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	c. ID Number
Gabriel For School Board	
b. Mailing Address (include City, State and Zip Code)	**d. Date Filed**
PO Box 253 Sherrills Ford, NC 28673	10/27/2020
	e. Phone Number
	828-308-7997

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2020	07/16/2020	10/17/2020	Glenn R Madara

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

two

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	**10. Special Report Name**
☐ Final	☐ Year End	
☐ Special	☐ Final	
	☐ Special	

11. Account Information

a. Financial Institution Full Name	
OneUnited Bank	
b. Purpose	**c. Account Code**
Campaign Account	GJG
	d. Period Begin Balance
	$ 50.00

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.

Glenn R Madara	Glenn R Madara	10/27/2020
Printed Name of Signer	Signature of Appointed Treasurer	Date

FOR OFFICE USE ONLY

Date Received:
Date Postmarked:
Date Scanned:
Date Data Entered:

RECEIVED
OCT 27 2020
By

Employee: _____
Employee: _____
Employee: _____
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
Gabriel For School Board	Third Quarter Plus	

Start of Election Cycle: January 1, 2020		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$ 50.00	$
RECEIPTS			
5) Aggregated Contributions from Individuals	*(CRO-1205)*	$ 2,166.53	$ 2,166.53
6) Contributions from Individuals	*(CRO-1210)*	$ 3205.00	$ 3,265.00
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)*		$ 5,371.53	$ 5,431.53
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	*(CRO-1310)*	$ 2,198.50	$ 2,198.50
13b) Contributions to Candidates/Political Committees	*(CRO-1310)*	$	$
13c) Coordinated Party Expenditures	*(CRO-1310)*	$	$
14) Aggregated Non-Media Expenditures	*(CRO-1315)*	$ 168.74	$ 168.74
15) Loan Repayments	*(CRO-1420)*	$	$
16) Refunds/Reimbursements From the Committee	*(CRO-1320)*	$	$
17) In-Kind Contributions	*(CRO-1510)*	$ 55.00	$ 65.00
18) TOTAL EXPENDITURES *(Add lines 13a, 13b, 13c, 14, 15, 16 and 17)*		$ 2,422.24	$ 2,432.24
19) Cash on Hand at End *(Add lines 4 and 12 together, then subtract line 18)*		$ 2,999.29	$ 2,999.29
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)*	$	$

Aggregated Contributions from Individuals

Amendment ☐ Yes ☒ No

Optional form used to report NC Contributions From Individuals of $50 or less

1. Committee Full Name (and Fund if applicable)	2. ID Number
Gabriel For School Board	

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove	GJG	check		08/10/2020	$ 30.00
☐ Add ☐ Remove	GJG	check		08/09/2020	$ 40.00
☐ Add ☐ Remove	GJG	check		08/12/2020	$ 20.00
☐ Add ☐ Remove	GJG	check		08/08/2020	$ 25.00
☐ Add ☐ Remove	GJG	check		08/09/2020	$ 25.00
☐ Add ☐ Remove	GJG	check		08/14/2020	$ 25.00
☐ Add ☐ Remove	GJG	check		08/18/2020	$ 25.00
☐ Add ☐ Remove	GJG	check		08/31/2020	$ 25.00
☐ Add ☐ Remove	GJG	check		09/11/2020	$ 40.00
☐ Add ☐ Remove	GJG	check		08/08/2020	$ 50.00
☐ Add ☐ Remove	GJG	check		08/10/2020	$ 50.00
☐ Add ☐ Remove	GJG	check		08/13/2020	$ 50.00
☐ Add ☐ Remove	GJG	check		08/09/2020	$ 50.00
☐ Add ☐ Remove	GJG	check		08/11/2020	$ 50.00
☐ Add ☐ Remove	GJG	check		08/10/2020	$ 50.00
☐ Add ☐ Remove	GJG	check		08/18/2020	$ 50.00
☐ Add ☐ Remove	GJG	check		08/21/2020	$ 50.00
☐ Add ☐ Remove	GJG	check		08/22/2020	$ 50.00
☐ Add ☐ Remove	GJG	check		08/10/2020	$ 50.00
☐ Add ☐ Remove	GJG	check		08/13/2020	$ 50.00
☐ Add ☐ Remove	GJG	check		08/13/2020	$ 50.00
☐ Add ☐ Remove	GJG	check		08/29/2020	$ 50.00

