

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.

RECEIVED

1. Committee Information

a. Full Name	c. ID Number		
Committee to Elect Steve Johnson JAN 10 2024			
b. Mailing Address (include City, State and Zip Code)	d. Date Filed		
3 Lochman Ct Pinehurst, NC, 28374	1-12-24		
MOORE BOE	e. Phone Number		
	910-723-0728		

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2024	1-4-24	1-12-24	steven Edward Johnson

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

11. Account Information	11. Account Information
a. Financial Institution Full Name	a. Financial Institution Full Name
Trust	
b. Purpose	c. Account Code
Final for BOE Election	01
d. Period Begin Balance	
\$ 700.00	\$

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 of Elections.

Steve Johnson

Printed Name of Signer

Ats

Signature of Appointed Treasurer

1-12-24

Date

FOR OFFICE USE ONLY

Date Received:	1/12/24	Employee:		Delivery Method
Date Postmarked:		Employee:		<input type="checkbox"/> Normal Mail
Date Scanned:		Employee:		<input type="checkbox"/> Registered Mail
Date Data Entered:		Employee:		<input checked="" type="checkbox"/> Hand Delivered
				<input type="checkbox"/> Electronically Filed
				<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
Committee to Elect Steve Johnson	Organizational	
Start of Election Cycle: January 1, 2024	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	\$ 700	\$ 700
RECEIPTS		
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 700	\$ 700
6) Contributions from Individuals (CRO-1210)	\$	\$
7) 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)	\$	\$
11e) Exempt Purchase Price Sales (CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$	\$
EXPENDITURES		
13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$	\$
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)	\$	\$
16) Refunds/Reimbursements from the Committee (CRO-1320)	\$	\$
17) In-Kind Contributions (CRO-1510)	\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$	\$
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$	\$
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)	\$	\$

Contributions from Individuals

Pg _____ of _____

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	
<i>Committee to Elect Steve Johnson</i>			
3. Contributor Information		<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Remove
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
<i>Steven Edward Johnson 3 Lochmaw Ct Pinehurst, NC, 28374</i>		<i>STEM Specialist</i>	
c. Employer's Name/Specific Field		e. Election Sum to Date	
		\$ 700	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description
<input type="checkbox"/>	01	<i>Bank Transfer</i>	
<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
c. Employer's Name/Specific Field		e. Election Sum to Date	
		\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description
<input type="checkbox"/>			
<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
c. Employer's Name/Specific Field		e. Election Sum to Date	
		\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
4. Total only this Page		\$ 700	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)		\$ 700	