

# 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	RECEIVED		c. ID Number
KEN 4 SCHOOLS COMMITTEE		90205	
b. Mailing Address (include City, State and Zip Code)	OCT 27 2022		d. Date Filed
8 MARTIN WAY WHISPERING PINES, NC 28327	MOORE BOE		10/26/2022
			e. Phone Number
			910-295-6228

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2022	07/01/2022	10/22/2022	CAROL WHEELDON

6. Type of Committee (Check One)	7. Type of Fund (if applicable, 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	<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:	<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 checked="" type="checkbox"/> Third  <input 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 checked="" type="checkbox"/> Third <input 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 checked="" type="checkbox"/> Third <input 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						
		10. Special Report Name						

8. Number of Fundraisers this Report	0	3. Account Information	3. Account Information
a. Financial Institution Full Name	PNC BANK	a. Financial Institution Full Name	
b. Purpose	c. Account Code	b. Purpose	c. Account Code
CANDIDATE CAMPAIGN	A		
	d. Period Begin Balance		d. Period Begin Balance
	\$ 4,399.65		\$

## 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 Wheelton  
Printed Name of Signer

Carol Wheelton  
Signature of Appointed Treasurer

10/26/2022  
Date

## FOR OFFICE USE ONLY

Date Received:	10/27/2022	Employee:	<u>APW</u>	Delivery Method
Date Postmarked:		Employee:		<input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed
Date Scanned:		Employee:		
Date Data Entered:		Employee:		<input type="checkbox"/> 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
KEN 4 SCHOOLS COMMITTEE	2022 Third Quarter	90205
Start of Election Cycle: January 1, 2021		Total this Reporting Period
4) Cash on Hand at Start		\$ 4,399.65 \$ 0.00
<b>RECEIPTS</b>		
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 120.00 \$ 393.03
6) Contributions from Individuals	(CRO-1210)	\$ 2,360.80 \$ 10,409.62
7) Contributions from Political Party Committees	(CRO-1220)	\$ 1,750.00 \$ 2,750.00
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
<b>12) TOTAL RECEIPTS</b> (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		\$ 4,230.80 \$ 13,552.65
<b>EXPENDITURES</b>		
13) Disbursements		
13a) Operating Expenditures	(CRO-1310)	\$ 0.00 \$ 2,713.07
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)	\$ 16.61 \$ 129.24
15) Loan Repayments	(CRO-1420)	\$ 0.00 \$ 0.00
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$ 5,240.97 \$ 7,265.47
17) In-Kind Contributions	(CRO-1510)	\$ 120.10 \$ 192.10
<b>18) TOTAL EXPENDITURES</b> (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 5,377.68 \$ 10,299.88
<b>19) Cash on Hand at End</b> (Add lines 4 and 12 together, then subtract line 18)		\$ 3,252.77 \$ 3,252.77
<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 \$ 0.00
26) Forgiven Loans	(CRO-1440)	\$ 0.00 \$ 0.00
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$ 0.00 \$ 0.00
<b>28) Contributions to be Refunded</b>	(CRO-1215)	\$ 5,240.97 \$ 7,265.47

**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>		
KEN 4 SCHOOLS COMMITTEE			90205		
<b>3. Contributor Information</b>					
<b>a. Amend</b>	<b>b. Account Code</b>	<b>c. Form of Payment</b>	<b>d. In-Kind Description</b>	<b>e. Date (mm/dd/yyyy)</b>	<b>f. Amount</b>
<input type="checkbox"/> Add	A	Check		09/15/2022	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	A	Check		10/21/2022	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	A	Check		09/15/2022	\$ 20.00
<input type="checkbox"/> Remove					
<b>4. Total only this Page</b>			\$ 120.00		
<b>5. Total of ALL CRO-1205 Pages</b> <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>			\$ 120.00		