4. Total only this Page	$ 905.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ 2,166.53

Aggregated Contributions from Individuals

Amendment ☐ Yes ☒ No

Optional form used to report NC Contributions From Individuals of $50 or less

1. Committee Full Name (and Fund if applicable)	2. ID Number
Gabriel For School Board	

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove	GJG	cash		09/04/2020	$ 50.00
☐ Add ☐ Remove	GJG	check		09/09/2020	$ 50.00
☐ Add ☐ Remove	GJG	check		09/10/2020	$ 50.00
☐ Add ☐ Remove	GJG	check		09/02/2020	$ 50.00
☐ Add ☐ Remove	GJG	check		08/16/2020	$ 50.00
☐ Add ☐ Remove	GJG	check		09/05/2020	$ 50.00
☐ Add ☐ Remove	GJG	check		09/12/2020	$ 50.00
☐ Add ☐ Remove	GJG	check		09/19/2020	$ 50.00
☐ Add ☐ Remove	GJG	check		10/01/2020	$ 20.00
☐ Add ☐ Remove	GJG	check		10/12/2020	$ 50.00
☐ Add ☐ Remove	GJG	check		10/14/2020	$ 50.00
☐ Add ☐ Remove	GJG	check		10/17/2020	$ 50.00
☐ Add ☐ Remove	GJG	check		07/29/2020	$ 20.20
☐ Add ☐ Remove	GJG	check		07/30/2020	$ 20.00
☐ Add ☐ Remove	GJG	check		09/28/2020	$ 25.00
☐ Add ☐ Remove	GJG	check		09/29/2020	$ 10.00
☐ Add ☐ Remove	GJG	check		09/30/2020	$ 50.00
☐ Add ☐ Remove	GJG	check		10/10/2020	$ 10.00
☐ Add ☐ Remove	GJG	check		10/01/2020	$ 45.00
☐ Add ☐ Remove	GJG	credit card		10/12/2020	$ 48.60
☐ Add ☐ Remove	GJG	credit card		08/10/2020	$ 42.83
☐ Add ☐ Remove	GJG	credit card		08/10/2020	$ 49.25

4. Total only this Page	$ 890.88
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ 2,166.53

Aggregated Contributions from Individuals

Amendment ☐ Yes ☒ No

Optional form used to report NC Contributions From Individuals of $50 or less

1. Committee Full Name (and Fund if applicable)	2. ID Number
Gabriel For School Board	

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove	GJG	credit card		10/16/2020	$ 47.75
☐ Add ☐ Remove	GJG	credit card		09/28/2020	$ 47.75
☐ Add ☐ Remove	GJG	credit card		09/28/2020	$ 47.75
☐ Add ☐ Remove	GJG	credit card		09/28/2020	$ 21.20
☐ Add ☐ Remove	GJG	credit card		10/14/2020	$ 41.82
☐ Add ☐ Remove	GJG	credit card		09/02/2020	$ 47.75
☐ Add ☐ Remove	GJG	credit card		09/02/2020	$ 30.97
☐ Add ☐ Remove	GJG	credit card		09/02/2020	$ 47.75
☐ Add ☐ Remove	GJG	credit card		10/12/2020	$ 37.91
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$

