Amendment

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 | | | | | | c. ID Number | |
| HENRY VINES | FOR COM | 1m 185 101 | YER | | | | |
| HENRY VINES FOR COMMISSIONER b. Mailing Address (include City, State and Zip Code) | | | | | | d. Date Filed | |
| 7450 ISLEY DRIVE | | | | | | 1-16-2020 | |
| SHOW CAMP HO | 27399 | | | | | e. Phone Number | |
| | | | | 1-1 | | 336 2271761 | |
| 2. Report Year 3. Period Start | t Date (mm/dd/yy) | 4. Period 1 | End Date | (mm/dd/yy) | 5. Treasur | er Full Name | |
| 2019 12-18-20 | | | -2019 | | | NEL KAY MOSER | |
| 6. Type of Committee (Check (| *************************************** | *************************************** | | | type of rep | ort from one category) | |
| Candidate Campaign Par | | nicipal | | State/County | | Referendum | |
| Personal Burnoull | | Organizationa | 1 | Organizati | onal | Organizational | |
| become become | nt Fundraiser | Thirty-five da Pre-primary | y | Quarterly First | | Pre-referendum Final | |
| Legal Expense Fund | | Pre-election | | Secon | nd | Supplemental Final | |
| 7. Type of Fund (if applicable, | check one) | Pre-runoff | | Third | | Annual | |
| Booster Fund | Check one) | Semi-annual | | Fourt | | Special | |
| Building Fund | | Mid Yea | ır l' | Semi-annu | | - Specim | |
| | | Year En | d | Mid ` | Year | 10. Special Report Name | |
| V Other: | | Final | li | Year | End | | |
| 8. Number of Fundraisers this | Report | Special | li | Final | | | |
| | | | | Special | | | |
| 11. Account Information | | | 11. Acco | ount Inform | ation | | |
| a. Financial Institution Full Name | | | | al Institution 1 | | | |
| FIRST HORIZON BANK | | | | | | | |
| b. Purpose | c. Account Code | | b. Purpos | e | | c. Account Code | |
| | 7016 | | RE | CEIV | ED | | |
| d. Period Begin Ba | | lance | 1411 4 12 12 12 | | 0.0 | d. Period Begin Balance | |
| | \$ 500 | | JAN 16 2020 | | IJ | \$ | |
| GEDWING LAWON | 1 3 3 5 0 | | BY: | | DECK GROW WITH THE CONTRACT WHITE BARRIES | φ | |
| CERTIFICATION | | | | | | | |
| I certify that the Committee or Fun | | | • | | | | |
| 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. | | | | | | | |
| SAMUEL KAY MOSER Samuel Kay Mosor 1-16-2020 Printed Name of Signer Signature of Appointed Treasurer Date | | | | | | | |
| Printed Name of Sign | er | Sig | nature of A | pointed Treasu | ırer | Date | |
| FOR OFFICE USE ONLY | 1 | | | | | | |
| Date Received: | 16/2020 | Employ | /ee: | UG | Del | <u>ivery Method</u> Normal Mail | |
| Date Postmarked: | | Employ | /ee: | | | Registered Mail | |
| Hand Delivered | | | | | | | |
| Date Scanned: | 12 12 020 | Employ | /ee: | 06 | | | |
| Date Data Entered: | | Employ | /ee: | | | 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) 3. ID Number 2. Type of Report HENRY VINES FOR COMMISSIONER YEAR END Total this Total this 2017 Start of Election Cycle: January 1, Reporting Period **Election Cycle** 4) Cash on Hand at Start 500,00 \$ RECEIPTS 5) Aggregated Contributions from Individuals (CRO-1205) 6) Contributions from Individuals (CRO-1210) 136,47 \$ 136.47 \$ 7) Contributions from Political Party Committees S (CRO-1220) 8) Contributions from Other Political Committees S (CRO-1230) 9) Loan Proceeds (CRO-1410) S 10) Refunds/Reimbursements to the Committee (CRO-1240) S 11) Other Receipt Sources 11a) Interest on Bank Accounts (CRO-1250) \$ 11b) Contributions from Not-For-Profit Organizations (CRO-1250) S 11c) Outside Sources of Income (CRO-1250) \$ S 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) 136.47 136 47 **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) S 15) Loan Repayments (CRO-1420) \$ 16) Refunds/Reimbursements from the Committee (CRO-1320)S 17) In-Kind Contributions (CRO-1510) 136.47 136.47 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) 136,47 36.47 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18 500,00 500,00 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-2220) \$ \$ 28) Contributions to be Refunded (CRO-1215) S

