

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 RE-ELECT LYNN SHUE	c. ID Number
b. Mailing Address (include City, State and Zip Code) 4855 FLOWES STORE ROAD CONCORD, NC 28025	d. Date Filed 11/23/2018
	e. Phone Number (704) 783-5234

2. Report Year 2018	3. Period Start Date (mm/dd/yy) 07/01/2018	4. Period End Date (mm/dd/yy) 10/20/2018	5. Treasurer Full Name LYNN SHUE
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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	<input type="checkbox"/> Municipal	<input type="checkbox"/> State/County
<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> PAC	<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
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Pre-runoff	<input checked="" type="checkbox"/> Third
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth
<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
8. Number of Fundraisers this Report		<input type="checkbox"/> Final	<input type="checkbox"/> Year End
0		<input type="checkbox"/> Special	<input type="checkbox"/> Final
		<input type="checkbox"/> Special	<input type="checkbox"/> Special
10. Special Report Name			

3. Account Information		3. Account Information	
a. Financial Institution Full Name F&M BANK		a. Financial Institution Full Name	
b. Purpose ELECTION ACTIVITIES	c. Account Code 002	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 1,621.67		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

 Printed Name of Signer
 Signature of Appointed Treasurer
 11/23/2018 Date

FOR OFFICE USE ONLY

Date Received: _____ Employee: 
 Date Postmarked: NOV 27 2018 Employee: _____
 Date Scanned: 12/28/18 Employee: smg
 Date Data Entered: _____ Employee: _____

CABARRUS COUNTY BOARD OF ELECTIONS
RECEIVED

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

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 RE-ELECT LYNN SHUE		2018 3 RD QUARTER			
Start of Election Cycle: January 1, 2015		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 1621.67		\$	
RECEIPTS					
5) Aggregated Contributions from Individuals		(CRO-1205)	\$	\$ 125.00	
6) Contributions from Individuals		(CRO-1210)	\$ 2350.00	\$ 6723.43	
7) Contributions from Political Party Committees		(CRO-1220)	\$	\$	
8) Contributions from Other Political Committees		(CRO-1230)	\$ 404.97	\$ 8441.65	
9) Loan Proceeds		(CRO-1410)	\$	\$ 100.00	
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)	\$	\$	
11 e) Exempt Purchase Price Sales		(CRO-1265)	\$	\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)			\$ 2754.97	\$ 15390.08	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures		(CRO-1310)	\$ 880.69	\$ 3514.36	
13b) Contributions to Candidates/Political Committees		(CRO-1310)	\$ 3036.65	\$ 3036.65	
13c) Coordinated Party Expenditures		(CRO-1310)	\$	\$	
14) Aggregated Non-Media Expenditures		(CRO-1315)	\$	\$ 116.23	
15) Loan Repayments		(CRO-1420)	\$	\$ 100.00	
16) Refunds/Reimbursements From the Committee		(CRO-1320)	\$	\$ 63.43	
17) In-Kind Contributions		(CRO-1510)	\$ 404.97	\$ 8505.08	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)			\$ 4322.31	\$ 15335.75	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)			\$ 54.33	\$ 54.33	
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

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 RE-ELECT LYNN SHUE						
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	
TOMMY EARNHARDT 2138 LENTZ HARNESS SHOP RO., NORTH MT. PLEASANT, NC 28124			PHYSICIANS ASSISTANT			
			c. Employer's Name/Specific Field			
			FAMILY MEDICINE		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	
<input type="checkbox"/>	002	Check		09/13/2018	\$ 500.00	
<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	
FREDRICK HILBISH 4430 ROGER'S LAKE ROAD KANNAPOLIS, NC 28081			OWNER			
			c. Employer's Name/Specific Field			
			HILLBISH FORD		e. Election Sum to Date	
					\$ 300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	002	Check		09/11/2018	\$ 300.00	
<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	
SAMUEL LEDER 805 MCGREGOR DRIVE, NE CONCORD, NC 28025			COUNCIL MEMBER			
			c. Employer's Name/Specific Field			
			CITY OF CONCORD		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"/>	002	Check		09/14/2018	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 900.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 2,350.00	

