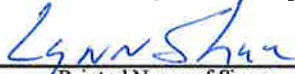



Disclosure Report Cover

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			c. ID Number	
COMMITTEE TO RE-ELECT LYNN SHUE				
b. Mailing Address (include City, State and Zip Code)			d. Date Filed	
4855 FLOWES STORE ROAD CONCORD, NC 28025			11/23/2018	
			e. Phone Number	
			(704) 783-5234	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name	
2018	04/22/2018	06/30/2018	LYNN SHUE	
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"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund		Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special		
		State/County <input type="checkbox"/> Organizational Quarterly <input type="checkbox"/> First <input checked="" type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special		
7. Type of Fund (if applicable, check one)		10. Special Report Name		
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:				
8. Number of Fundraisers this Report				
0				
3. Account Information		3. Account Information		
a. Financial Institution Full Name		a. Financial Institution Full Name		
F&M BANK				
b. Purpose	c. Account Code	b. Purpose	c. Account Code	
ELECTION ACTIVITIES	002			
	d. Period Begin Balance		d. Period Begin Balance	
	\$ 1,535.10		\$	
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:	CABARRUS COUNTY BOARD OF ELECTIONS	Employee:	Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed	
Date Postmarked:	NOV 27 2018	Employee:		
Date Scanned:	12/28/18 RECEIVED	Employee:	smg	
Date Data Entered:		Employee:	<input type="checkbox"/> Signer has not received mandatory training	
<p>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.</p> <p>You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.</p>				

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 2 ND QUARTER			
Start of Election Cycle: January 1, 2015		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 1535.10		\$	
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 50.00	\$	\$ 125.00	
6) Contributions from Individuals	(CRO-1210)	\$ 163.43	\$	\$ 4373.43	
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$	\$	
8) Contributions from Other Political Committees	(CRO-1230)	\$ 438.16	\$	\$ 8036.68	
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)		\$ 651.59	\$	\$ 12635.11	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$	\$	\$ 2633.67	
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	\$	\$	
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	\$	\$ 63.43	
17) In-Kind Contributions	(CRO-1510)	\$ 501.59	\$	\$ 8100.11	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 565.02	\$	\$ 11013.44	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 1621.67	\$	\$ 1621.67	
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)	\$	\$	\$	

Aggregated Contributions from Individuals

Page 1 of 1

Amendment	
<input checked="" type="checkbox"/> Yes	<input 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 RE-ELECT LYNN SHUE						
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	002	Check		05/07/2018	\$ 50.00	
<input type="checkbox"/> Remove						
4. Total only this Page					\$ 50.00	
5. Total of ALL CRO-1205 Pages					\$ 50.00	
<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 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	
MATTHEW LONG 8642 JOHN WHITE ROAD CONCORD, NC 28025-8228			VP CORPORATE SALES			
			c. Employer's Name/Specific Field			
			CHARLOTTE MOTOR SPEEDWAY			
					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		05/07/2018		\$ 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	
LYNN SHUE 4855 FLOWES STORE ROAD CONCORD, NC 28025			RETIRED			
			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"/>	002		SIGN MATERIALS	05/07/2018		\$ 63.43
<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					\$ 163.43	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 163.43	

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				
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee		d. Comments
DIANE HONEYCUTT FOR COUNTY COMMISSIONER 2635 DANBURY CT. NW CONCORD, NC 28027		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		
		<input type="checkbox"/> Referendum		
		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		\$ 8,036.68
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
002	In-Kind	ADVERTISING	05/07/2018	\$ 38.16
002	In-Kind	WALKER MARKETING	06/18/2018	\$ 400.00
				\$
4. Total only this Page				\$ 438.16
5. Total of ALL CRO-1230 Pages (This line must be on line 8 of Detailed Summary Page CRO-1100)				\$ 438.16

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) COMMITTEE TO RE-ELECT LYNN SHUE		2. ID Number
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip) LYNN SHUE 4855 FLOWES STORE ROAD CONCORD, NC 28025	b. Type of Contributor <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	c. Comments BUILDING MATERIALS FOR SIGNS d. Election Sum to Date \$ 63.43
e. Description BUILDING MATERIALS FOR SIGNS FROM LOWES	f. Date (mm/dd/yyyy) 05/07/2018	g. Fair Market Amount \$ 63.43
		\$
		\$
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		\$ 63.43
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		\$ 501.59

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 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	
		\$ 8,036.68	
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount	
ADVERTISING	05/07/2018	\$ 38.16	
WALKER MARKETING	06/18/2018	\$ 400.00	
		\$	
4. Total only this Page		\$ 438.16	
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		\$ 501.59	

Refunds/Reimbursements From the Committee

Use this form to report refunds/reimbursements, including contributions returned to the contributor.

1. Committee Full Name (and Fund if applicable)			2. ID Number	
COMMITTEE TO RE-ELECT LYNN SHUE				
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date
LYNN SHUE 4855 FLOWES STORE ROAD CONCORD, NC 28025		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		05/07/2018
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		e. Level Registered (Specify)		i. Original Receipt Amount
<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County:		\$ 63.43		
<input type="checkbox"/> State <input type="checkbox"/> Municipality:				
f. Purpose Code		j. Election Sum to Date		
O		\$ 63.43		
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code
RETIRED				002
l. Form of Payment	m. Required Remarks		n. Date (mm/dd/yyyy)	o. Amount
CHECK	MATERIALS FOR BUILDING SIGNS FROM LOWES		05/07/2018	\$ 63.43
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date
		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		e. Level Registered (Specify)		i. Original Receipt Amount
<input type="checkbox"/> Federal <input type="checkbox"/> County:		\$		
<input type="checkbox"/> State <input type="checkbox"/> Municipality:				
f. Purpose Code		j. Election Sum to Date		
		\$		
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code
l. Form of Payment	m. Required Remarks		n. Date (mm/dd/yyyy)	o. Amount
				\$
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date
		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		e. Level Registered (Specify)		i. Original Receipt Amount
<input type="checkbox"/> Federal <input type="checkbox"/> County:		\$		
<input type="checkbox"/> State <input type="checkbox"/> Municipality:				
f. Purpose Code		j. Election Sum to Date		
		\$		
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code
l. Form of Payment	m. Required Remarks		n. Date (mm/dd/yyyy)	o. Amount
				\$
4. Total only this Page				
				\$ 63.43
5. Total of ALL CRO-1320 Pages (This line must be on line 16 of Detailed Summary Page CRO-1100)				
				\$ 63.43
L - Returned to Contributor M - Overpayment for Service N - Exceeded Contribution Limit P* - Reimbursement of In-Kind O* Other				
* Codes require detailed explanation in required remarks field (m)				