| Use this | s form to report | individual contribution | ons over \$50 or | contributions ur | nder \$50 if form CV | RO 1205 is not used |
|--|--|--|----------------------|--|---|-------------------------|
| 1. Com | ımittee Full Nar | me (and Fund if app | olicable) | | | 2. ID Number |
| He | ENRY VINE | ES FOR C | Commiss | SIONER | | |
| | tributor Inform | nation | | 🛮 Add 🖟 🔲 R | 3. A.M. (18. 18. 18. 18. 19. 18. 18. 18. 18. 18. 18. 18. 18. 18. 18 | |
| 1 | Name, Mailing Addr | | | b. Job Title/Pro | fession | d. Comments |
| | de city, state, & zip) | | | FARME | ER | |
| | ONHA S | | | | Name/Specific Field | SPOUSE |
| 34 | 150 ISLE | EY DRIVE | | 0~/ | <i>,-</i> - | e. Election Sum to Date |
| SN | SNOW CAMP N.C. 27349 | | | SEL | <i>/</i> - | \$ 168,55 |
| f, Prior | g. Account Code | h. Form of Payment | i. In-Kind Descrip | iption | j. Date (mm/dd/yyy | |
| | 7016 | Check | SPEEDY | | 12-15-201 | |
| | | | | | | \$ |
| | | | | | | \$ |
| 3. Cont | tributor Informa | ation | Z | Add Re | lemove . | |
| a. Full Na | lame, Mailing Addre | ress & Phone | | b. Job Title/Prof | | d. Comments |
| (includ | de city, state, & zip) | <u>i</u> | | FARMET | n | |
| Do1 | HNA SVIN | NES | | | Jame/Specific Field | SPOUSE |
| | | | | C. Employer | ame/opecial Field | 1 |
| | TO ISLEY | | | SEIF | ļ | e. Election Sum to Date |
| 520 | MCAMP | MC 27349 | | 1201 | J | \$ 241.47 |
| ļ | | h. Form of Payment | I. r Vind Descri | · At-sa | I. D. t. (mm/dd/yy) | |
| | | | i. In-Kind Descrip | | j. Date (mm/dd/yyy | |
| | 7016 | Check | VISTA | PRINT | 12-16-2019 | 9 \$ 72,92 |
| | | | | | | \$ |
| | | | | | | \$ |
| *** | tributor Informa | 23 T 2 T 2 T 2 T 2 T 2 T 2 T 2 T 2 T 2 T | | - LOSSY DE LENGUES - LOSSY - L | emove | |
| l | ame, Mailing Addre | | | b. Job Title/Profe | ession | d. Comments |
| (inciuuc | le city, state, & zip) | | 1 7007% 111 NASA - 6 | • | J | l |
| ı | | | | c. Employer's Na | ame/Specific Field | l |
| ı | | | ı | | ł | e. Election Sum to Date |
| 1 | | | | | | \$ |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Descrip | otion | j. Date (mm/dd/yyyy | |
| | <u>-</u> | | | | J | \$ |
| | 1 | | | | | \$ |
| | | | | | <u> </u> | \$ |
| 4. Tota | al only this Pa | age | | | | \$ 136.47 |
| the state of the s | The state of the s | RO-1210 Pages | | | | \$ 136.41 |
| | | | | | 3.6項報応が対応的指導をご確認さらましたものは | ווישונו |

Contributions from Individuals

Amendment

∡ No

Pg ____ of ___ \(\square \) Yes

| In-Kind Contributions | Pg | e of | | Amendment Yes No | |
|--|--|--|-------------------------|---------------------------------------|--|
| Use this form to report non-monetary contributions, donations, go | oods or services pro | vided to the comm | ittee o | | |
| Use CRO-1215 if In-Kind Contributions were or will be re 1. Committee Full Name (and Fund if applicable) | funded within 7 da | ıys. | ी र | D Number | |
| The second secon | <u> 2 </u> | Mary Property Control of the Control | 2.1 | D Number | |
| HENRY VINES FOR COMMISSIONE | R | | | , , , , , , , , , , , , , , , , , , , | |
| 3. Contributor Information | Add Re | | - | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | b. Type of Contri Individual | butor | c. Co | omments | |
| DONNA S VINES | Candidate Party | | | WIFE | |
| 3450 ISLEY DRIVE | PAC Referendum | | d. Election Sum to Date | | |
| SNOW CAMP N.C. 27349 | t Source | \$ 168.55 | | | |
| e. Description | | f. Date (nm/dd/y) | уу) | g. Fair Market Amount | |
| SPEEDY BUTTONS FOR BUTTONS | | 12/15-2019 | \$ 63.55 | | |
| | | | | \$ | |
| | | | | \$ | |
| 3. Contributor Information | | move | | | |
| a. Full Name, Mailing Address & Phone | b. Type of Contri | butor | c. Co | mments | |
| (include city, state, & zip) DOHNA S VINES | Individual Candidate Party PAC | | WIFE | | |
| 3450 ISLEY DRIVE | Referendum | | d. Ele | ection Sum to Date | |
| SWOW CAMP HC 27349 | Other Receipt | Source | \$ 241.47 | | |
| e. Description | | f. Date (mm/dd/yy | yy) | g. Fair Market Amount | |
| VISTA PRINT CARDS | ······································ | 12-16-2019 | | \$ 72.92 | |
| | | | | \$ | |
| | | | | \$ | |
| 3. Contributor Information | 🛘 Add 🔲 Rei | nove | | | |
| a. Full Name, Mailing Address & Phone | b. Type of Contril | outor | c. Co | . Comments | |
| (include city, state, & zip) | Individual Candidate Party PAC | | | | |
| | Referendum | _ | d, Ele | ection Sum to Date | |
| | Other Receipt | Source | \$ | | |
| e. Description | | f. Date (mm/dd/yy | yy) g | g. Fair Market Amount | |
| | | | | \$ | |
| | | | | \$ | |
| | | | | \$ | |
| 4. Total only this Page | | | \$ | 136.47 | |

136.47