CRO-1205

NC State Board of Elections

April 2007

# Contributions from Individuals

Pg 1 of 5  Yes  No

Amendment  
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	
KEN 4 SCHOOLS COMMITTEE					90205	
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	
KENNETH* JAMES BENWAY 8 MARTIN WAY WHISPERING PINES, NC 28327			NOT CURRENTLY EMPLOYED			
			c. Employer's Name/Specific Field			
			NOT CURRENTLY EMPLOYED			
					e. Election Sum to Date	
					\$ 2,184.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	In-Kind	POSTCARDS	08/26/2022	\$ 120.10	
<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	
MARTIN CARPENTER 6 NORTH SOUTH CT SOUTHERN PINES, NC 28387			NOT CURRENTLY EMPLOYED			
			c. Employer's Name/Specific Field			
					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"/>	A	Check		09/23/2022	\$ 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	
KAREN COOK 127 NATIONAL DR PINEHURST, NC 28374			NOT CURRENTLY EMPLOYED			
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$ 52.05	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Electric Funds Tran		09/07/2022	\$ 52.05	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 272.15	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 2,360.80	

# Contributions from Individuals

Pg 2 of 5

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>			
KEN 4 SCHOOLS COMMITTEE		90205			
<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> ADMINISTRATIVE		<b>d. Comments</b>	
LISA DISHMAN 60 WINHILLCT PINEHURST, NC 28374		<b>c. Employer's Name/Specific Field</b> QUANTICO TACTICAL		<b>e. Election Sum to Date</b> \$ 65.00	
<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		10/17/2022	\$ 65.00
<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> NOT CURRENTLY EMPLOYED		<b>d. Comments</b>	
HARRY HARGROVE PO BOX 1821 WAYCROSS, GA 31502		<b>c. Employer's Name/Specific Field</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		08/10/2022	\$ 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)		<b>b. Job Title/Profession</b> ENTREPRENEUR		<b>d. Comments</b>	
RONALD JACKSON 335 FIELDS DR ABERDEEN, NC 28315		<b>c. Employer's Name/Specific Field</b> SELF		<b>e. Election Sum to Date</b> \$ 700.00	
<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		10/21/2022	\$ 700.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>4. Total only this Page</b>					\$ 865.00
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 2,360.80

# Contributions from Individuals

Pg 3 of 5  Yes  No

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

Amendment

1. Committee Full Name (and Fund if applicable)					2. ID Number	
KEN 4 SCHOOLS COMMITTEE					90205	
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	
			NOT CURRENTLY EMPLOYED		e. Election Sum to Date  \$ 52.50	
PAUL LACOSTA 320 PINE LAUREL DR CARTHAGE, NC 28327			c. Employer's Name/Specific Field			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Electric Funds Tran		07/12/2022	\$ 52.50	
<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	
			NOT CURRENTLY EMPLOYED		e. Election Sum to Date  \$ 104.10	
JAMES LEGG 702 SUN RD ABERDEEN, NC 28315			c. Employer's Name/Specific Field			
			NOT CURRENTLY EMPLOYED			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Electric Funds Tran		09/21/2022	\$ 104.10	
<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	
			NOT CURRENTLY EMPLOYED		e. Election Sum to Date  \$ 500.00	
ANDREA MOORE 589 FURTH LANE SOUTHERN PINES, NC 28387			c. Employer's Name/Specific Field			
			NOT CURRENTLY EMPLOYED			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/01/2022	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 406.60	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 2,360.80	

# Contributions from Individuals

Pg 4 of 5

Amendment  
 Yes  No

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	
KEN 4 SCHOOLS COMMITTEE				90205	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments	
GERALD PALUMBO 2275 SEVEN LAKES SOUTH WEST END, NC 27376			NOT CURRENTLY EMPLOYED	c. Employer's Name/Specific Field  e. Election Sum to Date  \$ 52.05	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	A	Electric Funds Tran		09/19/2022	\$ 52.05
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments	
PATRICK PIZZELLA 170 PALMETTO RD PINEHURST, NC 28374			COUNSEL MEMBER	c. Employer's Name/Specific Field  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"/>	A	Electric Funds Tran		10/17/2022	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments	
TODD ROUND PO BOX 3661 PINEHURST, NC 28374			PARTNER	c. Employer's Name/Specific Field  e. Election Sum to Date  \$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	A	Check		10/03/2022	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 402.05
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 2,360.80

