

# 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 KEN 4 SCHOOLS COMMITTEE	RECEIVED	c. ID Number 90205
b. Mailing Address (include City, State and Zip Code) 8 MARTIN WAY WHISPERING PINES, NC 28327	JAN 04 2023	d. Date Filed 12/12/2022
	MOORE BOE	e. Phone Number 910-295-6628

2. Report Year 2022	3. Period Start Date (mm/dd/yy) 10/23/2022	4. Period End Date (mm/dd/yy) 12/31/2022	5. Treasurer Full Name CAROL WHEELDON
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6. Type of Committee (Check One) <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	9. Type of Report (check only one type of report from one category) <table border="1"> <tr> <td>Municipal</td> <td>State/County</td> <td>Referendum</td> </tr> <tr> <td> <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         </td> <td> <input type="checkbox"/> Organizational  <input type="checkbox"/> Quarterly  <input type="checkbox"/> First  <input type="checkbox"/> Second  <input type="checkbox"/> Third  <input checked="" type="checkbox"/> Fourth  <input type="checkbox"/> Semi-annual  <input type="checkbox"/> Mid Year  <input type="checkbox"/> Year End  <input type="checkbox"/> Final  <input type="checkbox"/> Special         </td> <td> <input type="checkbox"/> Organizational  <input type="checkbox"/> Pre-referendum  <input type="checkbox"/> Final  <input type="checkbox"/> Supplemental Final  <input type="checkbox"/> Annual  <input type="checkbox"/> Special         </td> </tr> </table>	Municipal	State/County	Referendum	<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	<input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input checked="" type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special
Municipal	State/County	Referendum					
<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	<input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input checked="" type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special					
7. Type of Fund (if applicable, check one) <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:	10. Special Report Name						
8. Number of Fundraisers this Report 0							

3. Account Information a. Financial Institution Full Name PNC BANK	3. Account Information a. Financial Institution Full Name
b. Purpose CANDIDATE CAMPAIGN	c. Account Code A
d. Period Begin Balance \$ 3,252.77	b. Purpose d. Period Begin Balance
	c. Account Code \$

## 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

Carol Wheeldon  
Printed Name of Signer

Carol Wheeldon  
Signature of Appointed Treasurer

01/03/2023  
Date

## FOR OFFICE USE ONLY

Date Received: 1/4/23	Employee: 4	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:	Employee:	<input type="checkbox"/> Signer has not received mandatory training
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

Use this form to summarize all disclosure reporting forms and to total monetary information

Amendment  
 Yes  No

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number
KEN 4 SCHOOLS COMMITTEE	2022 Fourth Quarter	90205
Start of Election Cycle: January 1, 2021		Total this Reporting Period
4) Cash on Hand at Start		\$ 3,252.77
<b>RECEIPTS</b>		
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 0.00
6) Contributions from Individuals	(CRO-1210)	\$ 352.05
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0.00
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0.00
9) Loan Proceeds	(CRO-1410)	\$ 0.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$ 0.00
11) Other Receipt Sources		
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0.00
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$ 0.00
11c) Outside Sources of Income	(CRO-1250)	\$ 0.00
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$ 0.00
11e) Exempt Purchase Price Sales	(CRO-1265)	\$ 0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		\$ 352.05
<b>EXPENDITURES</b>		
13) Disbursements		
13a) Operating Expenditures	(CRO-1310)	\$ 284.00
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 0.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0.00
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 2.05
15) Loan Repayments	(CRO-1420)	\$ 0.00
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$ 1,535.00
17) In-Kind Contributions	(CRO-1510)	\$ 0.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 1,821.05
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 1,783.77
<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
26) Forgiven Loans	(CRO-1440)	\$ 0.00
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$ 0.00
28) Contributions to be Refunded	(CRO-1215)	\$ 1,535.00
		\$ 8,800.47

# Contributions from Individuals

Pg 1 of 1

**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> KEN 4 SCHOOLS COMMITTEE			<b>2. ID Number</b> <i>90205</i>		
<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)  THOMAS LOSAPIO 3308 SEVEN LAKES WEST WEST END, NC 27376			<b>b. Job Title/Profession</b> NOT CURRENTLY EMPLOYED <b>c. Employer's Name/Specific Field</b>  NOT CURRENTLY EMPLOYED		
			<b>d. Comments</b>  <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"/>	A	Check		10/24/2022	\$ 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)  CLETA MITCHELL 139 NATIONAL DR PINEHURST, NC 28374			<b>b. Job Title/Profession</b> ATTORNEY <b>c. Employer's Name/Specific Field</b> SELF		
			<b>d. Comments</b>  <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"/>	A	Check		10/25/2022	\$ 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)  MARTHA WICKS 115 JEFFERSON ST SOUTHERN PINES, NC 28387			<b>b. Job Title/Profession</b> NOT CURRENTLY EMPLOYED <b>c. Employer's Name/Specific Field</b>  <b>e. Election Sum to Date</b> \$ 52.05		
<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"/>	A	Electric Funds Tran		10/27/2022	\$ 52.05
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>4. Total only this Page</b>					\$ 352.05
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 352.05

