

# 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>	
a. Full Name COMMITTEE TO ELECT LAURA BLACKWELL	c. ID Number
b. Mailing Address (include City, State and Zip Code) 231 CANVASBACK CT CONCORD, NC 28025	d. Date Filed 10/24/2018
	e. Phone Number

<b>2. Report Year</b> 2018	<b>3. Period Start Date (mm/dd/yy)</b> 07/01/2018	<b>4. Period End Date (mm/dd/yy)</b> 10/20/2018	<b>5. Treasurer Full Name</b> BARBARA STRANG
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<b>6. Type of Committee (Check One)</b>		<b>9. Type of Report (check only one type of report from one category)</b>		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<b>Municipal</b>	<b>State/County</b>	<b>Referendum</b>
<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
<b>7. Type of Fund (if applicable, check one)</b>		<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 checked="" 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	
<b>8. Number of Fundraisers this Report</b> 1		<b>10. Special Report Name</b>		

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

*Laura Strang* Printed Name of Signer  
*Barbara Strang* Signature of Appointed Treasurer  
 10/25/2018 Date

CABARRIUS COUNTY BOARD OF ELECTIONS  
 NOV 2 2018  
 RECEIVED

**FOR OFFICE USE ONLY**

Date Received:	<u>11/2/18</u>	Employee:	<u>smg</u>	<b>Delivery Method</b> <input checked="" type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input checked="" type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training
Date Resubmitted:	_____	Employee:	_____	
Date Scanned:	<u>12/27/18</u>	Employee:	<u>smg</u>	
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

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. Type of Report</b>		<b>3. ID Number</b>	
COMMITTEE TO ELECT LAURA BLACKWELL		2018 Third Quarter			
<b>Start of Election Cycle: January 1, 2018</b>			<b>Total this Reporting Period</b>		<b>Total this Election Cycle</b>
4) Cash on Hand at Start			\$ 575.00		\$ 0.00
<b>RECEIPTS</b>					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 260.00		\$ 565.00	
6) Contributions from Individuals (CRO-1210)		\$ 2,515.06		\$ 4,356.53	
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)		\$ 2,775.06		\$ 4,921.53	
<b>EXPENDITURES</b>					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 2,659.85		\$ 3,184.85	
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)		\$ 300.00		\$ 1,346.47	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 2,959.85		\$ 4,531.32	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 390.21		\$ 390.21	
<b>ADDITIONAL INFORMATION</b>					
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)		\$ 500.00		\$ 500.00	

# Aggregated Contributions from Individuals

Page 1 of 1

Amendment  
 Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
COMMITTEE TO ELECT LAURA BLACKWELL						
<b>3. Contributor Information</b>						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	18	Cash		08/18/2018	\$	40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	18	Check		08/19/2018	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	18	Electric Funds Tran		07/20/2018	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	18	Check		08/19/2018	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	18	Electric Funds Tran		07/05/2018	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	18	Cash		08/18/2018	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	18	Cash		08/19/2018	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	18	Electric Funds Tran		07/17/2018	\$	25.00
<b>4. Total only this Page</b>					\$	\$260.00
<b>5. Total of ALL CRO-1205 Pages</b> <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$	\$260.00

# 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 LAURA BLACKWELL						
<b>3. Contributor 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>	
SCOTT AUMULLER 806 SHETLAND PL NW CONCORD, NC 28027			PHYSICIAN			
			<b>c. Employer's Name/Specific Field</b> AUTRIUM HEALTHCARE			
					<b>e. Election Sum to Date</b>	
					\$ 200.00	
<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>	
<input type="checkbox"/>	18	Check		08/27/2018	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor 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>	
LAURA FAGG DEMAY 5630 FETZER AVE NW CONCORD, NC 28027			SENIOR MASS TORT CLIENT DEVELOPMENT MANA			
			<b>c. Employer's Name/Specific Field</b> GARRETSON RESOLUTION GROUP			
					<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>	
<input type="checkbox"/>	18	Check		08/19/2018	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor 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>	
WILLIAM KING PO BOX 1643 CONCORD, NC 28026			PRESIDENT			
			<b>c. Employer's Name/Specific Field</b> KING FINANCIAL CORP			
					<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>	
<input type="checkbox"/>	18	Electric Funds Tran		07/24/2018	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 400.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 2,515.06	

