


**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

<b>1. Committee Information</b>			
<b>a. Full Name</b>		<b>c. ID Number</b>	
Committee to Elect Holly Grimsley		CAB-WI4L3J-C-001	
<b>b. Mailing Address (include City, State and Zip Code)</b>		<b>d. Date Filed</b>	
680 Miramar Street NE Concord, NC 28025		01/08/2019	
		<b>e. Phone Number</b>	
		704-577-4831	
<b>2. Report Year</b>	<b>3. Period Start Date (mm/dd/yy)</b>	<b>4. Period End Date (mm/dd/yy)</b>	<b>5. Treasurer Full Name</b>
2018	10/21/2018	12/31/2018	Cristi Lewis
<b>6. Type of Committee (Check One)</b>		<b>9. Type of Report (check only one type of report from one category)</b>	
Candidate Campaign	Party	<b>Municipal</b>	<b>State/County</b>
PAC	Referendum	Organizational	Organizational
Independent Expenditure	Joint Fundraiser	Thirty-five day	Quarterly
Legal Expense Fund			
<b>7. Type of Fund (if applicable, check one)</b>			
"Booster Fund"		Pre-primary	First
Building Fund		Pre-election	Second
		Pre-runoff	Third
		Semi-annual	Fourth
		Mid Year	Semi-annual
Other:		Year End	Mid Year
		Final	Year End
		Special	Final
			Special
<b>8. Number of Fundraisers this Report</b>		<b>10. Special Report Name</b>	
0			
<b>11. Account Information</b>		<b>11. Account Information</b>	
<b>a. Financial Institution Full Name</b>		<b>a. Financial Institution Full Name</b>	
Uwharrie Bank			
<b>b. Purpose</b>	<b>c. Account Code</b>	<b>b. Purpose</b>	<b>c. Account Code</b>
Candidate Campaign	1		
	<b>d. Period Begin Balance</b>		<b>d. Period Begin Balance</b>
	\$ 385.41		\$
<b>CERTIFICATION</b>			
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.			
Cristi Lewis		01/08/2019	
Printed Name of Signer	Signature of Appointed Treasurer	Date	
<b>FOR OFFICE USE ONLY</b>			
Date Received:	Employee:	<b>Delivery Method</b>	
1/9/19 smg		Normal Mail	
Date Postmarked:	Employee:	Registered Mail	
		<input checked="" type="checkbox"/> Hand Delivered	
Date Scanned:	Employee:	<input checked="" type="checkbox"/> Electronically Filed	
1/9/19 smg		Signer has not received mandatory training	
Date Data Entered:	Employee:		
<b>Please Note:</b> 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.			

