

# Disclosure Report Cover

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.

**COPY**  
FORSYTH COUNTY

Amendment

☐ Yes ☐ No

|   |   |   |   |
|---|---|---|---|
| <b>I. Committee Information</b>   |   |   |   |
| a. Full Name<br><u>Committee to Elect Michael Owens</u>   |   | c. ID Number<br><u>2013 JUL 19 PM 1:49</u>  |   |
| b. Mailing Address (include City, State and Zip Code)<br><u>4250 Salem Landing Dr.</u><br><u>Winston-Salem, NC 27104</u>  |   | d. Date Filed<br><u>7-19-13</u>   |   |
|   |   | e. Phone Number<br><u>736-926-1097</u>  |   |
| 2. Report Year<br><u>2013</u>   | 3. Period Start Date (mm/dd/yyyy)<br><u>7-10-13</u> | 4. Period End Date (mm/dd/yyyy)<br><u>7-18-13</u>   | 5. Treasurer Full Name<br><u>Michael R. Owens</u> |
| 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<br><input type="checkbox"/> PAC<br><input type="checkbox"/> Independent Expenditure<br><input type="checkbox"/> Legal Expense Fund<br><input type="checkbox"/> Party<br><input type="checkbox"/> Referendum<br><input type="checkbox"/> Joint Fundraiser   |   | <b>Municipal</b><br><input checked="" type="checkbox"/> Organizational<br><input type="checkbox"/> Thirty-five day<br><input type="checkbox"/> Pre-primary<br><input type="checkbox"/> Pre-election<br><input type="checkbox"/> Pre-runoff<br><input type="checkbox"/> Semi-annual<br><input type="checkbox"/> Mid Year<br><input type="checkbox"/> Year End<br><input type="checkbox"/> Final<br><input type="checkbox"/> Special<br><b>State/County</b><br><input type="checkbox"/> Organizational<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> First<br><input type="checkbox"/> Second<br><input type="checkbox"/> Third<br><input type="checkbox"/> Fourth<br><input type="checkbox"/> Semi-annual<br><input type="checkbox"/> Mid Year<br><input type="checkbox"/> Year End<br><input type="checkbox"/> Final<br><input type="checkbox"/> Special<br><b>Referendum</b><br><input type="checkbox"/> Organizational<br><input type="checkbox"/> Pre-referendum<br><input type="checkbox"/> Final<br><input type="checkbox"/> Supplemental Final<br><input type="checkbox"/> Annual<br><input type="checkbox"/> Special |   |
| 7. Type of Fund (if applicable, check one)  |   | 10. Special Report Name   |   |
| <input type="checkbox"/> Booster Fund<br><input type="checkbox"/> Building Fund<br><input type="checkbox"/> Other:  |   |   |   |
| 8. Number of Fundraisers this Report  |   |   |   |
|   |   |   |   |
| <b>II. Account Information</b>  |   | <b>III. Account Information</b>   |   |
| a. Financial Institution Full Name<br><u>Bank of North Carolina</u>   |   | a. Financial Institution Full Name  |   |
| b. Purpose<br><u>Campaign</u><br><u>Finance</u>   | c. Account Code<br><u>RAGH 1975</u>                 | b. Purpose  | c. Account Code                                   |
|   | d. Period Begin Balance<br><u>\$ 0</u>              |   | d. Period Begin Balance<br><u>\$</u>              |
| <b>CERTIFICATION</b>  |   |   |   |
| 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. |   |   |   |
| <u>Michael R. Owens</u><br>Printed Name of Signer   |   | <u>M. Owens</u><br>Signature of Appointed Treasurer   |   |
|   |   | <u>7-19-13</u><br>Date  |   |
| <b>FOR OFFICE USE ONLY</b>  |   |   |   |
| Date Received:<br><u>7/19/13</u>  | Employee:<br><u>Judy Spear</u>                      | Delivery Method<br><input type="checkbox"/> Normal Mail<br><input type="checkbox"/> Registered Mail<br><input checked="" type="checkbox"/> Hand Delivered<br><input type="checkbox"/> Electronically Filed  |   |
| Date Postmarked:  | Employee:   | <input type="checkbox"/> Signer has not received mandatory training   |   |
| Date Scanned:   | Employee:   |   |   |
| Date Data Entered:  | Employee:   |   |   |
| <b>Please Note:</b> This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.<br>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 Michael Owens   |  |                             |  |                           |  |
| Start of Election Cycle: January 1, _____                                    |  | Total this Reporting Period |  | Total this Election Cycle |  |
| 4) Cash on Hand at Start   |  | \$ 0                        |  | \$ 0                      |  |
| <b>RECEIPTS</b>  |  |                             |  |                           |  |
| 5) Aggregated Contributions from Individuals (CRO-1205)                      |  | \$                          |  | \$                        |  |
| 6) Contributions from Individuals (CRO-1210)                                 |  | \$ 5.00                     |  | \$ 5.00                   |  |
| 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) |  | \$ 5.00                     |  | \$ 5.00                   |  |
| <b>EXPENDITURES</b>  |  |                             |  |                           |  |
| 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)   |  | \$ 5.00                     |  | \$ 5.00                   |  |
| 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)          |  | \$ 5.00                     |  | \$ 5.00                   |  |
| 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) |  | \$ 0                        |  | \$ 0                      |  |
| <b>ADDITIONAL INFORMATION</b>  |  |                             |  |                           |  |
| 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