# Contributions from Individuals

Pg 5 of 5  Yes  No

Amendment

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>	
KEN 4 SCHOOLS COMMITTEE		90205	
<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> HOME EDUCATOR	<b>d. Comments</b>
SARAH SLUSSER 250 SUGAR PINE DR PINEHURST, NC 28374		<b>c. Employer's Name/Specific Field</b> SELF	<b>e. Election Sum to Date</b> \$ 102.05
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>
<input type="checkbox"/>	A	Electric Funds Tran	
<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> NOT CURRENTLY EMPLOYED	<b>d. Comments</b>
FREDERICK SULLIVAN 135 DENT ST WEST ROXBURY, MA 02132		<b>c. Employer's Name/Specific Field</b> NOT CURRENTLY EMPLOYED	<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>
<input type="checkbox"/>	A	Check	
<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> NOT CURRENTLY EMPLOYED	<b>d. Comments</b>
ROBERT THRUSH PO BOX 3371 PINEHURST, NC 28374		<b>c. Employer's Name/Specific Field</b>	<b>e. Election Sum to Date</b> \$ 65.00
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>
<input type="checkbox"/>	A	Money Order	
<input type="checkbox"/>	A	Money Order	
<input type="checkbox"/>			
<b>4. Total only this Page</b>			
<b>415.00</b>			
<b>5. Total of ALL CRO-1210 Pages</b>			
(\$This line must be on line 6 of Detailed Summary Page CRO-1100)			
\$ 2,360.80			

# Contributions from Political Party Committees Pg 1 of 1

Amendment  
 Yes  No

Use this form to report contributions from a political party

1. Committee Full Name (and Fund if applicable)		2. ID Number	
KEN 4 SCHOOLS COMMITTEE		90205	
3. Contributor Information		<input type="checkbox"/> Add	<input type="checkbox"/> Remove
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Comments	
MOORE* COUNTY REPUBLICAN MEN'S CLUB PO BOX 1812 SOUTHERN PINES, NC 28388 (910) 695-8852		c. Election Sum to Date	
		\$ 500.00	
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)
A	Check		09/30/2022
			\$
			\$
3. Contributor Information		<input type="checkbox"/> Add	<input type="checkbox"/> Remove
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Comments	
MOORE* REPUBLICAN WOMEN PO BOS 3654 PINEHURST, NC 28374		c. Election Sum to Date	
		\$ 250.00	
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)
A	Check		08/30/2022
			\$
			\$
3. Contributor Information		<input type="checkbox"/> Add	<input type="checkbox"/> Remove
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Comments	
MOORE*COUNTY REPUBLICAN PARTY PO BOX 4414 PINEHURST, NC 28374		c. Election Sum to Date	
		\$ 2,000.00	
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)
A	Check		07/08/2022
			\$
			\$
4. Total only this Page			\$ 1,750.00
5. Total of ALL CRO-1220 Pages (This line must be on line 7 of Detailed Summary Page CRO-1100)			\$ 1,750.00

# Aggregated Non-Media Expenditures

Page 1 of 1**Amendment**  
 Yes  No

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

1. Committee Full Name (and Fund if applicable)			2. ID Number			
KEN 4 SCHOOLS COMMITTEE			90205			
3. Payee Information						
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	07/12/2022	\$ 2.50	COLLECTION FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Electric Funds Tran	O	09/07/2022	\$ 2.05	COLLECTION FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Electric Funds Tran	O	09/19/2022	\$ 2.05	COLLECTION FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Electric Funds Tran	O	09/21/2022	\$ 4.10	COLLECTION FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Electric Funds Tran	O	10/13/2022	\$ 1.97	COLLECTION FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Electric Funds Tran	O	10/17/2022	\$ 3.94	COLLECTION FEE
4. Total only this Page				\$ 16.61		
5. Total of ALL CRO-1315 Pages <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>				\$ 16.61		
6. Purpose Codes (List detailed expenditure code in (d) above)						
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		
* Codes require detailed explanation in required remarks field (g)						

