

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

CABARRUS COUNTY
 BOARD OF ELECTIONS
 JAN 30 2020

RECEIVED

1. Committee Information	
a. Full Name Committee to Elect Benita Lowder Conrad	c. ID Number PDM014
b. Mailing Address (include City, State and Zip Code) 5503 Peachgrove Court Harrisburg, NC 28075	d. Date Filed 1/31/2020
	e. Phone Number 704-773-6943

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2019	1/1/16	12/31/19	Benita Lowder Conrad

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"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	Quarterly	<input type="checkbox"/> Pre-referendum
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> Other:		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	10. Special Report Name
		<input checked="" 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				

11. Account Information		11. Account Information	
a. Financial Institution Full Name Pinnacle Bank		a. Financial Institution Full Name	
b. Purpose Campaign	<input type="checkbox"/> Account Code A	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 0		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.

Benita Lowder Conrad Benita L. Conrad 1/31/2020
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: <u>1/30/20</u>	Employee: <u>smg</u>	Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training
Date Postmarked: _____	Employee: _____	
Date Scanned: _____	Employee: _____	
Date Data Entered: _____	Employee: _____	

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 Elect Benita Conrad		CLOSING		PDM014	
Start of Election Cycle: January 1,		2016		Total this Reporting Period	
4) Cash on Hand at Start		\$ 2590		\$ 0	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 0		\$ 140.00	
6) Contributions from Individuals (CRO-1210)		\$ 1507.79		\$ 3957.79	
7) Contributions from Political Party Committees (CRO-1220)		\$ 0		\$ 0	
8) Contributions from Other Political Committees (CRO-1230)		\$ 0		\$ 0	
9) Loan Proceeds (CRO-1410)		\$ 0		\$ 30	
10) Refunds/Reimbursements To the Committee (CRO-1240)		\$ 0		\$ 0	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$ 0		\$ 0	
11b) Contributions from Not-for-Profit Organizations (CRO-1250)		\$ 0		\$ 0	
11c) Outside Sources of Income (CRO-1250)		\$ 0		\$ 0	
11d) Legal Expense Fund – Other Sources (CRO-1270)		\$ 0		\$ 0	
11e) Exempt Purchase Price Sales (CRO-1265)		\$ 0		\$ 0	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 1507.79		\$ 4127.79	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 3977.79		\$ 4007.79	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$ 0		\$ 0	
13c) Coordinated Party Expenditures (CRO-1310)		\$ 0		\$ 0	
14) Aggregated Non-Media Expenditures (CRO-1315)		\$ 0		\$ 0	
15) Loan Repayments (CRO-1420)		\$ 0		\$ 0	
16) Refunds/Reimbursements From the Committee (CRO-1320)		\$ 0		\$ 0	
17) In-Kind Contributions (CRO-1510)		\$ 120		\$ 120	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 4097.79		\$ 4127.79	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 0		\$ 0	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 1094.58			
22) Debts and Obligations owed By the Committee (CRO-1610)		\$ 0			
23) Debts and Obligations owed To the Committee (CRO-1620)		\$ 0			
24) Account Transfers Within the Committee (CRO-1720)		\$ 0			
25) Administrative Support (CRO-1710)		\$ 0		\$ 0	
26) Forgiven Loans (CRO-1440)		\$ 0		\$ 0	
27) 48-Hour Notice Reports Sum (CRO-2220)		\$ 0		\$ 0	
28) Contributions to be Refunded (CRO-1215)		\$ 0		\$ 0	

In-Kind Contributions

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 Benita Conrad		PDM014
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip) Kristel Swayze 4300 Deacon Court Concord, NC 28027 704-786-7763	b. Type of Contributor <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 \$ 120
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Design work for mailer	10/31/19	\$ 120
		\$
		\$
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 <input 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 \$
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
		\$
		\$
		\$
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 <input 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 \$
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
		\$
		\$
		\$
4. Total only this Page		\$ 120
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		\$ 120

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 Benita Conrad						PDM014	
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	
Darlene Deese 412 Parallel Drive Harrisburg, NC 28075				Office Administrator			
				c. Employer's Name/Specific Field			
				Charlotte Real Estate Services Commercial Real Estate			
				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"/>	A	check		10/21/19		\$ 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	
Margaret Ann Stallings 3550 Stalling Road Harrisburg, NC 28075				Retired Farmer/School Teacher			
				c. Employer's Name/Specific Field			
				Self-employed Cabarrus County Schools			
				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"/>	A	check		10/22/19		\$ 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	
Victor A. Conrad 5503 Peachgrove Court Harrisburg, NC 28075				Retired Dispatch Supervisor		Spouse	
				c. Employer's Name/Specific Field			
				UPS			
				e. Election Sum to Date			
				\$			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	A	check		12/30/19		\$ 387.79	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 1387.79	
5. Total of ALL CRO-1210 Pages						\$ 1507.79	
<i>(This line must be on line 6 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 Benita Conrad						PDM014	
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	
Kristel Swayze Deacon Court Concord, NC 28027				Owner			
				Advertisng & Promotion			
				c. Employer's Name/Specific Field KS Image Solutions			
						e. Election Sum to Date	
						\$ 120	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	A	in-kind	design work	10/31/19		\$ 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	
				c. Employer's Name/Specific Field			
						e. Election Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>						\$	
<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	
				c. Employer's Name/Specific Field			
						e. Election Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 120	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 1507.79	

