

# 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
COMMITTEE TO ELECT STEVE JOHNSON		
b. Mailing Address (include City, State and Zip Code)		d. Date Filed
PO BOX 4594 PINEHURST, NC 28374		07/10/2024
		e. Phone Number
		(910) 723-0128

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2024	02/18/2024	06/30/2024	STEVE JOHNSON

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	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 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)	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	TRUIST	a. Financial Institution Full Name	
b. Purpose	c. Account Code	b. Purpose	c. Account Code
RECEIPTS AND EXPENSES	01		
	d. Period Begin Balance		d. Period Begin Balance
	\$ 4,377.63		\$

## 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

Steve Johnson  
Printed Name of Signer

Mo  
Signature of Appointed Treasurer

07/10/2024  
Date

## FOR OFFICE USE ONLY

Date Received: \_\_\_\_\_ Employee: \_\_\_\_\_  
 Date Postmarked: \_\_\_\_\_ Employee: \_\_\_\_\_  
 Date Scanned: \_\_\_\_\_ Employee: \_\_\_\_\_  
 Date Data Entered: \_\_\_\_\_ 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

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

Amendment  
 Yes  No

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT STEVE JOHNSON		<b>2. Type of Report</b> 2024 Second Quarter	<b>3. ID Number</b>
<b>Start of Election Cycle: January 1, 2023</b>		<b>Total this Reporting Period</b>	<b>Total this Election Cycle</b>
<b>4) Cash on Hand at Start</b>		\$ 0.00	\$ 0.00
<b>RECEIPTS</b>			
<b>5) Aggregated Contributions from Individuals</b> (CRO-1205)		\$ 670.00	\$ 670.00
<b>6) Contributions from Individuals</b> (CRO-1210)		\$ 1,780.00	\$ 1,780.00
<b>7) Contributions from Political Party Committees</b> (CRO-1220)		\$ 0.00	\$ 0.00
<b>8) Contributions from Other Political Committees</b> (CRO-1230)		\$ 0.00	\$ 0.00
<b>9) Loan Proceeds</b> (CRO-1410)		\$ 0.00	\$ 0.00
<b>10) Refunds/Reimbursements to the Committee</b> (CRO-1240)		\$ 0.00	\$ 0.00
<b>11) Other Receipt Sources</b>			
<b>11a) Interest on Bank Accounts</b> (CRO-1250)		\$ 0.00	\$ 0.00
<b>11b) Contributions from Not-For-Profit Organizations</b> (CRO-1250)		\$ 0.00	\$ 0.00
<b>11c) Outside Sources of Income</b> (CRO-1250)		\$ 0.00	\$ 0.00
<b>11d) Legal Expense Fund - Other Sources</b> (CRO-1270)		\$ 0.00	\$ 0.00
<b>11e) Exempt Purchase Price Sales</b> (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)		\$ 2,450.00	\$ 2,450.00
<b>EXPENDITURES</b>			
<b>13) Disbursements</b>			
<b>13a) Operating Expenditures</b> (CRO-1310)		\$ 3,259.36	\$ 3,259.36
<b>13b) Contributions to Candidates/Political Committees</b> (CRO-1310)		\$ 0.00	\$ 0.00
<b>13c) Coordinated Party Expenditures</b> (CRO-1310)		\$ 0.00	\$ 0.00
<b>14) Aggregated Non-Media Expenditures</b> (CRO-1315)		\$ 240.74	\$ 240.74
<b>15) Loan Repayments</b> (CRO-1420)		\$ 0.00	\$ 0.00
<b>16) Refunds/Reimbursements from the Committee</b> (CRO-1320)		\$ 0.00	\$ 0.00
<b>17) In-Kind Contributions</b> (CRO-1510)		\$ 270.00	\$ 270.00
<b>18) TOTAL EXPENDITURES</b> (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 3,770.10	\$ 3,770.10
<b>19) Cash on Hand at End</b> (Add lines 4 and 12 together, then subtract line 18)		\$ (1,320.10)	\$ (1,320.10)
<b>ADDITIONAL INFORMATION</b>			
<b>20) Non-Monetary Gifts Given to Other Committees</b> (CRO-1330)		\$ 0.00	
<b>21) Outstanding Loans (incl. ones from other campaigns)</b> (CRO-1430)		\$ 0.00	
<b>22) Debts and Obligations owed by the Committee</b> (CRO-1610)		\$ 0.00	
<b>23) Debts and Obligations owed to the Committee</b> (CRO-1620)		\$ 0.00	
<b>24) Account Transfers Within the Committee</b> (CRO-1720)		\$ 0.00	
<b>25) Administrative Support</b> (CRO-1710)		\$ 0.00	\$ 0.00
<b>26) Forgiven Loans</b> (CRO-1440)		\$ 0.00	\$ 0.00
<b>27) 48-Hour Notice Reports Sum</b> (CRO-2220)		\$ 0.00	\$ 0.00
<b>28) Contributions to be Refunded</b> (CRO-1215)		\$ 0.00	\$ 0.00

