

COPY

Amendment
 Yes No

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

1. Committee Information	
a. Full Name Keith King Committee to Elect for City Council	c. ID Number 2013 SEP -3 PM 1:50
b. Mailing Address (include City, State and Zip Code) 418 N. Liberty Street Winston Salem NC 27101	d. Date Filed 9/3/13
	e. Phone Number 336-749-0365

2. Report Year 2013	3. Period Start Date (mm/dd/yy) 7/31/13	4. Period End Date (mm/dd/yy) 8/27/13	5. Treasurer Full Name Dawn Patterson Johnson
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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"/> Municipal	<input type="checkbox"/> State/County	<input type="checkbox"/> Referendum
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
<input type="checkbox"/> Legal Expense Fund		<input checked="" type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-runoff	<input checked="" type="checkbox"/> Third	<input type="checkbox"/> Annual
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input checked="" type="checkbox"/> Other:		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	10. Special Report Name
		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	
8. Number of Fundraisers this Report 0				

11. Account Information		11. Account Information	
a. Financial Institution Full Name BB & T	a. Financial Institution Full Name	b. Purpose Campaign Account for Receipts and Expenditures	c. Account Code K5757
b. Purpose	c. Account Code	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 2500.00 0		d. Period Begin Balance \$

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.

Dawn Patterson Johnson [Signature] 9/3/13
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY		Delivery Method	
Date Received: <u>9/3/2013</u>	Employee: <u>Judy Speas</u>	<input type="checkbox"/> Normal Mail	<input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training
Date Postmarked: _____	Employee: _____	<input type="checkbox"/> Registered Mail	
Date Scanned: _____	Employee: _____	<input type="checkbox"/> Signer has not received mandatory training	
Date Data Entered: _____	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	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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	
Keith King Committee to Elect for City Council			
Start of Election Cycle: January 1, _____		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 0	\$ 0
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)		\$	\$ 5.00
6) Contributions from Individuals (CRO-1210)		\$ 2500.00 2622.21	\$ 2500.00 2622.21
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)		\$	\$
11 e) Exempt Purchase Price Sales (CRO-1265)		\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 2622.21	\$ 5.00 2627.21
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$ 1750.00	\$ 1750.00
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)		\$ 2622.21 122.21	\$ 5127.21
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 1872.21	\$ 1877.21
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ +750.00	\$ +750.00
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-2200)		\$	\$
28) Contributions to be Refunded (CRO-1215)		\$	\$

Contributions from Individuals

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	
Keith King Committee to Elect for City Council						
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	
Keith King 418 N Liberty Street Winston Salem NC 27101			Owner			
			c. Employer's Name/Specific Field			
			Kingz Downtown Market			
					e. Election Sum to Date	
					\$ 23.49	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		Cash	Donation copies	8/9/13 8/6/13	\$ 23.49 2500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
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	
Keith King 418 N. Liberty Street Winston-Salem NC 27101			OWNER			
			c. Employer's Name/Specific Field			
			Kingz Downtown Market			
					e. Election Sum to Date	
					\$ 23.49	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		Cash	copies	8/5/13	\$ 23.49	
<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	
Keith King 418 N. Liberty Street Winston-Salem NC 27101			Owner			
			c. Employer's Name/Specific Field			
			Kingz Downtown			
					e. Election Sum to Date	
					\$ 65.62	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		Cash	Banner + Carsign	8/14/13	\$ 65.62	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 1260 \$ 47.08 -2500.00	
5. Total of ALL CRO-1210 Pages					26 22 21 \$ 4306.09 2500.00	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