4. Total only this Page	$ 370.65
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ 2,166.53

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
Gabriel For School Board	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Joan E Gardner 8736 Popular Lane Sherrills Ford, NC 28673	Realtor/Real Estate Broker	Self/Agent, Real Estate		$ 1,100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	GJG	check		07/27/2020	$ 1,000.00
☐	GJG	check		08/29/2020	$ 100.00
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Glenn Madara 8736 Popular Lane Sherrills Ford, NC 28673	Realtor/Real Estate Broker	Self/Agent, Real Estate		$ 55.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐		in-kind	postage stamps	08/19/2020	$ 55.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Karen Clanton 908 Peachtree Road Charlotte, NC 28216	Counselor	Self/Counseling		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	GJG	check		08/08/2020	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 1,255.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 3,205.00

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
Gabriel For School Board	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Coleen A Pfeufer 141 Baywatch Drive Mooresville, NC 28117	Teacher/Educator	Not employed/Retired		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	GJG	check		08/08/2020	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Dr. W.J. Ric Vandett 65 4th Avenue Drive NE Hickory, NC 28601	Principal/Educator	Not Employed/Retired		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	GJG	check		08/10/2020	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Donna Roulic 2029 26th Avenue Place SW Hickory, NC 28602	Teacher/Educator	Not Employed/Retired		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	GJG	check		08/07/2020	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 300.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 3,205.00

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
Gabriel For School Board	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Robert Crane PO Box 219 Sherrills Ford, NC 28673	Owner/Tree Service	Self/Tree Service		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	GJG	check		08/17/2020	$ 200.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Linda P Greenwell PO Box 250 Terrell, NC 28682	Consultant/Employee Benefits	Not Employed/Retired		$ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	GJG	check		07/20/2020	$ 250.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Gail C Webb 7701 SE 29th Avenue Portland, OR 97202	Therapist for the Blind	Not Employed/Retired		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	GJG	check		08/10/2020	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 550.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 3,205.00

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
Gabriel For School Board	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Bonita J Ferretti 620 46th Avenue Drive NE Hickory, NC 28601	Business Manager	Hickory Choral Society		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	GJG	check		08/21/2020	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Robert Blair 2700 Woodley Road NW, PH 12 Washington, DC 20008	Attorney/Law	Not Employed/Retired		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	GJG	check		08/25/2020	$ 200.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Forrest A Ferrell 324 2nd Street Place NW Hickory, NC 28601	Attorney/Law	Law Office		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	GJG	check		08/27/2020	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 400.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 3,205.00

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
Gabriel For School Board	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MaryAnne Hogue 4145 Sim Chick Lane Maiden, NC 28650	V.P./Food Safety Svcs	Not Employed/Retired		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	GJG	check		08/24/2020	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Brenda G Sigmon 505 2nd AvenuePlace NE N1 Conover, NC 2613	Teacher/Educator	Not Employed/Retired		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	GJG	check		09/05/2020	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
John R Pope 1918 45th Avenue Place NE Hickory, NC 28601	Owner/Transportation	Self/Shipping		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	GJG	check		08/25/2020	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 300.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 3,205.00

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
Gabriel For School Board	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Mary Lou Cassingham 8126 Mountain Shore Drive Sherrills Ford, NC 28673	Customer service	Not Employed/Retired		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	GJG	check		08/12/2020	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Malinda Lane 2745 Camden Pointe Drive Sherrills ford, NC 28673	Dental Hygienist	Oak Ridge Dental Arts		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	GJG	check		09/14/2020	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Nicole Jacobs 127 Grey Elm Trail Durham, NC 27713	Political Operative	not empoyed		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	GJG	check		09/30/2020	$ 200.00
☐					$
☐					$

4. Total only this Page	$ 400.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 3,205.00

In-Kind Contributions

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
Gabriel For School Board	

3. Contributor Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Glenn Madara 8736 Popular Lane Sherrills Ford, NC 28673	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	**d. Election Sum to Date** $ 55.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Postage stamps	08/19/2020	$ 55.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
	☐ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	**d. Election Sum to Date** $

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
		$
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
	☐ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	**d. Election Sum to Date** $

