Disclosure Re	Amendment Yes No						
Use this form for ge	neral report and committee	information, must	be signed and su	bmitted along with	↑ Yes		
Bo not use tills form	to update information			3			
1. Committee Infor	mation						
a. Full Name					c. ID Number		
Vote LeFevers			EGEIW	EM	8DUC54		
	lude City, State and Zip Code)	13			d. Date Filed		
615 N Main Ave		1111	UCT 3 0 2017	7	10/20/2017		
Newton, NC 28658					10/30/2017		
	By_		c. Phone Number				
			The state of the s		828-234-5927		
2. Report Year	eport Year 3. Period Start Date (mm/dd/yy) 4. Perio (mm/dd/yy)			5. Treasurer Fu	II Name		
2017	09/27/2017	10/23/2017 Robin Drui			1		
6. Type of Committ	ee (Check One)	9. Type of Repo	rt (check or	ly one type of range	rt from one category)		
Candidate Campa		Municipal	State/C		Referendum		
PAC	Referendum	Organizatio		Organizational	Organizational		
Independent Expenditure	Joint Fundraiser	Thirty-five	day	Quarterly	Pre-referendum		
Legal Expense Fu	ind						
7. Type of Fund	(if applicable, check one)	Pre-primary		First	Final		
"Booster Fund"		Pre-election		Second	Supplemental Final		
Building Fund		Pre-runoff	🗆	Third	Annual		
		Semi-annua		Fourth	Special		
Other:		Mid Year E		Semi-annual	10.0		
		Final	na	Mid Year	10. Special Report Name		
8. Number of Funda	aisers this Report	Special	lH.	Year End Final			
				Special			
11. Account Inform	ation		11. Account 1				
a. Financial Institution F				itution Full Name			
Wells Fargo				Tun i vaine			
b. Purpose	c. Account Code		b. Purpose		c. Account Code		
Campaign	DE	L					
	d. Period Begin Balance				d. Period Begin Balance		
	\$ 374.12				\$		
CERTIFICATION							
the NC General Statu	correct and that I have been	mmingled with pro	hibited or other r	ion-disclosed funds	, & 22D-22M of Chapter 163 of . I further certify that this report 10/30/2017		
EOD OFFICE TO	Printed Name of Signer		Signature of Appoint	ed Treasurer	Date		
FOR OFFICE USE OF	NLY				P		
Date Received:		Employee			Delivery Method Normal Mail		
Date Postmarked		Employee:	Registered Mail Hand Delivered				
Date Scanned:		Employee:	-		Electronically Filed Signer has not received		
Date Data Entered: Employee:					mandatory training		
Please Note: This	form cannot be used to ame	end committee info	rmation such as t	the committee addre	ess, treasurer, assistant treasurer,		
	custodiai	n of books informa	tion, or account i	ntormation			

Amendment

Detailed Summary

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 Vote LeFevers 2017 Pre-Election 8DUC54 Report Total this Start of Election Cycle: Total this January 1, 2017 Reporting Period **Election Cycle** Cash on Hand at Start 374.12 \$ RECEIPTS Aggregated Contributions from Individuals (CRO-1205) \$ 0 \$ 50.00 Contributions from Individuals (CRO-1210) \$ 250.00 \$ 1,505.00 **Contributions from Political Party Committees** \$ (CRO-1220) \$ 8) Contributions from Other Political Committees (CRO-1230) \$ \$ 9) Loan Proceeds (CRO-1410) \$ \$ 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) 250.00 \$ 1,555.00 **EXPENDITURES** 13) Disbursements 13a) Operating Expenditures (CRO-1310) \$ 563.00 \$ 1,438.88 13b) Contributions to Candidates/Political Committees (CRO-1310) \$ \$ 13c) Coordinated Party Expenditures (CRO-1310) \$ \$ 14) Aggregated Non-Media Expenditures (CRO-1315) \$ \$ 15) Loan Repayments (CRO-1420) \$ \$ Refunds/Reimbursements From the Committee 16) (CRO-1320) \$ \$ 17) **In-Kind Contributions** (CRO-1510) \$ 0 \$ 55.00 TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) 18) 563.00 \$ 1,493.88 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) 61.12 \$ 61.12 ADDITIONAL INFORMATION 20) Non-Monetary Gifts Given to Other Committees (CRO-1330) \$ 21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430) \$ Debts and Obligations owed By the Committee 22) (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) \$ 48-Hour Notice Reports Sum \$ (CRO-2220) \$ Contributions to be Refunded \$ \$

(CRO-1215)

