

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		
SHANNON 4 MOORE ED	076309		
b. Mailing Address (include City, State and Zip Code)	d. Date Filed		
113 CHEEK LN CARTHAGE, NC 28327	04/11/2022		
	e. Phone Number		
	910-295-2628		

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2022	01/01/2022	04/30/2022	N* CAROL WHEELDON

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 <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> First <input type="checkbox"/> Second <input 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	Referendum <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)	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		
PNC BANK*			
b. Purpose	c. Account Code	b. Purpose	c. Account Code
CAMPAIGN CHECKING	A		d. Period Begin Balance
	d. Period Begin Balance		
	\$ 0.00		\$

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

N CAROL WHEELDON

Printed Name of Signer

Carol Wheelton

05/06/2022

Date

FOR OFFICE USE ONLY

Date Received: <u>5/7/2022</u>	Employee: <u>APB</u>	Delivery Method
RECEIVED		<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: <u>MAY 07 2022</u>	Employee: _____	
Date Data Entered: <u>MOOREBOE</u>	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

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
SHANNON 4 MOORE ED	2022 First Quarter	076309
Start of Election Cycle: January 1, 2021		Total this Reporting Period
4) Cash on Hand at Start		\$ 0.00
RECEIPTS		
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 120.00
6) Contributions from Individuals	(CRO-1210)	\$ 2,450.00
7) Contributions from Political Party Committees	(CRO-1220)	\$ 1,000.00
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)		\$ 3,570.00
EXPENDITURES		
13) Disbursements		
13a) Operating Expenditures	(CRO-1310)	\$ 138.07
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)	\$ 23.99
15) Loan Repayments	(CRO-1420)	\$ 0.00
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$ 14.98
17) In-Kind Contributions	(CRO-1510)	\$ 0.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 177.04
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 3,392.96
ADDITIONAL INFORMATION		
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 <i>MAV 07/2022</i>	(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)	\$ 14.98

Aggregated Contributions from IndividualsPage 1 of 1
 Amendment
 Yes 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		
SHANNON 4 MOORE ED			026309		
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	A	Cash		02/02/2022	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	A	Cash		02/02/2022	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	A	Cash		02/02/2022	\$ 20.00
<input type="checkbox"/> Remove					
4. Total only this Page			\$ 120.00		
5. Total of ALL CRO-1205 Pages <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

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MOOREBOE

Contributions from Individuals

Pg 1 of 2

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)

SHANNON 4 MOORE ED

2. ID Number

076309

3. Contributor Information

Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
THOMAS F BEDDOW 19 EDINBURGH LN PINEHURST, NC 28374		RETIRED	
		c. Employer's Name/Specific Field	
		3M COMPANY	
e. Election Sum to Date	\$ 500.00		

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		04/01/2022	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information

Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
WILLIAM TOM BRADY PO BOX 1466 CARTHAGE, NC 28327		NOT CURRENTLY EMPLOYED	
		c. Employer's Name/Specific Field	
		NOT CURRENTLY EMPLOYED	
e. Election Sum to Date	\$ 500.00		

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		04/01/2022	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information

Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
LAWRENCE DEMASTUS 526 GABRIEL LN ABERDEEN, NC 28315		NOT CURRENTLY EMPLOYED	
		c. Employer's Name/Specific Field	
		NOT CURRENTLY EMPLOYED	
e. Election Sum to Date	\$ 300.00		

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		04/07/2022	\$ 300.00
<input type="checkbox"/>			RECEIVED		\$
<input type="checkbox"/>					\$

MAY 07 2022

4. Total only this Page \$ 1,300.00

5. Total of ALL CRO-1210 Pages **MOOREBOF** \$ 2,450.00
(This line must be on line 6 of Detailed Summary Page CRO-1100)

Contributions from Individuals

Pg 2 of 2

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) SHANNON 4 MOORE ED				2. ID Number <i>07L309</i>	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) THOMAS LOSAPIO 3308 SEVEN LAKES WEST WEST END, NC 27376			b. Job Title/Profession NOT CURRENTLY EMPLOYED	d. Comments c. Employer's Name/Specific Field NOT CURRENTLY EMPLOYED	
				e. Election Sum to Date \$ 150.00	
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		03/10/2022	\$ 150.00
<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) MICHAEL SZYNSKI 570 LEGACY LAKES WAY ABERDEEN, NC 28315			b. Job Title/Profession OPHTHOMOLOGIST	d. Comments c. Employer's Name/Specific Field SELF	
				e. Election Sum to Date \$ 1,000.00	
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		01/31/2022	\$ 1,000.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page \$ 1,150.00					
5. Total of ALL CRO-1210 Pages \$ 2,450.00 <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					