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 RE-ELECT LYNN SHUE						
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	
FRANK RANKIN III 3795 RANKIN ROAD CONCORD, NC 28027			OWNER			
			c. Employer's Name/Specific Field			
			CESI		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"/>	002	Check		09/13/2018	\$ 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	
KENNETH SWAYZE III 4300 DEACON COURT, SW CONCORD, NC 28025			OWNER			
			c. Employer's Name/Specific Field			
			KS SOLUTIONS		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	
<input type="checkbox"/>	002	Check		09/14/2018	\$ 150.00	
<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	
TIMOTHY VAUGHN 2600 S. CANNON BLVD. KANNAPOLIS, NC 28081			GENERAL MANAGER			
			c. Employer's Name/Specific Field			
			HILLBISH FORD		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	
<input type="checkbox"/>	002	Check		09/11/2018	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 450.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 2,350.00	

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 RE-ELECT LYNN SHUE						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
n. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
KEITH WAYNE 6326 FOX CHASE DRIVE DAVIDSON, NC 28036			OWNER			
			c. Employer's Name/Specific Field			
			WAYNE BROTHERS		e. Election Sum to Date	
				\$ 1,000.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	002	Check		09/13/2018	\$ 1,000.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 1,000.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 2,350.00	

Contributions from Other Political Committees Pg 1 of 1

Amendment
 Yes No

Use this form to report contributions from other candidate, referendum or PAC committees

1. Committee Full Name (and Fund if applicable)			2. ID Number	
COMMITTEE TO RE-ELECT LYNN SHUE				
<input type="checkbox"/> Add <input type="checkbox"/> Remove				
3. Contributor Information		b. Type of Committee		d. Comments
a. Full Name, Mailing Address & Phone (include city, state, & zip)		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum		
DIANE HONEYCUTT FOR COUNTY COMMISSIONER 2635 DANBURY CT. NW CONCORD, NC 28027		c. Level Registered (Specify)		
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
		Cabarrus		e. Election Sum to Date
				\$ 8,441.65
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
002	In-Kind	SHARED NEWS PAPER AD - INDEPENDENT TRIB	10/11/2018	\$ 341.67
002	In-Kind	SHARED AD - INDEPENDENT TRIBUNE	10/15/2018	\$ 63.30
				\$
4. Total only this Page				\$ 404.97
5. Total of ALL CRO-1230 Pages (This line must be on line 8 of Detailed Summary Page CRO-1100)				\$ 404.97

Disbursements

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 RE-ELECT LYNN SHUE							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input type="checkbox"/> Operating Expenses		<input checked="" 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) DIANE HONEYCUTT FOR COUNTY COMMISSIONER 2635 DANBURY CT. NW CONCORD, NC 28027				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify)			
<input type="checkbox"/> Federal		<input checked="" type="checkbox"/> County:				e. Election Sum to Date	
<input type="checkbox"/> State		<input type="checkbox"/> Municipality:		Cabarrus			
						\$ 3,036.65	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
002	Check	AB	10/15/2018	\$ 3,036.65	FOR MEDIA, CAMPAIGN		
				\$	SIGNS, OTHER FORMS OF		
5. Total only this Page						\$ 3,036.65	
6. Total of ALL CRO-1310 Pages						\$ 3,036.65	
(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)							

In-Kind Contributions

Pg 1 of 1

Amendment
 Yes 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 RE-ELECT LYNN SHUE			
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	c. Comments
DIANE HONEYCUTT FOR COUNTY COMMISSIONER 2635 DANBURY CT. NW CONCORD, NC 28027		<input type="checkbox"/> Individual <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		d. Election Sum to Date	
		\$ 8,441.65	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
SHARED NEWS PAPER AD - INDEPENDENT TRIB		10/11/2018	\$ 341.67
SHARED AD - INDEPENDENT TRIBUNE		10/15/2018	\$ 63.30
			\$
4. Total only this Page		\$ 404.97	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 404.97	