# Contributions from Individuals

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 LAURA BLACKWELL						
<b>3. Contributor 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>	
CHRISTOPHER MEASMER 19 PADDINGTON DR SW CONCORD, NC 28025			OWNER			
			<b>c. Employer's Name/Specific Field</b> WAYSIDE RESTURANTS			
					<b>e. Election Sum to Date</b>	
					\$ 400.00	
<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>	
<input type="checkbox"/>	18	Check		08/18/2018	\$ 100.00	
<input type="checkbox"/>	18	In-Kind	FOOD FOR FUNDRAISER	08/18/2018	\$ 300.00	
<input type="checkbox"/>					\$	
<b>3. Contributor 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>	
HELEN WILBANKS 5333 ROCKMOOR DR STONE MOUNTAIN, GA 30088			RETIRED			
			<b>c. Employer's Name/Specific Field</b> RETIRED			
					<b>e. Election Sum to Date</b>	
					\$ 1,607.53	
<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>	
<input type="checkbox"/>	18	Credit Card		09/26/2018	\$ 1,107.53	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor 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>	
HELEN WILBANKS 5333 ROCKMOOR DR STONE MOUNTIAN, GA 30088			RETIRED			
			<b>c. Employer's Name/Specific Field</b> RETIRED			
					<b>e. Election Sum to Date</b>	
					\$ 607.53	
<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>	
<input type="checkbox"/>	18	Credit Card		08/15/2018	\$ 607.53	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 2,115.06	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 2,515.06	



**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 LAURA BLACKWELL							
<b>3. Type of Disbursement</b> <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							
<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>	
SIGN MASTERS 314-B DEPOT ST MONROE, NC 28112							
				<b>c. Level Registered (Specify)</b>			
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						<b>e. Election Sum to Date</b>	
						\$ 2,215.06	
<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>		
18	Debit Card	B	08/08/2018	\$ 1,107.53	SIGNS		
18	Debit Card	B	09/29/2018	\$ 1,107.53	SIGNS		
<b>5. Total only this Page</b>						\$ 2,215.06	
<b>6. Total of ALL CRO-1310 Pages</b>							
<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>						\$ 2,659.85	
<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							
* Codes require detailed explanation in required remarks field (k)							

# 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.

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
COMMITTEE TO ELECT LAURA BLACKWELL			
<b>3. Contributor 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. Type of Contributor</b>	<b>c. Comments</b>	
CHRISTOPHER MEASMER 19 PADDINGTON 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		
		<b>d. Election Sum to Date</b>	
		\$	400.00
<b>e. Description</b>	<b>f. Date (mm/dd/yyyy)</b>	<b>g. Fair Market Amount</b>	
FOOD FOR FUNDRAISER	08/18/2018	\$	300.00
		\$	
		\$	
<b>4. Total only this Page</b>		\$	300.00
<b>5. Total of ALL CRO-1510 Pages</b> <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		\$	300.00



# Contributions to be Reimbursed

Pg 1 of 1

Amendment

Yes  No

Use this form to report Contributions under \$1,000 which will be refunded within 7 days.  
Refunds must be disclosed on the Refunds/Reimbursements Form (CRO-1320).

<b>1. Committee Full Name</b>		<b>2. ID Number</b>	
COMMITTEE TO ELECT LAURA BLACKWELL			
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>Full Name &amp; Mailing Address of the Payee (the original vendor)</b>		<b>Full Name &amp; Mailing Address of the Reimbursee (the person to whom the campaign check is written)</b>	
HELEN WILBANKS 5333 ROCKMOOR DR STONE MOUNTAIN, GA 30088		HELEN WILBANKS 5333 ROCKMOOR DR STONE MOUNTIAN, GA 30088	
<b>a. Contribution Description</b>	<b>b. Date (mm/dd/yyyy)</b>	<b>c. Credit Card Y/N</b>	<b>d. Amount</b>
SIGNS	08/15/2018	Y	\$ 500.00
<b>4. Total only this Page</b>			\$ 500.00
<b>5. Total of ALL CRO-1215a Pages</b> <i>(This line goes in line 28 of Detailed Summary Page CRO-1100)</i>			\$ 500.00