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
		$
		$
		$

4. Total only this Page	$ 55.00
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 55.00

Disbursements

Amendment ☐ Yes ☒ No

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
Gabriel For School Board	

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
NationBuilder PO Box 811428 Los Angeles, CA 90081 (213) 992-4809	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 365.83

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
GJG	debit card	O	08/11/2020	$119.00	Website Expense
GJG	debit card	O	09/10/2020	$119.00	Website Expense

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
NationBuilder PO Box 811428 Los Angeles, CA 90081 (213) 992-4809	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 365.83

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
GJG	debit card	O	10/09/2020	$8.63	Website Expense
GJG	dibit card	O	10/13/2020	$119.00	Website Expense

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
CustomInk 2910 Districts Ave Fairfax, VA 22031 (800) 293-4232	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 51.36

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
GJG	debit card	O	08/17/2020	$51.36	Print Media face masks
				$	

5. Total only this Page	$ 416.99
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)***	$ 2,198.50

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)**

Disbursements

Amendment ☐ Yes ☒ No

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
Gabriel For School Board	

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
Canva 2/2 Lacey St Surry Hills, Australia https://support.canva.com/cont	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 72.11

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
GJG	debit card	O	08/21/2020	$25.90	Software Expense
GJG	debit card	O	09/03/2020	$7.36	Software Expense

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
Canva 2/2 Lacey St Surry Hills, Australia https://support.canva.com/cont	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 72.11

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
GJG	debit card	O	09/21/2020	$38.85	Software Expense
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
Nicole Jacobs 127 Frey Elm Trail Durham, NC 27713 (704) 877-4143	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 162.08

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
GJG	debit card	O	09/01/2020	$77.01	Internet Ads
GJG	debit card	O	10/01/2020	$85.07	Internet Ads

5. Total only this Page	$ 234.19
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)*	$ 2,198.50

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)**

Disbursements

Amendment ☐ Yes ☒ No

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
Gabriel For School Board	

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	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
UZ Marketing 5900 Bingle Rd Houston, TX 77092 (832) 598-7226		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 461.98

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
GJG	debit card	A	09/03/2020	$461.98	Print Media Yard Signs
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
Amazon 410 Terry Ave North Seattle, WA 98109 (206) 266-1000		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 259.04

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
GJG	debit card	O	09/03/2020	$137.86	Event Supplies Voter Registrat
GJG	debit card	A	10/08/2020	$121.18	Print Media wire for signs

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
NC Demorcratic Party 220 Hillsborough St Raleigh, NC 27603 (919) 821-2777		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 300.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
GJG	debit card	O	10/01/2020	$300.00	Voter List
				$	

5. Total only this Page	$ 1,021.02
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)***	$ 2,198.50

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)**

Disbursements

Pg 4 of 5

Amendment ☐ Yes ☒ No

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
Gabriel For School Board	

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	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
Printify 814 Mission St San Francisco, CA 94103 customercare@printify.com		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 175.55

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
GJG	debit card	A	10/05/2020	$175.55	Print Media shirts
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
Hustle Inc 595 Market St Suite 920 San Francisco, CA 94105 (415) 851-4878		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 100.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
GJG	debit card	O	10/07/2020	$100.00	Cell Phone Texting Svcs
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
Redbubble 111 Sutter St, 17th Floor San Francisco, CA 94104 www.redbubble.com/contact		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 133.89

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
GJG	debit card	A	10/05/2020	$107.81	Print Media magnets
GJG	debit card	A	10/13/2020	$26.08	Print Media stickers

5. Total only this Page	$ 409.44
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)***	$ 2,198.50

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)**

Disbursements

Pg 5 of 5

Amendment ☐ Yes ☒ No

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
Gabriel For School Board	

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
Staples 615 River Highway Mooresville, NC 28117 (704) 660-3400	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 116.86

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
GJG	debit card	A	10/16/2020	$116.86	Print Media postcards
				$	

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	$ 116.86
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)*	$ 2,198.50

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)**

Aggregated Non-Media Expenditures

Page 1 of 1

Amendment ☐ Yes ☒ No

Optional form used to report NC Non-Media Expenditures of $50 or less.

