐ Thirty-five day
☐ Pre-primary
☐ Pre-election
☐ Pre-runoff
☐ Semi-annual
☐ Mid Year
☐ Year End
☐ Final
☐ Special

State/County

- ☐ Organizational
☐ Quarterly
☒ First
☐ Second
☐ Third
☐ Fourth
☐ Semi-annual
☐ Mid Year
☐ Year End
☐ Final
☐ Special

Referendum

- ☐ Organizational
☐ Pre-referendum
☐ Final
☐ Supplemental Final
☐ Annual
☐ Special

8. Number of Fundraisers this Report

0

10. Special Report Name

11. Account Information

a. Financial Institution Full Name

BANK OF AMERICA

b. Purpose

COMMITTEE FUNDS

c. Account Code

v4kms

d. Period Begin Balance

\$ 0.00

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.

Traci L Ferris

Printed Name of Signer

Signature of Appointed Treasurer

05/10/2022

Date

FOR OFFICE USE ONLY

Date Received:

Employee:

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

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) KIMBERLY M STONE FOR SCHOOL BOARD		2. Type of Report 2022 ORGANIZATIONAL		3. ID Number	
Start of Election Cycle: January 1, 2022		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 0		\$ 0	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$		\$	
6) Contributions from Individuals (CRO-1210)		\$ 1900.00		\$ 1900.00	
7) Contributions from Political Party Committees (CRO-1220)		\$		\$	
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)		\$ 1900.00		\$ 1900.00	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 891.57		\$ 891.57	
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)		\$ 891.57		\$ 891.57	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 1008.43		\$ 1008.43	
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 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	
KIMBERLY M STONE FOR SCHOOL BOARD							
3. Contributor Information ☒ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) EVAN BLACK 2401 EMERALD DRIVE JONESBORO, GA 30236 (770) 265-9935				b. Job Title/Profession		d. Comments	
				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	
☐	V4KMS	CREDITCARD		03/28/2022		\$ 100.00	
☐						\$	
☐						\$	
3. Contributor Information ☒ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) LAINE LEE 4291 KINGS TROOP ROAD STONE MOUNTAIN, GA 30083 (404) 625-1649				b. Job Title/Profession		d. Comments	
				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	
☐	V4KMS	CREDITCARD		03/24/2022		\$ 100.00	
☐						\$	
☐						\$	
3. Contributor Information ☒ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) KIMBERLY CHARLES 3434 SCARBOROUGH DRIVE WINSTON-SALEM, NC 27104 (336) 746-9605				b. Job Title/Profession		d. Comments	
				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	
☐	V4KMS	CREDITCARD		03/23/2022		\$ 100.00	
☐						\$	
☐						\$	
4. Total only this Page						\$ 300.00	
5. Total of ALL CRO-1210 Pages						\$ 1900.00	
(This line must be on line 6 of Detailed Summary Page CRO-1100)							

Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

Pg 2 of 4 Amendment ☐ Yes ☒ No

1. Committee Full Name (and Fund if applicable)

2. ID Number

KIMBERLY M STONE FOR SCHOOL BOARD

3. Contributor Information

☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone

(include city, state, & zip)

CHRISTINE JOYNER
2709 OLD TOWN CLUB ROAD
WINSTON SALEM, NC 27106
(336) 682-8678

b. Job Title/Profession

d. Comments

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

☐

V4KMS

CREDITCARD

03/23/2022

\$ 250.00

☐

\$

☐

\$

3. Contributor Information

☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone

(include city, state, & zip)

ANNE JORDAN
20 SHOPE CREEK ESTATES DRIVE
ASHEVILLE, NC 28805-9753
(828) 279-6837

b. Job Title/Profession

d. Comments

c. Employer's Name/Specific Field

e. Election Sum to Date

\$ 75.00

f. Prior

g. Account Code

h. Form of Payment

i. In-Kind Description

j. Date (mm/dd/yyyy)

k. Amount

☐

V4KMS

CREDITCARD

03/24/2022

\$ 75.00

☐

\$

☐

\$

3. Contributor Information

☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone

(include city, state, & zip)

TRACY MYERS
4200 NORTH PATTERSON AVENUE
WINSTON-SALEM, NC 27105
(336) 831-0646

b. Job Title/Profession

d. Comments

c. Employer's Name/Specific Field

e. Election Sum to Date

\$ 500.00

f. Prior

g. Account Code

h. Form of Payment

i. In-Kind Description

j. Date (mm/dd/yyyy)

k. Amount

☐

V4KMS

CREDITCARD

03/23/2022

\$ 500.00

☐

\$

☐

\$

4. Total only this Page

5. Total of ALL CRO-1210 Pages

(This line must be on line 6 of Detailed Summary Page CRO-1100)