|  |                        |                           |  |                             |   |  |
|--|------------------------|---------------------------|--|-----------------------------|---|--|
| <b>1. Committee Full Name (and Fund if applicable)</b>   |                        |                           |  |                             | <b>2. ID Number</b>                       |  |
| Committee to Elect Michael Owens   |                        |                           |  |                             |   |  |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove           |                        |                           |  |                             |   |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                         |                        |                           | <b>b. Job Title/Profession</b>           |                             | <b>d. Comments</b>                        |  |
|  |                        |                           | Unemployed                               |                             |   |  |
| Michael R. Owens<br>4250 Salem Landing Dr.<br>Winston-Salem, NC 27101                                    |                        |                           | <b>c. Employer's Name/Specific Field</b> |                             | <b>e. Election Sum to Date</b><br>\$ 5.00 |  |
|  |                        |                           |  |                             |   |  |
| <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"/>   |                        | Cash                      | Filing Fee                               | 07-10-2013                  | \$ 5.00                                   |  |
| <input type="checkbox"/>   |                        |                           |  |                             | \$  |  |
| <input type="checkbox"/>   |                        |                           |  |                             | \$  |  |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove           |                        |                           |  |                             |   |  |
|  |                        |                           | <b>b. Job Title/Profession</b>           |                             | <b>d. Comments</b>                        |  |
|  |                        |                           |  |                             |   |  |
|  |                        |                           | <b>c. Employer's Name/Specific Field</b> |                             | <b>e. Election Sum to Date</b><br>\$      |  |
|  |                        |                           |  |                             |   |  |
| <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"/>   |                        |                           |  |                             | \$  |  |
| <input type="checkbox"/>   |                        |                           |  |                             | \$  |  |
| <input type="checkbox"/>   |                        |                           |  |                             | \$  |  |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove           |                        |                           |  |                             |   |  |
|  |                        |                           | <b>b. Job Title/Profession</b>           |                             | <b>d. Comments</b>                        |  |
|  |                        |                           |  |                             |   |  |
|  |                        |                           | <b>c. Employer's Name/Specific Field</b> |                             | <b>e. Election Sum to Date</b><br>\$      |  |
|  |                        |                           |  |                             |   |  |
| <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"/>   |                        |                           |  |                             | \$  |  |
| <input type="checkbox"/>   |                        |                           |  |                             | \$  |  |
| <input type="checkbox"/>   |                        |                           |  |                             | \$  |  |
| <b>4. Total only this Page</b>   |                        |                           |  |                             | \$ 5.00                                   |  |
| <b>5. Total of ALL CRO-1210 Pages</b><br>(This line must be on line 6 of Detailed Summary Page CRO-1100) |                        |                           |  |                             | \$ 5.00                                   |  |

# In-Kind Contributions

Pg \_\_\_\_ of \_\_\_\_ 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 Michael Owens   |  |   |                       |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove            |  |   |                       |
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)                              |  | b. Type of Contributor  |                       |
| Michael R. Owens<br>4250 Salem Landing Dr.<br>Winston-Salem, NC 27101                              |  | <input type="checkbox"/> Individual<br><input type="checkbox"/> Candidate<br><input type="checkbox"/> Party<br><input type="checkbox"/> PAC<br><input type="checkbox"/> Referendum<br><input type="checkbox"/> Other Receipt Source |                       |
|  |  | c. Comments   |                       |
|  |  | d. Election Sum to Date   |                       |
|  |  | \$ 5.00   |                       |
| e. Description   |  | f. Date (mm/dd/yyyy)  | g. Fair Market Amount |
| Filing Fee   |  | 07-10-2013  | \$ 5.00               |
|  |  |   | \$                    |
|  |  |   | \$                    |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove            |  |   |                       |
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)                              |  | b. Type of Contributor  |                       |
|  |  | <input type="checkbox"/> Individual<br><input type="checkbox"/> Candidate<br><input type="checkbox"/> Party<br><input type="checkbox"/> PAC<br><input type="checkbox"/> Referendum<br><input type="checkbox"/> Other Receipt Source |                       |
|  |  | c. Comments   |                       |
|  |  | d. Election Sum to Date   |                       |
|  |  | \$  |                       |
| e. Description   |  | f. Date (mm/dd/yyyy)  | g. Fair Market Amount |
|  |  |   | \$                    |
|  |  |   | \$                    |
|  |  |   | \$                    |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove            |  |   |                       |
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)                              |  | b. Type of Contributor  |                       |
|  |  | <input type="checkbox"/> Individual<br><input type="checkbox"/> Candidate<br><input type="checkbox"/> Party<br><input type="checkbox"/> PAC<br><input type="checkbox"/> Referendum<br><input type="checkbox"/> Other Receipt Source |                       |
|  |  | c. Comments   |                       |
|  |  | d. Election Sum to Date   |                       |
|  |  | \$  |                       |
| e. Description   |  | f. Date (mm/dd/yyyy)  | g. Fair Market Amount |
|  |  |   | \$                    |
|  |  |   | \$                    |
|  |  |   | \$                    |
| 4. Total only this Page  |  | \$ 5.00   |                       |
| 5. Total of ALL CRO-1510 Pages<br>(This line must be on line 17 of Detailed Summary Page CRO-1109) |  | \$ 5.00   |                       |