CABARRUS COUNTY  
 BOARD OF ELECTIONS  
 JAN 9 2018  
 RECEIVED

# 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 Holly Grimsley		CAB-WI4L3J-C-001	
<b>Start of Election Cycle:</b>	<b>January 1, 2018</b>	<b>Total this Reporting Period</b>	<b>Total this Election Cycle</b>
<b>4) Cash on Hand at Start</b>		\$ 385.41	\$ 0
<b>RECEIPTS</b>			
<b>5) Aggregated Contributions from Individuals</b>	<i>(CRO-1205)</i>	\$	\$
<b>6) Contributions from Individuals</b>	<i>(CRO-1210)</i>	\$ 100.00	\$ 2,000.00
<b>7) Contributions from Political Party Committees</b>	<i>(CRO-1220)</i>	\$	\$
<b>8) Contributions from Other Political Committees</b>	<i>(CRO-1230)</i>	\$	\$
<b>9) Loan Proceeds</b>	<i>(CRO-1410)</i>	\$	\$ 973.70
<b>10) Refunds/Reimbursements To the Committee</b>	<i>(CRO-1240)</i>	\$	\$
<b>11) Other Receipt Sources</b>			
<b>11a) Interest on Bank Accounts</b>	<i>(CRO-1250)</i>	\$	\$
<b>11b) Contributions from Not-for-Profit Organizations</b>	<i>(CRO-1250)</i>	\$	\$
<b>11c) Outside Sources of Income</b>	<i>(CRO-1250)</i>	\$	\$
<b>11d) Legal Expense Fund – Other Sources</b>	<i>(CRO-1270)</i>	\$	\$
<b>11 e) Exempt Purchase Price Sales</b>	<i>(CRO-1265)</i>	\$	\$
<b>12) TOTAL RECEIPTS</b> <i>(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)</i>		\$	\$
<b>EXPENDITURES</b>			
<b>13) Disbursements</b>			
<b>13a) Operating Expenditures</b>	<i>(CRO-1310)</i>	\$ 206.53	\$ 2,694.82
<b>13b) Contributions to Candidates/Political Committees</b>	<i>(CRO-1310)</i>	\$	\$
<b>13c) Coordinated Party Expenditures</b>	<i>(CRO-1310)</i>	\$ 100.00	\$ 100.00
<b>14) Aggregated Non-Media Expenditures</b>	<i>(CRO-1315)</i>	\$	\$
<b>15) Loan Repayments</b>	<i>(CRO-1420)</i>	\$	\$
<b>16) Refunds/Reimbursements From the Committee</b>	<i>(CRO-1320)</i>	\$	\$
<b>17) In-Kind Contributions</b>	<i>(CRO-1510)</i>	\$	\$
<b>18) TOTAL EXPENDITURES</b> <i>(Add lines 13a, 13b, 13c, 14, 15, 16 and 17)</i>		\$	\$
<b>19) Cash on Hand at End</b> <i>(Add lines 4 and 12 together, then subtract line 18)</i>		\$ 178.88	\$ 178.88
<b>ADDITIONAL INFORMATION</b>			
<b>20) Non-Monetary Gifts Given to Other Committees</b>	<i>(CRO-1330)</i>	\$	
<b>21) Outstanding Loans (incl. ones from other campaigns)</b>	<i>(CRO-1430)</i>	\$ 973.70	
<b>22) Debts and Obligations owed By the Committee</b>	<i>(CRO-1610)</i>	\$	
<b>23) Debts and Obligations owed To the Committee</b>	<i>(CRO-1620)</i>	\$	
<b>24) Account Transfers Within the Committee</b>	<i>(CRO-1720)</i>	\$	
<b>25) Administrative Support</b>	<i>(CRO-1710)</i>	\$	\$
<b>26) Forgiven Loans</b>	<i>(CRO-1440)</i>	\$	\$
<b>27) 48-Hour Notice Reports Sum</b>	<i>(CRO-2220)</i>	\$	\$
<b>28) Contributions to be Refunded</b>	<i>(CRO-1215)</i>	\$	\$

**Contributions from Individuals**

Amendment	
Yes	No

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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
Committee to Elect Holly Grimsley					CAB-WI4L3J-C-001	
<b>3. Contributor Information</b>						
<b>a. Full Name, Mailing Address &amp; Phone</b> (Include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Jennifer Hurlocker 6617 Mt Olive Rd Concord, NC 28026			Retired			
			<b>c. Employer's Name/Specific Field</b>			
					<b>e. Election Sum to Date</b>	
					\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
	1	Check		11/05/2018	\$ 100.00	
					\$	
					\$	
<b>3. Contributor Information</b>						
<b>a. Full Name, Mailing Address &amp; Phone</b> (Include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
			<b>c. Employer's Name/Specific Field</b>			
					<b>e. Election Sum to Date</b>	
					\$	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
					\$	
					\$	
					\$	
<b>3. Contributor Information</b>						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
			<b>c. Employer's Name/Specific Field</b>			
					<b>e. Election Sum to Date</b>	
					\$	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
					\$	
					\$	
					\$	
<b>4. Total only this Page</b>					\$ 100.00	
<b>5. Total of ALL CRO-1210 Pages</b>					\$ 100.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