# Disbursements

Pg 1 of 1  Yes  No

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> KEN 4 SCHOOLS COMMITTEE		<b>2. ID Number</b> 90205																			
<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> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Add <input type="checkbox"/> Remove         </div> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td rowspan="2" style="width: 30%;">a. Full Name, Mailing Address &amp; Phone  (include city, state, &amp; zip)</td> <td>b. Coordinated Committee Name</td> <td>d. Comments</td> </tr> <tr> <td colspan="2" style="text-align: center;">c. Level Registered (Specify)</td> </tr> <tr> <td rowspan="2" style="text-align: center; vertical-align: middle; padding: 10px;">DIXON ASSOCIATES USA, LLC PO BOX 1585 CARTHAGE, NC 28327</td> <td style="text-align: center; vertical-align: middle; padding: 5px;"><input type="checkbox"/> Federal</td> <td style="text-align: center; vertical-align: middle; padding: 5px;"><input type="checkbox"/> County:</td> </tr> <tr> <td style="text-align: center; vertical-align: middle; padding: 5px;"><input type="checkbox"/> State</td> <td style="text-align: center; vertical-align: middle; padding: 5px;"><input type="checkbox"/> Municipality:</td> </tr> <tr> <td colspan="2"></td> <td style="text-align: right; padding-right: 10px;">e. Election Sum to Date  \$ 284.00</td> </tr> </table>			a. Full Name, Mailing Address & Phone  (include city, state, & zip)	b. Coordinated Committee Name	d. Comments	c. Level Registered (Specify)		DIXON ASSOCIATES USA, LLC PO BOX 1585 CARTHAGE, NC 28327	<input type="checkbox"/> Federal	<input type="checkbox"/> County:	<input type="checkbox"/> State	<input type="checkbox"/> Municipality:			e. Election Sum to Date  \$ 284.00						
a. Full Name, Mailing Address & Phone  (include city, state, & zip)	b. Coordinated Committee Name	d. Comments																			
	c. Level Registered (Specify)																				
DIXON ASSOCIATES USA, LLC PO BOX 1585 CARTHAGE, NC 28327	<input type="checkbox"/> Federal	<input type="checkbox"/> County:																			
	<input type="checkbox"/> State	<input type="checkbox"/> Municipality:																			
		e. Election Sum to Date  \$ 284.00																			
<b>f. Account Code</b> A	<b>g. Form of Payment</b> Check	<b>h. Purpose Code</b> A	<b>i. Date (mm/dd/yyyy)</b> 10/28/2022	<b>j. Amount</b> \$ 284.00	<b>k. Required Remarks</b> TEXT BLAST																
<b>5. Total only this Page</b>			\$ 284.00																		
<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>			\$ 284.00																		
<b>7. Purpose Codes</b> (List detailed expenditure code in (h.) above) <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">A* - Media</td> <td style="width: 25%;">B* - Printing</td> <td style="width: 25%;">C* - Fundraising</td> <td style="width: 25%;">D - To Another Candidate</td> </tr> <tr> <td>E - Salaries</td> <td>F* - Equipment</td> <td>G - Political Party</td> <td>H* - Holding Public Office Expenses</td> </tr> <tr> <td>I - Postage</td> <td>J - Penalties</td> <td>K* - Office Expenses</td> <td>Q* - Donation to Legal Expense Fund</td> </tr> <tr> <td colspan="4"><b>O* Other</b></td> </tr> </table> <p>* Codes require detailed explanation in required remarks field (k)</p>						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	<b>O* Other</b>			
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																		
<b>O* Other</b>																					

# Aggregated Non-Media Expenditures

Page 1 of 1**Amendment**  
 Yes  No

Optional form used to report NC Non-Media Expenditures of \$50 or less.