CRO-1315

NC State Board of Elections

December 2009

# 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> 08/09/2022	
			<b>i. Original Receipt Amount</b> \$ 3,377.31	
<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>		<b>f. Purpose Code</b>
NOT CURRENTLY EMPLOYED		NOT CURRENTLY EMPLOYED		P
<b>k. Account Code</b>		<b>l. Form of Payment</b>	<b>m. Required Remarks</b>	<b>n. Date (mm/dd/yyyy)</b>
A		Check	YARD SIGNS	08/09/2022
<b>o. Amount</b> \$ 3,377.31				
<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> 08/16/2022	
			<b>i. Original Receipt Amount</b> \$ 868.56	
<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>		<b>f. Purpose Code</b>
NOT CURRENTLY EMPLOYED		NOT CURRENTLY EMPLOYED		P
<b>k. Account Code</b>		<b>l. Form of Payment</b>	<b>m. Required Remarks</b>	<b>n. Date (mm/dd/yyyy)</b>
A		Check	POSTCARDS	08/16/2022
<b>o. Amount</b> \$ 868.56				
<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> 09/09/2022	
			<b>i. Original Receipt Amount</b> \$ 995.10	
<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>		<b>f. Purpose Code</b>
NOT CURRENTLY EMPLOYED		NOT CURRENTLY EMPLOYED		P
<b>k. Account Code</b>		<b>l. Form of Payment</b>	<b>m. Required Remarks</b>	<b>n. Date (mm/dd/yyyy)</b>
A		Check	SIGNS	09/09/2022
<b>o. Amount</b> \$ 995.10				
<b>4. Total only this Page</b> \$ 5,240.97				
<b>5. Total of ALL CRO-1320 Pages</b> (\$This line must be on line 15 of Detailed Summary Page CRO-1100) \$ 5,240.97				
<b>6. Purpose Codes</b> (List detailed disbursement code in (f) above)				
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)				

# In-Kind Contributions

Pg 1 of 1 Yes  No

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>	
KEN 4 SCHOOLS COMMITTEE		90205	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>		<b>b. Type of Contributor</b>	<b>c. Comments</b>
KENNETH* JAMES BENWAY 8 MARTIN WAY WHISPERING PINES, NC 28327		<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>			
\$ 2,184.00			
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	<b>g. Fair Market Amount</b>
POSTCARDS		08/26/2022	\$ 120.10
			\$
			\$
<b>4. Total only this Page</b> \$ 120.10			
<b>5. Total of ALL CRO-1510 Pages</b> \$ 120.10 <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>			

CRO-1510

NC State Board of Elections

December 2007

# 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).

1. Committee Full Name		2. ID Number	
KEN 4 SCHOOLS COMMITTEE		90205	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
Full Name & Mailing Address of the Payee (the original vendor)		Full Name & Mailing Address of the Reimbursee (the person to whom the campaign check is written)	
KENNETH* JAMES BENWAY 8 MARTIN WAY WHISPERING PINES, NC 28327		KENNETH* JAMES BENWAY 8 MARTIN WAY WHISPERING PINES, NC 28327	
a. Contribution Description	b. Date (mm/dd/yyyy)	c. Credit Card Y/N	d. Amount
YARD SIGNS	08/09/2022	N	\$ 3,377.31
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
Full Name & Mailing Address of the Payee (the original vendor)		Full Name & Mailing Address of the Reimbursee (the person to whom the campaign check is written)	
KENNETH* JAMES BENWAY 8 MARTIN WAY WHISPERING PINES, NC 28327		KENNETH* JAMES BENWAY 8 MARTIN WAY WHISPERING PINES, NC 28327	
a. Contribution Description	b. Date (mm/dd/yyyy)	c. Credit Card Y/N	d. Amount
POSTCARDS	08/16/2022	N	\$ 868.56
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
Full Name & Mailing Address of the Payee (the original vendor)		Full Name & Mailing Address of the Reimbursee (the person to whom the campaign check is written)	
KENNETH* JAMES BENWAY 8 MARTIN WAY WHISPERING PINES, NC 28327		KENNETH* JAMES BENWAY 8 MARTIN WAY WHISPERING PINES, NC 28327	
a. Contribution Description	b. Date (mm/dd/yyyy)	c. Credit Card Y/N	d. Amount
SIGNS	09/09/2022	N	\$ 995.10
4. Total only this Page		\$ 5,240.97	
5. Total of ALL CRO-1215a Pages <i>(This line goes in line 28 of Detailed Summary Page CRO-1100)</i>		\$ 5,240.97	