RECEIVED  
JUL 10 2008  
MOORE BOE

# Aggregated Contributions from Individuals

Page 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	
COMMITTEE TO ELECT STEVE JOHNSON					
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 <input type="checkbox"/> Remove	01	Electric Funds Tran		02/20/2024	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Electric Funds Tran		05/25/2024	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Electric Funds Tran		02/22/2024	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Electric Funds Tran		02/29/2024	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Electric Funds Tran		02/22/2024	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		06/09/2024	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Electric Funds Tran		05/19/2024	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		02/22/2024	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		02/24/2024	\$ 30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	In-Kind	SNACKS AND DRINKS - MEET AND GREET	02/26/2024	\$ 40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		02/22/2024	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	In-Kind	COOKIES FOR MEET AND GREET	02/27/2024	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Electric Funds Tran		03/26/2024	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Electric Funds Tran		03/26/2024	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Electric Funds Tran		02/29/2024	\$ 50.00
<b>4. Total only this Page</b>					\$ 670.00
<b>5. Total of ALL CRO-1205 Pages</b> <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$ 670.00

CRO-1205

NC State Board of Elections

April 2007

RECEIVED  
JUL 10 2007  
MOORE BOE

# 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)				2. ID Number	
COMMITTEE TO ELECT STEVE JOHNSON					
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
				PEDIATRICIAN	
CHRISTOPH DIASIO 10 SPUR RD PINEHURST, NC 28374				c. Employer's Name/Specific Field	e. Election Sum to Date
				SANDHILLS PEDIATRICS	\$ 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"/>	01	Electric Funds Tran		02/25/2024	\$ 250.00
<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
				DIR OF OPERATIONS	
ERIN HECKETHORN 6 BRUNSWICK LN PINEHURST, NC 28374				c. Employer's Name/Specific Field	e. Election Sum to Date
				CARLE HEALTH	\$ 120.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	In-Kind	SNACKS AND DRINKS - MEET AND GREET	02/22/2024	\$ 120.00
<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
				RETIRED	
ED JOHNSON 12758 CASCADES CT HOBE SOUND, FL 33455				c. Employer's Name/Specific Field	e. Election Sum to Date
				NA	\$ 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"/>	01	Check		05/29/2024	\$ 1,000.00
<input type="checkbox"/>					\$
<input type="checkbox"/>			RECEIVED		\$
4. Total only this Page					\$ 1,370.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 1,780.00

# Contributions from Individuals

Pg 2 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)			2. ID Number		
COMMITTEE TO ELECT STEVE JOHNSON					
3. Contributor Information			<input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip)  KATHY LEUCK 11 CHATHAM LN PINEHURST, NC 28374			b. Job Title/Profession	d. Comments	
			RETIRED		
			c. Employer's Name/Specific Field		
			NA		
			e. Election Sum to Date		
			\$ 60.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	In-Kind	SNACKS AND DRINKS - MEET AND GREET HOST	03/06/2024	\$ 60.00
<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)  JULIE MITCHELL 120 SHORT RD PINEHURST, NC 28374			b. Job Title/Profession	d. Comments	
			RETIRED		
			c. Employer's Name/Specific Field		
			NA		
			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"/>	01	Check		04/08/2024	\$ 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)  CLEMENT MONROE 185 SHORT RD PINEHURST, NC 28374			b. Job Title/Profession	d. Comments	
			DENTIST		
			c. Employer's Name/Specific Field		
			DRS MONROE AND MONROE DDS PA		
			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"/>	01	Electric Funds Tran	<i>RECEIVED</i>	05/15/2024	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>			<i>11/10</i>		\$
4. Total only this Page					\$ 410.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 1,780.00

