

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 COMMITTEE TO ELECT LAURA BLACKWELL	c. ID Number
CABARRUS COUNTY BOARD OF ELECTIONS	
b. Mailing Address (include City, State and Zip Code) 231 CANVASBACK CT CONCORD, NC 28025	d. Date Filed 07/05/2018
JUL 13 2018 RECEIVED	
e. Phone Number	

2. Report Year 2018	3. Period Start Date (mm/dd/yy) 04/22/2018	4. Period End Date (mm/dd/yy) 06/30/2018	5. Treasurer Full Name BARBARA STRANG
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6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	Municipal	State/County	Referendum
<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> PAC	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Referendum	<input type="checkbox"/> Legal Expense Fund	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> NC Public Campaign Financing Fund		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
<input type="checkbox"/> Other:		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	
8. Number of Fundraisers this Report 0		10. Special Report Name		

3. Account Information		3. Account Information	
a. Financial Institution Full Name WELLS FARGO		a. Financial Institution Full Name	
b. Purpose CAMPAIGN	c. Account Code 18	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

Barbara Strang Printed Name of Signer
 Barbara Strang Signature of Appointed Treasurer
 07/10/2018 Date

FOR OFFICE USE ONLY

Date Received: 8/13/18 Employee: smg Delivery Method Normal Mail
 Date Postmarked: 7/11/18 Employee: smg Registered Mail
 Date Scanned: _____ Employee: _____ Hand Delivered
 Date Data Entered: _____ Employee: _____ 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

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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 LAURA BLACKWELL	2018 Second Quarter		
Start of Election Cycle: January 1, 2018		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 30.00	\$ 0.00
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 275.00	\$ 305.00
6) Contributions from Individuals (CRO-1210)		\$ 862.50	\$ 1,841.47
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00	\$ 0.00
8) Contributions from Other Political Committees (CRO-1230)		\$ 0.00	\$ 0.00
9) Loan Proceeds (CRO-1410)		\$ 0.00	\$ 0.00
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$ 0.00	\$ 0.00
11) Other Receipt Sources			
11a) Interest on Bank Accounts (CRO-1250)		\$ 0.00	\$ 0.00
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$ 0.00	\$ 0.00
11c) Outside Sources of Income (CRO-1250)		\$ 0.00	\$ 0.00
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$ 0.00	\$ 0.00
11e) Exempt Purchase Price Sales (CRO-1265)		\$ 0.00	\$ 0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		\$ 1,137.50	\$ 2,146.47
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$ 525.00	\$ 525.00
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$ 0.00	\$ 0.00
13c) Coordinated Party Expenditures (CRO-1310)		\$ 0.00	\$ 0.00
14) Aggregated Non-Media Expenditures (CRO-1315)		\$ 0.00	\$ 0.00
15) Loan Repayments (CRO-1420)		\$ 0.00	\$ 0.00
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$ 0.00	\$ 0.00
17) In-Kind Contributions (CRO-1510)		\$ 67.50	\$ 1,046.47
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 592.50	\$ 1,571.47
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 575.00	\$ 575.00
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 0.00	
22) Debts and Obligations owed by the Committee (CRO-1610)		\$ 0.00	
23) Debts and Obligations owed to the Committee (CRO-1620)		\$ 0.00	
24) Account Transfers Within the Committee (CRO-1720)		\$ 0.00	
25) Administrative Support (CRO-1710)		\$ 0.00	\$ 0.00
26) Forgiven Loans (CRO-1440)		\$ 0.00	\$ 0.00
27) 48-Hour Notice Reports Sum (CRO-2220)		\$ 0.00	\$ 0.00
28) Contributions to be Refunded (CRO-1215)		\$ 0.00	\$ 0.00

Aggregated Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
COMMITTEE TO ELECT LAURA BLACKWELL						
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add	18	Cash		06/05/2018	\$	50.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	18	Cash		06/06/2018	\$	50.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	18	Electric Funds Tran		05/23/2018	\$	50.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	18	Electric Funds Tran		05/25/2018	\$	50.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	18	Electric Funds Tran		05/23/2018	\$	25.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	18	Electric Funds Tran		06/04/2018	\$	50.00
<input type="checkbox"/> Remove						
4. Total only this Page					\$	\$275.00
5. Total of ALL CRO-1205 Pages					\$	\$275.00
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

Contributions from Individuals

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 LAURA BLACKWELL						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
LAURA BLACKWELL 413 SUMMERLAKE DR SW CONCORD, NC 28025				GUEST SERVICES		
				c. Employer's Name/Specific Field		e. Election Sum to Date
				AUTRIUM HEALTH		
						\$ 67.50
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	18	In-Kind	BUMPER STICKERS	06/25/2018	\$ 67.50	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
JOHN BOOTH 6495 MOREHEAD ROAD HARRISBURG, NC 28075						
				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	
<input type="checkbox"/>	18	Electric Funds Tran		06/05/2018	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
ANN CANNON PO BOX 1210 CONCORD, NC 28026				OWNER		
				c. Employer's Name/Specific Field		e. Election Sum to Date
				SPAY IT FORWARD & ANIMAL RESCUE		
						\$ 150.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	18	Check		06/04/2018	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page						\$ 317.50
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 862.50

Contributions from Individuals

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 LAURA BLACKWELL						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
WOODROW HATHAWAY 2635 NEWHAVEN ST NW CONCORD, NC 28027						
			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	
<input type="checkbox"/>	18	Check		06/25/2018	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
CHRIS MEASMER 19 PADDINGTON DR SW CONCORD, NC 28025			OWNER			
			c. Employer's Name/Specific Field			
			WAYSIDE RESRURANT		e. Election Sum to Date	
					\$ 120.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	18	Electric Funds Tran		06/25/2018	\$ 120.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
REZA NAZEMZADEH 2138 LOCKHART DR CHARLOTTE, NC 28203			ONCOLOGIST			
			c. Employer's Name/Specific Field			
			AUTRIUM HEALTH		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	
<input type="checkbox"/>	18	Electric Funds Tran		06/26/2018	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 320.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 862.50	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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 LAURA BLACKWELL							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
PAUL NEWTON 3500 Little Buffalo Creek Rd MOUNT PLEASANT, NC 28124				NC SENATOR			
				c. Employer's Name/Specific Field			
				STATE OF NORTH CAROLINA		e. Election Sum to Date	
						\$ 125.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	18	Electric Funds Tran		05/27/2018	\$ 125.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
DAVID TAYLOR 6611 BEALGRAY ROAD KANNAPOLIS, NC 28081				DEPUTY SHERIFF			
				c. Employer's Name/Specific Field			
				CABARRUS COUNTY		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		
<input type="checkbox"/>	18	Money Order		06/04/2018	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 225.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 862.50	

In-Kind Contributions

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Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.
 Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
COMMITTEE TO ELECT LAURA BLACKWELL			
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
LAURA BLACKWELL 413 SUMMERLAKE DR SW CONCORD, NC 28025		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$ 67.50	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
BUMPER STICKERS		06/25/2018	\$ 67.50
			\$
			\$
4. Total only this Page			\$ 67.50
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>			\$ 67.50

CRO-1510

NC State Board of Elections

December 2007