**Disbursements**

Yes No

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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
Committee to Elect Holly Grimsley					CAB-WI4L3J-C-001	
<b>3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)</b>						
Operating Expenses		Contributions to Candidates/Political Committees		Coordinated Party Expenditures		
<b>4. Payee Information</b>						
<b>a. Full Name, Mailing Address &amp; Phone</b> (Include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
KS Image Solutions 680 Miramar St Concord, NC 28025			<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b> \$ 206.53	
			Federal County:			
			State Municipality:			
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>	
1	Check	B	10/10/2018	\$206.53	Campaign Signs	
				\$		
				\$		
				\$		
<b>4. Payee Information</b>						
<b>a. Full Name, Mailing Address &amp; Phone</b> (Include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
			<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b> \$	
			Federal County:			
			State Municipality:			
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>	
				\$		
				\$		
				\$		
<b>4. Payee Information</b>						
<b>a. Full Name, Mailing Address &amp; Phone</b> (Include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
			<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b> \$	
			Federal County:			
			State Municipality:			
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>	
				\$		
				\$		
				\$		
<b>5. Total only this Page</b>					\$ 206.53	
<b>6. Total of ALL CRO-1310 Pages</b>					\$ 306.53	
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>						
<i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>						
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>						
<b>7. Purpose Codes (List detailed expenditure code in (h.) above)</b>						
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						
<b>* Codes require detailed explanation in required remarks field (k)</b>						

# Disbursements

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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>
Committee to Elect Holly Grimsley					CAB-WI4L3J-C-001
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input checked="" type="checkbox"/> Coordinated Party Expenditures	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i>		<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
Cabarrus GOP P O Box 5892 Concord, NC 28025					
		<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				\$ 100.00	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>
1	Check	O	10/1/2018	\$100.00	Sponsored Table GOP event
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i>		<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
		<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				\$	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>
				\$	
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i>		<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
		<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				\$	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>
				\$	
				\$	
<b>5. Total only this Page</b>					\$ 100.00
<b>6. Total of ALL CRO-1310 Pages</b>					\$ 306.53
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>					
<i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>					
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					
<b>7. Purpose Codes</b> <i>(List detailed expenditure code in (h.) above)</i>					
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					
<b>* Codes require detailed explanation in required remarks field (k)</b>					

# Outstanding Loans

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

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

<b>1. Committee Full Name (and Fund if applicable)</b>			<b>2. ID Number</b>		
Committee to Elect Holly Grimsley			CAB-WI4L3J-C-001		
<b>3. Lender Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Holly Grimsley 680 Miramar St. NE Concord, NC 28025		Contractor			
		<b>c. Employer's Name/Specific Field</b>		<b>e. Start Date (mm/dd/yyyy)</b>	
		Holton Construction		09/21/2018	
				<b>f. End Date (mm/dd/yyyy)</b>	
				01/31/2019	
<b>g. Rate</b>	<b>h. Security Pledged</b>	<b>i. Original Loan Amount</b>		<b>j. Remaining Loan Balance</b>	
0 %	None	\$ 973.70		\$ 973.70	
<b>k. Full Name of Lending Institution</b>				<b>l. Loan Number</b>	
<b>3. Lender Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b>		<b>e. Start Date (mm/dd/yyyy)</b>	
				<b>f. End Date (mm/dd/yyyy)</b>	
<b>g. Rate</b>	<b>h. Security Pledged</b>	<b>i. Original Loan Amount</b>		<b>j. Remaining Loan Balance</b>	
%		\$		\$	
<b>k. Full Name of Lending Institution</b>				<b>l. Loan Number</b>	
<b>3. Lender Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b>		<b>e. Start Date (mm/dd/yyyy)</b>	
				<b>f. End Date (mm/dd/yyyy)</b>	
<b>g. Rate</b>	<b>h. Security Pledged</b>	<b>i. Original Loan Amount</b>		<b>j. Remaining Loan Balance</b>	
%		\$		\$	
<b>k. Full Name of Lending Institution</b>				<b>l. Loan Number</b>	
<b>4. Total only this Page</b>				\$ 973.70	
<b>5. Total of ALL CRO-1430 Pages</b> <i>(This line must be on line 21 of Detailed Summary Page CRO-1100)</i>				\$ 973.70	