# Disbursements

Pg 1 of 3

Amendment  
 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> COMMITTEE TO ELECT STEVE JOHNSON		<b>2. ID Number</b>																					
<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> <input type="checkbox"/> Add <input type="checkbox"/> Remove <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 colspan="2">b. Coordinated Committee Name</td> <td>d. Comments</td> </tr> <tr> <td colspan="2"></td> <td></td> </tr> <tr> <td rowspan="2" style="text-align: center; vertical-align: middle; height: 100px;">AMAZON 410 TERRY AVE N SEATTLE, WA 98109</td> <td colspan="2">c. Level Registered (Specify)</td> <td rowspan="2" style="text-align: center; vertical-align: middle;">\$ 661.16</td> </tr> <tr> <td><input type="checkbox"/> Federal</td> <td><input type="checkbox"/> County:</td> </tr> <tr> <td></td> <td><input type="checkbox"/> State</td> <td><input type="checkbox"/> Municipality:</td> <td>e. Election Sum to Date</td> </tr> <tr> <td colspan="3"></td> <td></td> </tr> </table>			a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name		d. Comments				AMAZON 410 TERRY AVE N SEATTLE, WA 98109	c. Level Registered (Specify)		\$ 661.16	<input type="checkbox"/> Federal	<input type="checkbox"/> County:		<input type="checkbox"/> State	<input type="checkbox"/> Municipality:	e. Election Sum to Date				
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name			d. Comments																			
AMAZON 410 TERRY AVE N SEATTLE, WA 98109	c. Level Registered (Specify)		\$ 661.16																				
	<input type="checkbox"/> Federal	<input type="checkbox"/> County:																					
	<input type="checkbox"/> State	<input type="checkbox"/> Municipality:	e. Election Sum to Date																				
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks																		
01	Electric Funds Tran	O	02/23/2024	\$ 141.22	TENT AND WEIGHTS																		
01	Electric Funds Tran	O	03/06/2024	\$ 144.42	CANOPY TENT AND WEIGHTS																		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			b. Coordinated Committee Name	d. Comments																			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		c. Level Registered (Specify)		\$ 661.16																			
		<input type="checkbox"/> Federal	<input type="checkbox"/> County:																				
AMAZON 410 TERRY AVE N SEATTLE, WA 98109		<input type="checkbox"/> State	<input type="checkbox"/> Municipality:	e. Election Sum to Date																			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks																		
01	Electric Funds Tran	O	04/16/2024	\$ 325.38	METAL STAKES																		
				\$																			
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			b. Coordinated Committee Name	d. Comments																			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		c. Level Registered (Specify)		\$ 73.83																			
		<input type="checkbox"/> Federal	<input type="checkbox"/> County:																				
CHICK FIL A 265 TURNER ST ABERDEEN, NC 28315		<input type="checkbox"/> State	<input type="checkbox"/> Municipality:	e. Election Sum to Date																			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks																		
01	Debit Card	O	03/05/2024	\$ 73.83	FOOD FOR VOLUNTEERS																		
				\$																			
<b>5. Total only this Page</b>			<b>RECEIVED</b>		\$ 684.85																		
<b>6. Total of ALL CRO-1310 Pages</b>					\$ 3,259.36																		
<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>																							
<b>7. Purpose Codes</b> (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)																							