<b>1. Committee Full Name (and Fund if applicable)</b> KEN 4 SCHOOLS COMMITTEE					<b>2. ID Number</b> 90205	
<b>3. Payee Information</b>						
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Electric Funds Tran	O	10/27/2022	\$ 2.05	COLLECTION FEE
<b>4. Total only this Page</b>					\$	2.05
<b>5. Total of ALL CRO-1315 Pages</b> (This line must be on line 14 of Detailed Summary Page CRO-1100)					\$	2.05
<b>6. Purpose Codes (List detailed expenditure code in (d) above)</b>						
E - Salaries		B* - Printing	C* - Fundraising	D - To Another Candidate		
I - Postage		F* - Equipment	G - Political Party	H* - Holding Public Office Expenses		
O* - Other		J - Penalties	K* - Office Expenses	Q* - Donations to Legal Expense Fund		

CRO-1315

NC State Board of Elections

December 2009

\* Codes require detailed explanation in required remarks field (g)

# Refunds/Reimbursements From the Committee Pg 1 of 1

Amendment  Yes  No

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

1. Committee Full Name (and Fund if applicable)		2. ID Number	
KEN 4 SCHOOLS COMMITTEE		90205	
<b>3. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>d. Type of Committee</b> <input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party	
KENNETH* JAMES BENWAY 8 MARTIN WAY WHISPERING PINES, NC 28327		<b>e. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	
		<b>h. Original Receipt Date</b> 10/31/2022	
		<b>i. Original Receipt Amount</b> \$ 760.00	
<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
NOT CURRENTLY EMPLOYED		f. Purpose Code P	
		<b>j. Election Sum to Date</b> \$ 2,184.00	
k. Account Code	l. Form of Payment	m. Required Remarks	<b>n. Date (mm/dd/yyyy)</b> 10/31/2022
A	Check	RADIO ADS	<b>o. Amount</b> \$ 760.00
<b>3. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>d. Type of Committee</b> <input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party	
KENNETH* JAMES BENWAY 8 MARTIN WAY WHISPERING PINES, NC 28327		<b>e. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	
		<b>h. Original Receipt Date</b> 10/28/2022	
		<b>i. Original Receipt Amount</b> \$ 775.00	
<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
NOT CURRENTLY EMPLOYED		f. Purpose Code P	
		<b>j. Election Sum to Date</b> \$ 2,184.00	
k. Account Code	l. Form of Payment	m. Required Remarks	<b>n. Date (mm/dd/yyyy)</b> 10/31/2022
A	Check	NEWSPAPER ADS	<b>o. Amount</b> \$ 775.00
<b>4. Total only this Page</b> \$ 1,535.00			
<b>5. Total of ALL CRO-1320 Pages</b> \$ 1,535.00 <i>(This line must be on line 15 of Detailed Summary Page CRO-1100)</i>			
<b>6. Purpose Codes</b> (List detailed disbursement code in (f) above)			
L - Returned to Contributor		M - Overpayment for Service	
P* - Reimbursement of In-Kin		O* Other	
* Codes require detailed explanation in required remarks field (m)			

CRO-1320

NC State Board of Elections

July 2007

**Contributions to be Reimbursed**Pg 1 of 1

<b>Amendment</b>	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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>	
KEN 4 SCHOOLS COMMITTEE		90205	
<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 Reimburssee (the person to whom the campaign check is written)</b>	
KENNETH* JAMES BENWAY 8 MARTIN WAY WHISPERING PINES, NC 28327		KENNETH* JAMES BENWAY 8 MARTIN WAY WHISPERING PINES, NC 28327	
<b>a. Contribution Description</b>	<b>b. Date (mm/dd/yyyy)</b>	<b>c. Credit Card Y/N</b>	<b>d. Amount</b>
NEWSPAPER ADS	10/28/2022	N	\$ 775.00
<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 Reimburssee (the person to whom the campaign check is written)</b>	
KENNETH* JAMES BENWAY 8 MARTIN WAY WHISPERING PINES, NC 28327		KENNETH* JAMES BENWAY 8 MARTIN WAY WHISPERING PINES, NC 28327	
<b>a. Contribution Description</b>	<b>b. Date (mm/dd/yyyy)</b>	<b>c. Credit Card Y/N</b>	<b>d. Amount</b>
RADIO ADS	10/31/2022	N	\$ 760.00
<b>4. Total only this Page</b> \$ 1,535.00			
<b>5. Total of ALL CRO-1215a Pages</b> \$ 1,535.00 <small>(This line goes in line 28 of Detailed Summary Page CRO-1100)</small>			

CRO-1215

NC State Board of Elections

December 2007