

Disclosure Report Cover

Amendment	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
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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
Committee To Elect Kenjuana McCray	VCEIJE
b. Mailing Address (include City, State and Zip Code)	d. Date Filed
1625 Citation Court Parkton, NC 28371	1/29/2021
	e. Phone Number
	910-494-1352

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2020	01/01/2020	06/30/2020	Shandrika McNair

6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	Municipal	State/County	Referendum
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	Quarterly	<input type="checkbox"/> Pre-referendum
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> Other:		<input checked="" type="checkbox"/> Mid Year	Semi-annual	
		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	10. Special Report Name
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
8. Number of Fundraisers this Report		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
1			<input type="checkbox"/> Special	

11. Account Information		11. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
Capital Bank		Capital Bank	
b. Purpose	c. Account Code	b. Purpose	c. Account Code
For Campaign Activity	1	For Campaign Activity	1
	d. Period Begin Balance		d. Period Begin Balance
	\$ 56.80		\$ 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.

Shandrika McNair

Printed Name of Signer

Signature of Appointed Treasurer

1/29/2021

Date

FOR OFFICE USE ONLY

RECEIVED
FEB 09 2021
BY:

Date Received:

Date Postmarked:

Date Scanned:

Date Data Entered:

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	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
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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	
COMMITTEE TO ELECT KENJUANA MCCRAY		20 Mid Yr Semi-Ann		VCEIJE	
Start of Election Cycle: January 1, 2020		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 56.80		\$ 56.80	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$		\$	
6) Contributions from Individuals (CRO-1210)		\$		\$	
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)		\$ 0.00		\$ 0.00	
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)		\$ 30.00		\$ 56.80 30.00	
15) Loan Repayments (CRO-1420)		\$ 26.80		\$ 26.80	
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)		\$ 56.80		\$ 56.80	
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)		\$ 1973.20			
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 Non-Media Expenditures

Amendment

Yes No

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

1. Committee Full Name (and Full Party Name) COMMITTEE TO ELECT KENJUANA MCCRAY					2. ID Number	
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
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Electric Funds Tran	O	01/02/2020	\$ 5.00	BANK FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Electric Funds Tran	O	02/03/2020	\$ 5.00	BANK FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Electric Funds Tran	O	03/02/2020	\$ 5.00	BANK FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Electric Funds Tran	O	04/01/2020	\$ 5.00	BANK FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Electric Funds Tran	O	05/01/2020	\$ 5.00	BANK FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Electric Funds Tran	O	06/01/2020	\$ 5.00	BANK FEE
4. Total only this Page					\$	30.00
5. Total of ALL CRO-1315 Pages <i>(This line must be on line 13 of Detailed Summary Page CRO-1100)</i>					\$	30.00
6. Purpose Codes (list detailed expenditure code in (d) above)						
B* - Printing		C* - Fundraising		D - To Another Candidate		
E - Salaries		F - Equipment		H - Holding Public Office Expenses		
I - Postage		J - Penalties		K - Office Expenses		
O* - Other		Q* - Donations to Legal Expense Fund				
* Codes require detailed explanation in required remarks field (g)						

Outstanding Loans

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
COMMITTEE TO ELECT KENJUANA MCCRAY			
3. Lender 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
KENJUANA MCCRAY 1625 CITATION COURT HOPE MILLS, NC 28371		LEAD PROGRAM COORDINATOR	e. Start Date (mm/dd/yyyy)
		c. Employer's Name/Specific Field	06/20/2019
		FAYETTEVILLE TECHNICAL COMMUNITY COLLEGE	f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$ 2,000.00	\$ 2,000.00
k. Full Name of Lending Institution			l. Loan Number
4. Total only this Page			\$ 2,000.00
5. Total of ALL CRO-1430 Pages <i>(This line must be on the 21 of Detailed Summary Page CRO-1100)</i>			\$ 2,000.00