

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

1. Committee Information

a. Full Name

THE GILLELAND PLAN

c. ID Number

b. Mailing Address (include City, State and Zip Code)

1062 S Brady Ave
NEWTON, NC 28658

d. Date Filed

12/30/2025

e. Phone Number

828-461-2180

2. Report Year

2025

3. Period Start Date (mm/dd/yy)

07/11/2025

4. Period End Date
(mm/dd/yy)

12/30/2025

5. Treasurer Full Name

JOEL SCOTT GILLELAND

6. Type of Committee (Check One)

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

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

- ☐ "Booster Fund"
☐ Building Fund

☐ Other:

8. Number of Fundraisers this Report

N/A

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

Municipal

- ☐ Organizational
☐ Thirty-five day

- ☐ Pre-primary
☐ Pre-election
☐ Pre-runoff
☐ Semi-annual
☐ Mid Year
☐ Year End
☒ Final
☐ Special

State/County

- ☐ Organizational
☐ Quarterly

- ☐ First
☐ Second
☐ Third
☐ Fourth
☐ Semi-annual
☐ Mid Year
☐ Year End
☐ Final
☐ Special

Referendum

- ☐ Organizational
☐ Pre-referendum

- ☐ Final
☐ Supplemental Final
☐ Annual
☐ Special

10. Special Report Name

11. Account Information

a. Financial Institution Full Name

b. Purpose

c. Account Code

d. Period Begin Balance

\$ 0.00

11. Account Information

a. Financial Institution Full Name

N/A

b. Purpose

c. Account Code

d. Period Begin Balance

\$ 0.00

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.

Joel Scott Gilleland

Printed Name of Signer

Joel Scott Gilleland

Signature of Appointed Treasurer

12/30/2025

Date

FOR OFFICE USE ONLY

Date Received:

Employee:

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	
THE GILLELAND PLAN		FINAL			
Start of Election Cycle:		January 1,		2025	
		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 0.00		\$ 0.00	
RECEIPTS					
5) Aggregated Contributions from Individuals		(CRO-1205)		\$	
6) Contributions from Individuals		(CRO-1210)		\$ 3,276.65	
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)		\$ 3,276.65		\$ 3,276.65	
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)		\$	
15) Loan Repayments		(CRO-1420)		\$	
16) Refunds/Reimbursements From the Committee		(CRO-1320)		\$	
17) In-Kind Contributions		(CRO-1510)		\$ 3,276.65	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 3,276.65		\$ 3,276.65	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 0.00		\$ 0.00	
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)		\$	

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	
The Gilleland Plan						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Joel Scott Gilleland 1062 S Brady Ave Newton, NC 28658 828-461-2180			b. Job Title/Profession		d. Comments	
			Business Person			
			c. Employer's Name/Specific Field			
			Self-Employed		e. Election Sum to Date	
				\$ 2,776.65		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		In-Kind	Filing Fee	07/11/2025	\$ 5.00	
<input type="checkbox"/>		In-Kind	Yard Signs	08/01/2025	\$ 2,171.65	
<input type="checkbox"/>		In-Kind	Business Cards	08/01/2025	\$ 50.00	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Joel Scott Gilleland 1062 S Brady Ave Newton, NC 28658 828-461-2180			b. Job Title/Profession		d. Comments	
			Business Person			
			c. Employer's Name/Specific Field			
			Self-Employed		e. Election Sum to Date	
				\$ 2,776.65		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		In-Kind	Shirts	10/01/2025	\$ 200.00	
<input type="checkbox"/>		In-Kind	Large Sign	10/01/2025	\$ 150.00	
<input type="checkbox"/>		In-Kind	Handouts/Sticke	09/01/2025	\$ 200.00	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Douglas W. Rink P.O. Box 405 Newton, NC 28658 828-261-5123			b. Job Title/Profession		d. Comments	
			Business Person			
			c. Employer's Name/Specific Field			
			Self-Employed		e. Election Sum to Date	
				\$ 500.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		In-Kind	Billboard	09/01/2025	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 3,276.65	
5. Total of ALL CRO-1210 Pages					\$ 3,276.65	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

In-Kind Contributions

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Amendment		
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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	
THE GILLELAND PLAN			
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
Joel Scott Gilleland 1062 S Brady Ave Newton, NC 28658 828-461-2180		<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	\$ 2,776.65
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Filing Fee		07/11/2025	\$ 5.00
Yard Signs		08/01/2025	\$ 2,171.65
Business Cards		08/01/2025	\$ 50.00
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
Joel Scott Gilleland 1062 S Brady Ave Newton, NC 28658 828-461-2180		<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	\$ 2,776.65
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Shirts		10/01/2025	\$ 200.00
Large Sign		10/01/2025	\$ 150.00
Handouts/Stickers		09/01/2025	\$ 200.00
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
Douglas W. Rink P.O. Box 405 Newton, NC 28658 828-261-5123		<input checked="" type="checkbox"/> Individual	
		<input 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	\$ 500.00
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Billboard		09/01/2025	\$ 500.00
			\$
			\$
4. Total only this Page			\$ 3,276.65
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)			\$ 3,276.65