\$ 4372.91 08

Contributions from Individuals

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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	
Keith King Committee to Elect for City Council							
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		
Keith King 418 N Liberty Street Winston Salem NC 27101			Owner				
			c. Employer's Name/Specific Field		e. Election Sum to Date		
			Kingz Downtown Market		\$ 2500.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	K5757	Cash Transfer of Funds	Donation	8/9/13	\$ 2500.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
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		
Keith King 418 N Liberty St Winston Salem NC			owner				
			c. Employer's Name/Specific Field		e. Election Sum to Date		
			Kingz Downtown Market		\$ -1750.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		Cash	Payroll	8/06/13	\$ -1750.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
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		
Keith King 418 N. Liberty St Winston-Salem NC 27101			owner				
			c. Employer's Name/Specific Field		e. Election Sum to Date		
			Kingz Downtown Market		\$ 9.61		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		Cash	Copies	8/17/13	\$ 9.61		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page				2509.61	\$ 4259.61	-2500.00	
5. Total of ALL CRO-1210 Pages				2620.21	\$ 4206.61	-2500.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

Disbursements

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)						2. ID Number	
Keith King Committee to Elect for City Council							
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Willetta Carter 5205 Mereledge CT Winston-Salem NC 27106 336-575-2916				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 1750.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	Check	E	8/26/13	\$ 1750.00	Campaign Manager		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
				\$			
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
				\$			
				\$			
5. Total only this Page						\$ 1750.00	
6. Total of ALL CRO-1310 Pages						\$ 1750.00	
<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>							
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)							

In-Kind Contributions

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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
Keith King Committee to Elect for City Council		
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Keith King 418 N. Liberty Street Winston Salem NC 27101	<input type="checkbox"/> Individual <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		d. Election Sum to Date
		\$ 2500.00
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Donation to Campaign from Candidate	8/9/13	\$ 2500.00
		\$
		\$
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Keith King 418 N Liberty Street Winston Salem NC 27101	<input type="checkbox"/> Individual <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		d. Election Sum to Date
		\$ 23.49
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Copies of petitions	8/6/13	\$ 23.49
		\$
		\$
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Keith King 418 N. Liberty Street Winston Salem NC 27101	<input type="checkbox"/> Individual <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		d. Election Sum to Date
		\$ 23.49
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Copies of petitions	8/5/13	\$ 23.49
		\$
		\$
4. Total only this Page		\$ 46.98
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 4372.21 000

2622.21
122.01

In-Kind Contributions

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
Keith King Committee to Elect for City Council		
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Keith King 418 N. Liberty Street Winston-Salem NC 27101	<input type="checkbox"/> Individual	
	<input checked="" type="checkbox"/> Candidate	
	<input type="checkbox"/> Party	
	<input type="checkbox"/> PAC	
	<input type="checkbox"/> Referendum	d. Election Sum to Date
	<input type="checkbox"/> Other Receipt Source	\$ <u>1750.00</u>
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Payroll for Campaign Manager- Willette Garter	8/26/13	\$ 1750.00
		\$
		\$
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Keith King 418 N Liberty Street Winston Salem NC 27101	<input type="checkbox"/> Individual	
	<input checked="" type="checkbox"/> Candidate	
	<input type="checkbox"/> Party	
	<input type="checkbox"/> PAC	
	<input type="checkbox"/> Referendum	d. Election Sum to Date
	<input type="checkbox"/> Other Receipt Source	\$ <u>9.61</u>
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Office Dept- Copies fo Survey and Petitions sheets	8/17/2013	\$ 9.61
		\$
		\$
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Keith King 418 N Libety Street r Winston Salem NC 27101	<input type="checkbox"/> Individual	
	<input checked="" type="checkbox"/> Candidate	
	<input type="checkbox"/> Party	
	<input type="checkbox"/> PAC	
	<input type="checkbox"/> Referendum	d. Election Sum to Date
	<input type="checkbox"/> Other Receipt Source	\$ <u>65.62</u>
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Staples- Banner and Car sign	8/14/2013	\$ 65.62
		\$
		\$
4. Total only this Page		\$ <u>4825.23</u> <u>75.23</u> <u>28</u>
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ <u>4372.21</u> <u>28</u>

\$ 2622.21
122.21