Disclosure Report Cover

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.
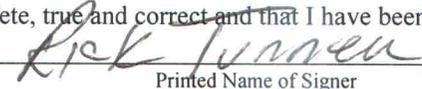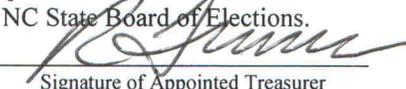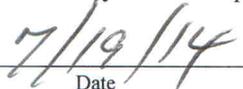Do not use this form to update information

Amendment		
☐ Yes	☐	No

1. Committee Information

a. Full Name	c. ID Number
Committee to Elect Scott Lawson	9HLQH3

b. Mailing Address (include City, State and Zip Code)	d. Date Filed
Scott Lawson 176 Harbour Village Drive C-16 PO Box 911Hampstead, NC 28443	4/28/14
	e. Phone Number
	910-622-0148

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2014	2/26/14	4/19/14	Rick Tunner

6. Type of Committee (Check One)

- ☒ Candidate Campaign
- ☐ Party
- ☐ PAC
- ☐ Referendum
- ☐ Independent Expenditure
- ☐ Joint Fundraiser
- ☐ Legal Expense Fund

7. Type of Fund (if applicable, check one)

- ☐ "Booster Fund"
- ☐ Building Fund
- ☐ Other:

8. Number of Fundraisers this Report

0

9. Type of Report (check only one type of report from one category)

Municipal	State/County	Referendum
☐ Organizational	☐ Organizational	☐ Organizational
☐ Thirty-five day	☐ Quarterly	☐ Pre-referendum
☐ Pre-primary	☒ First	☐ Final
☐ Pre-election	☐ Second	☐ Supplemental Final
☐ Pre-runoff	☐ Third	☐ Annual
Semi-annual	☐ Fourth	☐ Special
☐ Mid Year	Semi-annual	
☐ Year End	☐ Mid Year	
☐ Final	☐ Year End	
☐ Special	☐ Final	
	☐ Special	

10. Special Report Name

11. Account Information

a. Financial Institution Full Name
TD Bank

b. Purpose	c. Account Code
Campaign Finance	1215
	d. Period Begin Balance
	$ 0

11. Account Information

a. Financial Institution Full Name

b. Purpose	c. Account Code
	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.

Rick Tunner		7/19/14
Printed Name of Signer	Signature of Appointed Treasurer	Date

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

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number
COMMITTEE TO ELECT SCOTT LAWSON	2014 1ST QUARTER REPORT	9HLQH3

Start of Election Cycle: January 1, 2014		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$ 0	$ 0

RECEIPTS

			Total this Reporting Period	Total this Election Cycle
5)	Aggregated Contributions from Individuals	(CRO-1205)	$	$
6)	Contributions from Individuals	(CRO-1210)	$ 1,272.28	$ 1,272.38
7)	Contributions from Political Party Committees	(CRO-1220)	$ 350.00	$ 350.00
8)	Contributions from Other Political Committees	(CRO-1230)	$	$
9)	Loan Proceeds	(CRO-1410)	$ 3,000.00	$ 3,000.00
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)		$ 4,622.28	$ 4,622.28

EXPENDITURES

			Total this Reporting Period	Total this Election Cycle
13)	Disbursements			
13a)	Operating Expenditures	(CRO-1310)	$ 1,297.95	$ 1,297.95
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)	$	$
18)	TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		$ 1,297.95	$ 1,297.95
19)	Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		$ 3,324.33	$ 3,324.33

ADDITIONAL INFORMATION

			Total this Reporting Period	Total this Election Cycle
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)	$	$

CRO-1100

NC State Board of Elections

August 2008

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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
COMMITTEE TO ELECT SCOTT LAWSON	9HLQH3

3. Contributor Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
SCOTT LAWSON	LAW ENFORCEMENT	CANDIDATE
176 HARBOUR VILLAGE DRIVE C-16	c. Employer's Name/Specific Field	
PO BOX 911		
HAMPSTEAD, NC 28443		e. Election Sum to Date
910-622-0148		$ 937.51

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1215	MoneyOrder	FILING FEE	02/26/2014	$ 700.00
☐	1215	Check	CELLPHONE	02/19/2014	$ 160.48
☐	1215	CreditCard	PHOTOGRAPHS	02/25/2014	$ 77.03

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
SCOTT LAWSON	LAW ENFORCEMENT	
176 HARBOUR VILLAGE DRIVE C-16	c. Employer's Name/Specific Field	
PO BOX 911		
HAMPSTEAD, NC 28443		e. Election Sum to Date
910-622-0148		$ 1,146.73

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1215	CreditCard	WEBSITE	03/16/2014	$ 58.78
☐	1215	Debit Card	OFFICE SUPPLIES	03/11/2014	$ 27.05
☐	1215	Debit Card	OFFICE SUPPLIES	03/11/2014	$ 123.39

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
SCOTT LAWSON	LAW ENFORCEMENT	
176 HARBOUR VILLAGE DRIVE C-16	c. Employer's Name/Specific Field	
PO BOX 911		
HAMPSTEAD, NC 28443		e. Election Sum to Date
910-622-0148		$ 1,272.28

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1215	Debit Card	FOOD CPGN MEET	03/12/2014	$ 125.55
☐					$
☐					$

4. Total only this Page	$ 1,272.28
5. Total of ALL CRO-1210 Pages	$ 1,272.28
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