# Disbursements

Amendment  
 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> COMMITTEE TO ELECT STEVE JOHNSON		<b>2. ID Number</b>																																	
<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> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td colspan="2">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">FACEBOOK 1 HACKER WAY MENLO PARK, CA 94025</td> <td>c. Level Registered (Specify)</td> <td></td> </tr> <tr> <td colspan="2"></td> <td> <input type="checkbox"/> Federal <input type="checkbox"/> County:  <input type="checkbox"/> State <input type="checkbox"/> Municipality:         </td> <td>e. Election Sum to Date \$ 481.11</td> </tr> <tr> <td colspan="2"></td> <td></td> <td></td> </tr> <tr> <td>f. Account Code</td> <td>g. Form of Payment</td> <td>h. Purpose Code</td> <td>i. Date (mm/dd/yyyy)</td> </tr> <tr> <td>01</td> <td>Electric Funds Tran</td> <td>A</td> <td>03/06/2024</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td>\$</td> </tr> </table>				a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name	d. Comments	FACEBOOK 1 HACKER WAY MENLO PARK, CA 94025		c. Level Registered (Specify)				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Sum to Date \$ 481.11					f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	01	Electric Funds Tran	A	03/06/2024								\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name	d. Comments																																
FACEBOOK 1 HACKER WAY MENLO PARK, CA 94025		c. Level Registered (Specify)																																	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Sum to Date \$ 481.11																																
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)																																
01	Electric Funds Tran	A	03/06/2024																																
			\$																																
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td colspan="2">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">STRIPE 354 OYSTER POINT BLVD S SAN FRANCISCO, CA 94080</td> <td>c. Level Registered (Specify)</td> <td></td> </tr> <tr> <td colspan="2"></td> <td> <input type="checkbox"/> Federal <input type="checkbox"/> County:  <input type="checkbox"/> State <input type="checkbox"/> Municipality:         </td> <td>e. Election Sum to Date \$ 221.97</td> </tr> <tr> <td colspan="2"></td> <td></td> <td></td> </tr> <tr> <td>f. Account Code</td> <td>g. Form of Payment</td> <td>h. Purpose Code</td> <td>i. Date (mm/dd/yyyy)</td> </tr> <tr> <td>01</td> <td>Electric Funds Tran</td> <td>O</td> <td>05/25/2024</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td>\$</td> </tr> </table>				a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name	d. Comments	STRIPE 354 OYSTER POINT BLVD S SAN FRANCISCO, CA 94080		c. Level Registered (Specify)				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Sum to Date \$ 221.97					f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	01	Electric Funds Tran	O	05/25/2024								\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name	d. Comments																																
STRIPE 354 OYSTER POINT BLVD S SAN FRANCISCO, CA 94080		c. Level Registered (Specify)																																	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Sum to Date \$ 221.97																																
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)																																
01	Electric Funds Tran	O	05/25/2024																																
			\$																																
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td colspan="2">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">THE PILOT 145 W PENNSYLVANIA AVE SOUTHERN PINES, NC 28387</td> <td>c. Level Registered (Specify)</td> <td></td> </tr> <tr> <td colspan="2"></td> <td> <input type="checkbox"/> Federal <input type="checkbox"/> County:  <input type="checkbox"/> State <input type="checkbox"/> Municipality:         </td> <td>e. Election Sum to Date \$ 592.75</td> </tr> <tr> <td colspan="2"></td> <td></td> <td></td> </tr> <tr> <td>f. Account Code</td> <td>g. Form of Payment</td> <td>h. Purpose Code</td> <td>i. Date (mm/dd/yyyy)</td> </tr> <tr> <td>01</td> <td>Electric Funds Tran</td> <td>A</td> <td>02/28/2024</td> </tr> <tr> <td>01</td> <td>Electric Funds Tran</td> <td>A</td> <td>02/29/2024</td> </tr> <tr> <td></td> <td></td> <td></td> <td>\$</td> </tr> </table>				a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name	d. Comments	THE PILOT 145 W PENNSYLVANIA AVE SOUTHERN PINES, NC 28387		c. Level Registered (Specify)				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Sum to Date \$ 592.75					f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	01	Electric Funds Tran	A	02/28/2024	01	Electric Funds Tran	A	02/29/2024				\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name	d. Comments																																
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f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)																																
01	Electric Funds Tran	A	02/28/2024																																
01	Electric Funds Tran	A	02/29/2024																																
			\$																																
5. Total only this Page \$ 1,295.83																																			
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> \$ 3,259.36																																			
<b>7. Purpose Codes</b> (List detailed expenditure code in (h.) above) <table border="1"> <tr> <td>A* - Media</td> <td>B* - Printing</td> <td>C* - Fundraising</td> <td>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">O* Other</td> </tr> <tr> <td colspan="4">* Codes require detailed explanation in required remarks field (k)</td> </tr> </table>				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)															
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# Disbursements

