

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.

FORSYTH COUNTY

Committee Information	
a. Full Name NEW Bowen Committee	c. ID Number 2013 JUL 19 PM 5:02
b. Mailing Address (include City, State and Zip Code) 3720 Sawyer Drive Winston-Salem, NC 27105	d. Date Filed RECEIVED
	e. Phone Number (336) 462-8003

1. Report Year 2013	2. Period Start Date (mm/dd/yy) 07/1/13	3. Period End Date (mm/dd/yy) 07/18/13	4. Treasurer Full Name Lindsay Upson
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<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser		9. Type of Report (check one or more applicable categories)	
<input checked="" 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"/> State/County <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"/> 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	
8. Number of Fundraisers (this Report) 0		10. Special Report Name			

11. Account Information a. Financial Institution Full Name Wells Fargo		12. Account Information a. Financial Institution Full Name Wells Fargo	
b. Purpose		b. Purpose	
c. Account Code 420133		c. Account Code	
d. Period Begin Balance \$ 0.00		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.

Lindsay Upson _____ **07-18-13**
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: **7/19/13** Employee: **Judy Spear**

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

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	
NEW Bowen Committee			
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)	\$	\$	
6) Contributions from Individuals (CRO-1210)	\$ 157.62	\$ 157.62	
7) Contributions from Political Party Committees (CRO-1220)	\$ 0	\$	
8) Contributions from Other Political Committees (CRO-1230)	\$ 0	\$	
9) Loan Proceeds (CRO-1410)	\$ 0	\$	
10) Refunds/Reimbursements to the Committee (CRO-1240)	\$ 0	\$	
11) Other Receipt Sources			
11a) Interest on Bank Accounts (CRO-1250)	\$ 0	\$	
11b) Contributions from Not-For-Profit Organizations (CRO-1250)	\$ 0	\$	
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)	\$ 157.62	\$ 157.62	
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)	\$	\$	
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$ 0	\$	
13c) Coordinated Party Expenditures (CRO-1310)	\$ 0	\$	
14) Aggregated Non-Media Expenditures (CRO-1315)	\$ 0	\$	
15) Loan Repayments (CRO-1420)	\$ 0	\$	
16) Refunds/Reimbursements from the Committee (CRO-1320)	\$	\$	
17) In-Kind Contributions (CRO-1510)	\$ 132.62	\$ 132.62	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 132.62	\$ 132.62	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 25.00	\$ 25.00	
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$ 0		
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$ 0		
22) Debts and Obligations owed by the Committee (CRO-1610)	\$ 0		
23) Debts and Obligations owed to the Committee (CRO-1620)	\$ 0		
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 ____ Yes No
 Amendment

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	
NEW Bowen Committee							
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	
Jemmise Bowen 3720 Sawyer Drive Winston-Salem, NC 27105				Shelter Monitor			
				c. Employer's Name/Specific Field			
				Salvation Army			
						e. Election Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		Cash	Candidate Filing	07-09-2013	\$ 5.00		
<input type="checkbox"/>		Cash	NE Ward Map	07-10-2013	\$ 30.00		
<input type="checkbox"/>		DebitCard	Copies	07-16-2013	\$ 39.96		
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	
Jemmise Bowen 3720 Sawyer Drive Winston-Salem, NC 27105				Shelter Monitor			
				c. Employer's Name/Specific Field			
				Salvation Army			
						e. Election Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		DebitCard	Office Supplies	07-16-2013	\$ 38.40		
<input type="checkbox"/>		Cash	Fax Questionnaire	07-18-2013	\$ 4.18		
<input type="checkbox"/>		DebitCard	Copies	07-13-2013	\$ 15.08		
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	
Jemmise Bowen 3720 Sawyer Drive Winston-Salem, NC 27105				Shelter Monitor			
				c. Employer's Name/Specific Field			
				Salvation Army			
						e. Election Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	420133	Acct. Transfer	Opened Campaign Acct.	07/16/2013	\$ 25.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 157.62	

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	
NEW Bowen Committee			
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
Jemmise Bowen 3720 Sawyer Drive Winston-Salem, NC 27105		<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	
			\$
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Candidate Filing		07/09/2013	\$ 5.00
NE Ward Map		07/10/2013	\$ 80.00
Copies		07/16/2013	\$ 39.96
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
Jemmise Bowen 3720 Sawyer Dr Winston-Salem, NC 27105		<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	
			\$
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Office Supplies		07/16/2013	\$ 38.40
Fax - Questionnaire		07/18/2013	\$ 4.18
Copies		07/13/2013	\$ 15.08
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
		<input 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	
		d. Election Sum to Date	
			\$
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
			\$
			\$
			\$
4. Total only this Page			\$ 132.42
5. Total of ALL CRO-1510 Pages <small>(This line must be on line 17 of Detailed Summary Page CRO-1100)</small>			\$ 132.62