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by mail

Contributions from Political Party Committees

Use this form to report contributions from a political party

1. Committee Full Name (and Fund if applicable)	2. ID Number
COMMITTEE TO ELECT SCOTT LAWSON	9HLQH3

3. Contributor Information   ☒ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Comments
PENDER COUNTY DEMOCRATIC PARTY 14171 NC HWY. 53E MAPLE HILL, NC	
	c. Election Sum to Date $ 350.00

d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount
1215	CHECK		3/3/2014	$ 350.00
				$
				$

3. Contributor Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Comments
	c. Election Sum to Date $

d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount
				$
				$
				$

3. Contributor Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Comments
	c. Election Sum to Date $

d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount
				$
				$
				$

4. Total only this Page	$ 350.00
5. Total of ALL CRO-1220 Pages *(This line must be on line 7 of Detailed Summary Page CRO-1100)*	$ 350.00

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
COMMITTEE TO ELECT SCOTT LAWSON	9HLQH3

3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)

☒ Operating Expenses   ☐ Contributions to Candidates/Political Committees   ☐ Coordinated Party Expenditures

4. Payee Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
TD BANK 15280 US HWY 17N HAMPSTEAD, NC 28443	**c. Level Registered (Specify)** ☐ Federal ☐ County: ☐ State ☐ Municipality:	**e. Election Sum to Date** $ 25.67

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1215	ELECTRONIC	B	03/14/2014	$25.67	CHECKS PRINTED
				$	

4. Payee Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
LOWES FOODS STORE# 242 HAMPSTEAD, NC 28443 910-270-6300	**c. Level Registered (Specify)** ☐ Federal ☐ County: ☐ State ☐ Municipality:	**e. Election Sum to Date** $ 125.55

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1215	DEBIT	C	03/12/2014	$125.55	FOOD FOR CAMPGN MEETING
				$	

4. Payee Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
IPAGE-INC.COM	**c. Level Registered (Specify)** ☐ Federal ☐ County: ☐ State ☐ Municipality:	**e. Election Sum to Date** $ 58.78

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1215	DEBIT	A	03/16/2014	$58.78	WEBSITE
				$	

5. Total only this Page	$ 210.00

6. Total of ALL CRO-1310 Pages	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)	$ 1,297.95

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)

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
COMMITTEE TO ELECT SCOTT LAWSON	9HLQH3

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses   ☐ Contributions to Candidates/Political Committees   ☐ Coordinated Party Expenditures

4. Payee Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
PORTRAIT INNOVATIONS 865 INSPIRATION DRIVE WILMINGTON, NC 28405 910-256-8197	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 77.03

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1215	DEBIT	B	02/25/2014	$77.03	PHOTOS
				$	

4. Payee Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
STAPLES 322 S COLLEGE ROAD WILMINGTON, NC 28403 910-343-0636	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 150.44

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1215	DEBIT	K	03/11/2014	$27.05	MARKERS
1215	DEBIT	K	03/11/2014	$123.39	PAPER, FOAMCORE BATTERY

4. Payee Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
VERIZON WIRELESS 4512 OLEANDER DRIVE WILMINGTON, NC 28403 910-793-6908	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 160.48

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1215	DEBIT	F	02/19/2014	$160.48	CELLPHONE
				$	

5. Total only this Page	$ 387.95

6. Total of ALL CRO-1310 Pages

(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)

$ 1,297.95

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)

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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
COMMITTEE TO ELECT SCOTT LAWSON	9HLQH3

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses   ☐ Contributions to Candidates/Political Committees   ☐ Coordinated Party Expenditures

4. Payee Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
PENDER COUNTY BOARD ELECTIONS 807 S WALKER STREET BURGAW, NC 28425 910-259-1220	**c. Level Registered (Specify)** ☐ Federal ☐ County: ☐ State ☐ Municipality:	**e. Election Sum to Date** $ 700.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1215	MONEY ORDER	O	02/26/2014	$700.00	FILING FEES
				$	

4. Payee Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ 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
				$	
				$	

4. Payee Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ 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
				$	
				$	

5. Total only this Page $ 700.00

6. Total of ALL CRO-1310 Pages

(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)

(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) $ 1,297.95

(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)

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)

Loan Proceeds

Use this form to report proceeds from a loan and loan endorser's information
A loan proceeds statement must accompany each loan that is from an individual

1. Committee Full Name (and Fund if applicable)	2. ID Number
Committee to Elect Scott Lawson	9HLQH3

3. Lender Information   ☒ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
SCOTT LAWSON 176 HARBOUR VILLAGE DRIVE C-16 PO BOX 911 HAMPSTEAD, NC 28443	LAW ENFORCEMENT	
		e. Start Date (mm/dd/yyyy)
	c. Employer's Name/Specific Field	3/17/2014
	N/A	f. End Date (mm/dd/yyyy)

g. Rate	h. Security Pledged	i. Account Code	j. Form of Payment	k. Amount
%		1215	CHECK	$ 3,000.00

l. Full Name of Lending Institution	m. Loan Number

4. Endorsers/Makers   *(The people who guarantee the loan.)*

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field
	d. Percentage	e. Amount
	%	$

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field
	d. Percentage	e. Amount
	%	$

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field
	d. Percentage	e. Amount
	%	$

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field
	d. Percentage	e. Amount
	%	$

5. Total of ALL CRO-1410 Pages $ 3,000.00

(This line must be on line 9 of Detailed Summary Page CRO-1100)

CRO-1410   NC State Board of Elections   RECEIVED APR 28 2014