Disbursements

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 Elect Benita Conrad					PMD014
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) KS Image Solutions 4464 Raceway Drive, Suite B Concord, NC 28027		b. Coordinated Committee Name		d. Comments	
		n/a			
		c. Level Registered (Specify)		e. Election Sum to Date	
<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:				\$ 3977.79	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
A	check	B	12/23/19	\$1008.54	200 yard signs w/stakes
A	check	A	11/19/19	\$2969.25	mailers to 3,000 homes
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)		e. Election Sum to Date	
<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:				\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				\$	
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)		e. Election Sum to Date	
<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:				\$	
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					\$ 00
6. Total of ALL CRO-1310 Pages					\$ 3977.79
• (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 E - Salaries I - Postage O* - Other		B* - Printing F* - Equipment J - Penalties		C* - Fundraising G - Political Party K* - Office Expenses	
				D - To Another Candidate H* - Holding Public Office Expenses Q* - Donation to Legal Expense Fund	
* Codes require detailed explanation in required remarks field (k)					

Forgiven Loans

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	
Committee to Elect Benita Conrad		PDM014	
3. Lender Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Comments	
Victor A. Conrad 5503 Peachgrove Court Harrisburg, NC 28075			
		c. Original Loan Date (mm/dd/yyyy)	f. Election Sum to Date
		7/17/15	\$ 1094.58
		d. Original Loan Amount	g. Date (mm/dd/yyyy)
		\$ 1064.58	7/11/19
		e. Remaining Loan Balance	h. Forgiven Amount
\$ 1094.58	\$ 1094.58		
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		\$ 1094.58	
5. Total of ALL CRO-1440 Pages <i>(This line must be on line 26 of Detailed Summary Page CRO-1100)</i>		\$ 1094.58	
The lender information should contain the same information as supplied under the original loan proceed.			

Outstanding Loans

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

1. Committee Full Name (and Fund if applicable)			2. ID Number
Committee to Elect Benita Conrad			
3. Lender 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
Victor Alvin Conrad 5503 Peachgrove Court Harrisburg, NC 28075		Retired Dispatch Supervisor	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		UPS	7/17/15
f. End Date (mm/dd/yyyy)	open		
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
0 %	n/a n/a	\$ 1064.58	\$ 1064.58
k. Full Name of Lending Institution			l. Loan Number
3. Lender 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
Victor Alvin Conrad 5503 Peachgrove Court Harrisburg, NC 28075		Retired Dispatch Supervisor	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		UPS	7/11/19
f. End Date (mm/dd/yyyy)	open		
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
0 %	n/a n/a	\$ 30.00	\$ 30.00
k. Full Name of Lending Institution			l. Loan Number
3. Lender 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
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
f. End Date (mm/dd/yyyy)			
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$	\$
k. Full Name of Lending Institution			l. Loan Number
4. Total only this Page			\$ 1094.58
5. Total of ALL CRO-1430 Pages <i>(This line must be on line 21 of Detailed Summary Page CRO-1100)</i>			\$ 1094.58



NORTH CAROLINA

STATE BOARD OF ELECTIONS

Forgiven Loan Statement

This form is used to report a loan that has been forgiven by the lender. The lender's signature is required on this form and it must accompany the next filed report.

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

Name of Lender: Victor A. Conrad
Committee receiving loan: Committee to Elect Benita Conrad
Date of loan: 7/11/19
Amount of original loan: \$ 1,094.58 # 30.00 blc 1/30/2020
*Amount of loan to be forgiven: \$ 1,094.58 # 30.00 blc 1/30/2020

I, Victor A. Conrad, do not wish to be reimbursed for the amount of the loan indicated above* and will consider the amount loaned a contribution to the committee.

I understand and confirm no other parties are responsible for payment of this loan. I may not forgive a loan for which there is an outstanding balance owed to any source.

Signature of Lender

Signature of Committee Treasurer



NORTH CAROLINA

STATE BOARD OF ELECTIONS

Forgiven Loan Statement

This form is used to report a loan that has been forgiven by the lender. The lender's signature is required on this form and it must accompany the next filed report.

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

Name of Lender: Victor A. Conrad

Committee receiving loan: Committee to Elect Benita Conrad

Date of loan: 7/11/19

Amount of original loan: \$1064.58

***Amount of loan to be forgiven:** ~~\$1094.58~~

*#1064.58
1/30/2020 hlc.*

I, Victor A. Conrad, do not wish to be reimbursed for the amount of the loan indicated above* and will consider the amount loaned a contribution to the committee.

I understand and confirm no other parties are responsible for payment of this loan. I may not forgive a loan for which there is an outstanding balance owed to any source.

Victor A. Conrad

Signature of Lender

Benita L. Conrad

Signature of Committee Treasurer