\$ 825.00

\$ 1900.00

CRO-1210

NC State Board of Elections

April 2007

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	
KIMBERLY M STONE FOR SCHOOL BOARD							
3. Contributor Information ☒ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments		
SHERRY CREWS 2454 SLATE ROAD KING, NC 27021 (336) 413-2843			ACCOUNTING SERVICES				
			c. Employer's Name/Specific Field				
			CANNON & COMPANY, LLP				
					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	
☐	V4KMS	CHECK			03/16/2022	\$ 150.00	
☐						\$	
☐						\$	
3. Contributor Information ☒ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments		
DONNA CRISSMAN PO BOX 112 BOONEVILLE, NC 27011-0112 (336) 469-1950							
			c. Employer's Name/Specific Field				
					e. Election Sum to Date		
					\$ 200.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date (mm/dd/yyyy)	k. Amount	
☐	V4KMS	CHECK			03/22/2022	\$ 200.00	
☐						\$	
☐						\$	
3. Contributor Information ☒ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments		
LYN NUSE 2630 KINSLEY AVENUE NORTHWEST CONCORD, NC 28027 (704) 787-8926							
			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	
☐	V4KMS	CREDITCARD			04/21/2022	\$ 100.00	
☐						\$	
☐						\$	
4. Total only this Page						\$ 450.00	
5. Total of ALL CRO-1210 Pages						\$ 1900.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

Contributions from Individuals

Pg 4 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	
KIMBERLY M STONE FOR SCHOOL BOARD						
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) KATHRYN SPANOS 1728 BUENA VISTA ROAD WINSTON SALEM, NC 27104 (336) 997-5145			b. Job Title/Profession c. Employer's Name/Specific Field 		d. Comments e. Election Sum to Date \$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	V4KMS	CREDITCARD		04/20/2022	\$ 200.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) CHARLOTTE STONE 2428 SANDELL DRIVE DUNWOODY, GA 30338 (404) 932-4298			b. Job Title/Profession c. Employer's Name/Specific Field 		d. Comments e. Election Sum to Date \$ 25.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	V4KMS	CREDITCARD		04/16/2022	\$ 25.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) CINDY EDWARDS 1602 WOODTHORNE PLACE GREENSBORO, NC 27407 (336) 337-8099			b. Job Title/Profession OPERATIONS MANAGER c. Employer's Name/Specific Field CANNON WEALTH MANAGEMENT		d. Comments 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	
☐	V4KMS	CREDITCARD		04/04/2022	\$ 100.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 325.00	
5. Total of ALL CRO-1210 Pages					\$ 1900.00	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

Disbursements

Pg 1 of 2 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) KIMBERLY M STONE FOR SCHOOL BOARD					2. ID Number	
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) ANEDOT, INC 1340 POYDRAS STREET SUITE 1770 NEW ORLEANS, LA 70112 (225) 570-7777			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	
V4KMS	DRAFT	O	03/23/2022	\$38.20	ACCOUNT FEES	
V4KMS	DRAFT	O	03/24/2022	\$4.30	ACCOUNT FEES	
4. Payee Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) ANEDOT, INC 1340 POYDRAS STREET SUITE 1770 NEW ORLEANS, LA 70112 (255) 570-7777			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	
V4KMS	DRAFT	O	03/28/2022	\$4.30	ACCOUNT FEES	
V4KMS	DRAFT	O	04/04/2022	\$4.30	ACCOUNT FEES	
4. Payee Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) ANEDOT, INC 1340 POYDRAS STREET SUITE 1770 NEW ORLEANS, LA 70112 (225) 570-7777			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify)		e. Election Sum to Date	
			☐ Federal ☒ County: ☐ State ☐ Municipality:			
					\$ 65.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
V4KMS	DRAFT	O	04/16/2022	\$1.30	ACCOUNT FEES	
V4KMS	DRAFT	O	04/22/2022	\$12.60	ACCOUNT FEES	
5. Total only this Page					\$ 65.00	
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)					\$ 891.57	
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

Pg 2 of 2

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) KIMBERLY M STONE FOR SCHOOL BOARD					2. ID Number	
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) VISTAPRINT 275 WYMAN STREET WALTHAM, MA 02451 (866) 207-4955			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify) ☐ Federal ☒ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
					\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
V4KMS	DEBITCARD	B	04/06/2022	\$864.55	SIGN PRINTING	
V4KMS	REFUND	B	04/12/2022	\$-37.98	REFUND FOR PRINTING	
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) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
					\$	
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) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
					\$	
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					\$ 826.57	
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)					\$ 891.57	
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).						