Amendment

M

No

		m Individuals	aa. 05	P		of <u>1</u>	Yes	
Use this form to report individual contributions over \$50 or contributions under \$50 if form CR 1. Committee Full Name (and Fund if applicable)						2. ID Number		
Vote Le	Fevers	***************************************					8DUC54	
3. Contr	ributor Informati	on		Add Re	emove			
a. Full Na	me, Mailing Address	& Phone		b. Job Title/Profession	d. Comme	ents		
(include city, state, & zip)			Technical Illustra	Candidate				
David L								
	Iain Ave			c. Employer's Name/S	Specific Field			
Newton, NC 28658			Doosan Bobcat					
				Mfg. Portable Pov	e. Election	Sum to Date		
					\$ 1,255.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/	уууу)	k. Amount	
	DEL	Transfer			10/13/	2017	\$	250.00
							\$	
							\$	
3. Contr	ributor Informati	on		Add Re	emove			
a. Full Na	me, Mailing Address	& Phone		b. Job Title/Profession	n	d. Comme	nts	
(include	city, state, & zip)	000000000000000000000000000000000000000						
				c. Employer's Name/S	Specific Field			
						Floring County But		
				e. Election Sum to Date				
						\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/	уууу)	k. Amount	
							\$	
							\$	
							\$	
3. Contr	ributor Informati	on		Add Re	emove			
a. Full Na	me, Mailing Address	& Phone		b. Job Title/Profession	n	d. Comme	nts	
(include	city, state, & zip)			1000000				
				c. Employer's Name/S	specific Field	-		
						e Election	Sum to Date	
					\$			
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/		k. Amount	
	g			, 1777 F 1177	(\$	
							\$	
\Box							\$	
4. Tota	l only this Pag	re				\$		250.00
5. Total of ALL CRO-1210 Pages								
o. I wan of ALL CRO-1210 I ages					\$		250.00	

Amendment

(This line must be on line 6 of Detailed Summary Page CRO-1100)

Disbursements	Pg	1	of 1

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)

1. Committee rull Name (and rund if applicable)							2. ID Number		
Vote LeFevers							8DUC54		
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)									
Operating E				ates/Political Committees		Co	ordinate	d Party Expenditures	
4. Payee Inform			_	dd 🔲		Remove			
a. Full Name, Maili	ng Address & Phone		b.	Coordinated Committee	Nan	ne	d. Co	mments	
(include city, state,	& zip)								
US Post Office									
218 S Main Ave	;		c.	Level Registered (Specify	y)		1		
Newton, NC 28	8658-3357					County:	1		
				State Municipality:			e. Ele	ection Sum to Date	
					Transcipality.				
							\$ 3	323.00	
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy) j. Amount		j. Amount	k. Re	quired Remarks	
DEL	Debit	I		10/06/2017		\$85.00			
DEL	Debit	I		10/19/2017		\$68.00			
4. Payee Inform	ation		A	dd 🗆	i de la	Remove	E CONTRACTOR OF THE PARTY OF TH		
	ng Address & Phone			Coordinated Committee			d. Comments		
	-		D.	Coordinated Committee	Ivan	16	u. Co	minents	
US Post Office	& zip)		1						
			-				-		
218 S Main Ave			c. Level Registered (Specify)				4		
Newton, NC 28	658-3357			Federal County:					
			L	State 🖂		Municipality:	e. Ele	ction Sum to Date	
							\$ 3	323.00	
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)		j. Amount	k. Re	quired Remarks	
DEL	Debit	I		10/14/2017 \$170.00		\$170.00			
	,		\top		1	\$			
1 B Y 6				– – –					
4. Payee Inform	***************************************					Remove			
	ng Address & Phone		b.	b. Coordinated Committee Name			d. Cor	mments	
(include city, state, &									
Observer News	Enterprise (ONE)								
Post Office Drav	ver 48		c. Level Registered (Specify)						
Newton, NC 28658				Federal County:					
				State 🖂	Municipality:	e. Ele	ction Sum to Date		
							\$ 3	355.00	
f. Account Code	g. Form of Payment	h. Purpose Code	1	i. Date (mm/dd/yyyy)		j. Amount	k. Rec	quired Remarks	
DEL	Debit	A		10/06/2017		\$160.00	Ads		
DEL	Debit	A		10/18/2017		\$80.00	Ads		
5. Total only this	s Page						\$	563.00	
6. Total of ALL CRO-1310 Pages						Ψ	303.00		
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)									
(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)						\$	563.00		
(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							idate		
E - Salaries F* - Equipment G - Politica								Office Expenses	
I - Postage J - Penalties K* - Office I				The state of the s				gal Expense Fund	
O* - Other									
* Codes require detailed explanation in required remarks field (k)									