Amendment  
 Pg 3 of 3  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>		<b>2. ID Number</b>			
COMMITTEE TO ELECT STEVE JOHNSON					
<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> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name	d. Comments		
VISTAPRINT 95 HAYDEN AVE LEXINGTON, MA 02421					
		c. Level Registered (Specify)			
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Sum to Date		
			\$ 1,326.67		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	Electric Funds Tran	B	04/16/2024	\$ 170.09	POSTCARDS
01	Electric Funds Tran	B	04/16/2024	\$ 1,108.59	YARD SIGNS
<b>5. Total only this Page</b>				\$ 1,278.68	
<b>6. Total of ALL CRO-1310 Pages</b>				\$ 3,259.36	
<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>					
<b>7. Purpose Codes</b> (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)				

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NC State Board of Elections

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# 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		
COMMITTEE TO ELECT STEVE JOHNSON						
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	01	Electric Funds Tran	O	03/09/2024	\$ 9.62	TENT REPLACEMENT
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Electric Funds Tran	O	03/16/2024	\$ 40.52	THANK YOU CARDS
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Debit Card	O	02/29/2024	\$ 18.18	TENT REPAIR
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Electric Funds Tran	O	03/31/2024	\$ 48.00	EMAIL MARKETING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Electric Funds Tran	O	03/31/2024	\$ 10.00	TRIAL FOR TOOLS
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Debit Card	O	03/02/2024	\$ 17.79	FOOD FOR VOLUNTEERS
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Debit Card	O	03/04/2024	\$ 19.17	TENT STAKES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Electric Funds Tran	B	05/18/2024	\$ 22.47	STICKERS
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Electric Funds Tran	O	03/21/2024	\$ 7.00	BANK FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Electric Funds Tran	B	04/16/2024	\$ 47.99	BUSINESS CARDS
4. Total only this Page				\$ 240.74		
5. Total of ALL CRO-1315 Pages <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>				\$ 240.74		
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)

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NC State Board of Elections

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# In-Kind Contributions

Pg 1 of 2

Amendment  
 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.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
COMMITTEE TO ELECT STEVE JOHNSON			
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  Aggregated Individual Contribution		<b>b. Type of Contributor</b> <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>c. Comments</b>  <b>d. Election Sum to Date</b> \$ 40.00	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
SNACKS AND DRINKS - MEET AND GREET HOST		02/26/2024	\$ 40.00
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  Aggregated Individual Contribution		<b>b. Type of Contributor</b> <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>c. Comments</b> <b>d. Election Sum to Date</b> \$ 50.00	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
COOKIES FOR MEET AND GREET		02/27/2024	\$ 50.00
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  ERIN HECKETHORN 6 BRUNSWICK LN PINEHURST, NC 28374		<b>b. Type of Contributor</b> <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>c. Comments</b> <b>d. Election Sum to Date</b> \$ 120.00	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
SNACKS AND DRINKS - MEET AND GREET		02/22/2024	\$ 120.00
			\$
			\$
4. Total only this Page			\$ 210.00
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)			\$ 270.00

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**In-Kind Contributions**Pg 2 of 2 Amendment  
 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>	
COMMITTEE TO ELECT STEVE JOHNSON			
<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. Type of Contributor</b> <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>c. Comments</b>     <b>d. Election Sum to Date</b>  \$ 60.00
<b>e. Description</b> SNACKS AND DRINKS - MEET AND GREET HOST		<b>f. Date (mm/dd/yyyy)</b> 03/06/2024	<b>g. Fair Market Amount</b>    \$ 60.00
<b>4. Total only this Page</b>		\$ 60.00	
<b>5. Total of ALL CRO-1510 Pages</b> <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		\$ 270.00	

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NC State Board of Elections

December 2007

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