CRO-1210

NC State Board of Elections

April 2007

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MOORE BOE

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) SHANNON 4 MOORE ED		2. ID Number 076309		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone <small>(include city, state, & zip)</small>				
MOORE*COUNTY REPUBLICAN PARTY PO BOX 4414 PINEHURST, NC 28374				
b. Comments c. Election Sum to Date \$ 1,000.00				
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount
A	Check		04/01/2022	\$ 1,000.00
				\$
				\$
4. Total only this Page			\$ 1,000.00	
5. Total of ALL CRO-1220 Pages <i>(This line must be on line 7 of Detailed Summary Page CRO-1100)</i>			\$ 1,000.00	

CRO-1220

NC State Board of Elections

April 2007

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Disbursements

Amendment
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

1. Committee Full Name (and Fund if applicable) SHANNON 4 MOORE ED		2. ID Number 076302			
3. Type of Disbursement <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					
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%; vertical-align: top;"> a. Full Name, Mailing Address & Phone (include city, state, & zip) MICHAEL FREIDEL 2323 SEVEN LAKES SOUTH WEST END, NC 27376 </td> <td style="width: 20%; vertical-align: top;"> b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: </td> <td style="width: 40%; vertical-align: top;"> d. Comments e. Election Sum to Date \$ 80.00 </td> </tr> </table>			a. Full Name, Mailing Address & Phone (include city, state, & zip) MICHAEL FREIDEL 2323 SEVEN LAKES SOUTH WEST END, NC 27376	b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	d. Comments e. Election Sum to Date \$ 80.00
a. Full Name, Mailing Address & Phone (include city, state, & zip) MICHAEL FREIDEL 2323 SEVEN LAKES SOUTH WEST END, NC 27376	b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	d. Comments e. Election Sum to Date \$ 80.00			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
A	Check	C	03/25/2022	\$ 80.00	MEET & GREET
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) STAPLES 290 TURNER STREET SOUTHERN PINES, NC 18287		b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		d. Comments e. Election Sum to Date \$ 58.07	
A	Check	B	03/16/2022	\$ 58.07	DONOR ENV
				\$	
5. Total only this Page					\$ 138.07
6. Total of ALL CRO-1310 Pages <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>					\$ 138.07
7. Purpose Codes (List detailed expenditure code in (h.) above)					
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		
O* Other					
* Codes require detailed explanation in required remarks field (k)					

CRO-1310

NC State Board of Elections

December 2009

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MOORE BOE

Aggregated Non-Media Expenditures

Page 1 of 1Amendment
 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		
SHANNON 4 MOORE ED				876309		
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	A	Draft	O	02/24/2022	\$ 23.99	PRINTED CHECKS
<input type="checkbox"/> Remove						
4. Total only this Page				\$ 23.99		
5. Total of ALL CRO-1315 Pages <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>				\$ 23.99		
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			

CRO-1315

NC State Board of Elections

December 2009

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

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MOORE BOE

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	
SHANNON 4 MOORE ED			076309	
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip) SHANNON DAVIS 113 CHEEK LN CARTHAGE, NC 28327			d. Type of Committee <input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party	g. Comments
			e. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	h. Original Receipt Date 04/01/2022
				i. Original Receipt Amount \$ 14.98
b. Job Title/Profession		c. Employer's Name/Specific Field	f. Purpose Code	j. Election Sum to Date
			P	\$ 47.00
k. Account Code	l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount
A	Check	NAME TAGS	04/01/2022	\$ 14.98
4. Total only this Page \$ 14.98				
5. Total of ALL CRO-1320 Pages \$ 14.98 <i>(This line must be on line 15 of Detailed Summary Page CRO-1100)</i>				
6. Purpose Codes (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)				

CRO-1320

NC State Board of Elections

July 2007

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MOORE BOE

Contributions to be ReimbursedPg 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	
SHANNON 4 MOORE ED		<i>076 309</i>	
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)	
SHANNON DAVIS 113 CHEEK LN CARTHAGE, NC 28327		SHANNON DAVIS 113 CHEEK LN CARTHAGE, NC 28327	
a. Contribution Description	b. Date (mm/dd/yyyy)	c. Credit Card Y/N	d. Amount
NAME TAGS	04/01/2022	N	\$ 14.98
4. Total only this Page		\$ 14.98	
5. Total of ALL CRO-1215a Pages <i>(This line goes in line 28 of Detailed Summary Page CRO-1100)</i>		\$ 14.98	

CRO-1215

NC State Board of Elections

December 2007

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