1. Committee Full Name (and Fund if applicable)	2. ID Number
Gabriel For School Board	

3. Payee Information

a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
☐ Add ☐ Remove	GJG	debit card	O	08/11/2020	$ 12.00	background removal
☐ Add ☐ Remove	GJG	debit card	O	08/17/2020	$ 15.00	supplies, event reimbursement
☐ Add ☐ Remove	GJG	debit card	O	09/02/2020	$ 3.10	internet ad
☐ Add ☐ Remove	GJG	debit card	O	09/11/2020	$ 12.00	office supplies
☐ Add ☐ Remove	GJG	debit card	O	09/17/2020	$ 21.35	event supplies
☐ Add ☐ Remove	GJG	debit card	O	09/17/2020	$ 20.25	event supplies
☐ Add ☐ Remove	GJG	debit card	O	09/17/2020	$ 31.89	event supplies
☐ Add ☐ Remove	GJG	debit card	O	09/17/2020	$ 5.49	office supplies
☐ Add ☐ Remove	GJG	debit card	O	09/23/2020	$ 13.68	event supplies
☐ Add ☐ Remove	GJG	debit card	O	09/23/2020	$ 3.93	event supplies
☐ Add ☐ Remove	GJG	debit card	O	10/02/2020	$ 9.60	website expense
☐ Add ☐ Remove	GJG	debit card	O	10/05/2020	$ 4.29	polling services
☐ Add ☐ Remove	GJG	debit card	O	10/09/2020	$ 16.16	office supplies
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	

4. Total only this Page	$ 168.74
5. Total of ALL CRO-1315 Pages *(This line must be on line 14 of Detailed Summary Page CRO-1100)*	$ 168.74

6. Purpose Codes (List detailed expenditure code in (d) above)

	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* - Donations to Legal Expense Fund**
O* - Other			

*** Codes require detailed explanation in required remarks field (g)**

NORTH CAROLINA
STATE BOARD OF ELECTIONS

Contribution from a Business Account Statement

This Statement allows a committee to accept a check from a business account where the contributor declares that they have no personal checking account and that the funds are their own personal funds.

This Statement is to be filed with the Election Board where the committee's reports are filed.

I, Robert Crane, am the individual making the contribution of $200.00 to the Gabriel for School Board Committee.

The account from which the funds are drawn is in the name of S + W Tree Service.

☐ Check if the contribution is a draft from a paycheck.

I do not have a personal checking account, in my name, from which this contribution could be made or this contribution is made as a result of a draft from personal funds. If the contribution is a draft, please include a written statement from the employer. This statement should be a signed agreement by the contributor that the funds drafted were derived from the personal salary of the contributor.

The funds from which this contribution is derived are my own personal funds and not that of any other individual or "business entity". For purposes of this **Statement,** the term "business entity" will include any "corporation, business entity, labor union, professional association, or insurance company".

I further understand that by signing this **Statement** I am declaring all of the above information is true and accurate. Signing this **Statement** with any portion not being true could result in a Class 2 Misdemeanor.

Nicole Crane 8-25-2020

Signature of Contributor

Note to the treasurer: Please attach a photocopy of the check submitted with this Statement. Maintain this information in your records to be made available upon request.

Robert Crane

DBA **S&W TREE SERVICE**
P.O. BOX 219
SHERRILLS FORD, NORTH CAROLINA 28673
(704) 239-2005

7166

66-73/531

DATE 8-17-2020

PAY TO THE ORDER OF Gaven Gabriel $ 200.00

two hundred 0/100 DOLLARS

FIFTH THIRD BANK

FOR Gaven Gabriel School Board Robert Crane

⑈007166⑈ [redacted] 74708311941⑈