

Disclosure Report Cover

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

Amendment	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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1. Committee Information

a. Full Name	c. ID Number
TSENGHOWER FOR COMMISSIONER	
b. Mailing Address (include City, State and Zip Code)	d. Date Filed
1537 LITTLE HILL ROAD NEWTON, NC 28658	7/11/18
	e. Phone Number
	828-468-2143

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2018	7/22/18	6/30/18	CANDACE TSENGHOWER

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"/> Municipal	<input type="checkbox"/> State/County
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-election	<input checked="" type="checkbox"/> Second
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth
<input type="checkbox"/> Other:		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual
		<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
8. Number of Fundraisers this Report		10. Special Report Name	
0			

11. Account Information		11. Account Information	
a. Financial Institution Full Name	a. Financial Institution Full Name	b. Purpose	c. Account Code
FIRST CITIZENS BANK			
b. Purpose	c. Account Code	d. Period Begin Balance	d. Period Begin Balance
Campaign Account	CRR	\$3972.42	\$

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.

CANDACE TSENGHOWER

Printed Name of Signer

Signature of Appointed Treasurer

Date

7/10/18

FOR OFFICE USE ONLY

Date Received:

Date Postmarked:

Date Scanned:

Date Data Entered:



Employee:

Employee:

Employee:

Employee:

Delivery Method

- ☐ Normal Mail
- ☐ Registered Mail
- ☐ Hand Delivered
- ☐ Electronically Filed
- ☐ Signer has not received mandatory training

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	
Isenhower for Commissioner		2 nd Quarter		
Start of Election Cycle: January 1, 2015		Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start		\$ 3972.42	\$ 692.89	
RECEIPTS				
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 200.00	\$ 200.00	
6) Contributions from Individuals (CRO-1210)		\$ 650.00	\$ 8243.90	
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	\$ 0	
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	
11 e) 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)		\$ 850.00	\$ 8448.90	
EXPENDITURES				
13) Disbursements				
13a) Operating Expenditures (CRO-1310)		\$ 0	\$ 3495.47	
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)		\$ 0	\$ 823.90	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 0	\$ 4319.37	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 4822.42	\$ 4822.42	
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)		\$	\$	

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

1. Committee Full Name (and Fund if applicable) Page 1

SENATOR ERIC

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s of \$50 or less

Amendment

☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)

3. Contributor Information

2. ID Number

[illegible]

NC State Board of Elections

April 2007

Contributions from Individuals

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

Pg 1 of 2

Amendment
☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)										2. ID Number	
PSEPHOWER FOR COMMISSIONER											
3. Contributor Information											
a. Full Name, Mailing Address & Phone (include city, state, & zip)										b. Job Title/Profession	
RAN H. ELMORE JR. P.O. Box 307 CATANBA NC 28609										RETIRED	
										c. Employer's Name/Specific Field	
										CONSTRUCTION	
d. Comments											
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"/>	CR	CHECK		5/3/18	\$ 100.00						
<input type="checkbox"/>					\$						
<input type="checkbox"/>					\$						
3. Contributor Information											
a. Full Name, Mailing Address & Phone (include city, state, & zip)										b. Job Title/Profession	
JOHN W. CROWE III 1671 8th St. Dr NW HICKORY, NC 28601										LAWYER	
										c. Employer's Name/Specific Field	
										YOUNG MORRIS BACH	
d. Comments											
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"/>	CR	CHECK		5/4/18	\$ 100.00						
<input type="checkbox"/>					\$						
<input type="checkbox"/>					\$						
3. Contributor Information											
a. Full Name, Mailing Address & Phone (include city, state, & zip)										b. Job Title/Profession	
THOMAS W. WARWICK P.O. Box 267 NEWTON, NC 28658										RETIRED	
										c. Employer's Name/Specific Field	
										LAWYER	
d. Comments											
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"/>	CR	CHECK		5/2/18	\$ 100.00						
<input type="checkbox"/>					\$						
<input type="checkbox"/>					\$						
4. Total only this Page										\$ 300.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)										\$	

CRO-1210

NC State Board of Elections

April 2007

Contributions from Individuals

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

Pg 2 of 2

Amendment
☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)
 PENNOWER FOR COMMISSIONER

2. ID Number

3. Contributor Information

a. Full Name, Mailing Address & Phone
 (include city, state, & zip)

☐ Add ☐ Remove

b. Job Title/Profession

c. Employer's Name/Specific Field

d. Comments

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

☐

CR

CHEK

5/17/18

\$ 1000

☐

\$ 1000

☐

\$

\$

3. Contributor Information

a. Full Name, Mailing Address & Phone
 (include city, state, & zip)

☐ Add ☐ Remove

b. Job Title/Profession

c. Employer's Name/Specific Field

d. Comments

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

☐

CR

CHEK

5/18/19

\$ 2500

☐

\$ 2500

☐

\$

\$

3. Contributor Information

a. Full Name, Mailing Address & Phone
 (include city, state, & zip)

☐ Add ☐ Remove

b. Job Title/Profession

c. Employer's Name/Specific Field

d. Comments

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

☐

\$

☐

\$

☐

\$

4. Total only this Page

5. Total of ALL CRO-1210 Pages

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

CRO-1210

NC State Board of Elections

April 2007