

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 COMMITTEE TO ELECT LAURIE VENZON			c. ID Number
b. Mailing Address (include City, State and Zip Code) 1210 SAMUEL SPENCER PKWY DAVIDSON, NC 28036			d. Date Filed 01/22/2017
			e. Phone Number (704) 975-1615
2. Report Year 2016	3. Period Start Date (mm/dd/yy) 11/02/2016	4. Period End Date (mm/dd/yy) 12/31/2016	5. Treasurer Full Name BRENDA KOLLS
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 <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund		Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input checked="" type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
7. Type of Fund (if applicable, check one)		State/County <input type="checkbox"/> Organizational Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:		<input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special	
8. Number of Fundraisers this Report 0		10. Special Report Name	
3. Account Information		3. Account Information	
a. Financial Institution Full Name BB&T		a. Financial Institution Full Name	
b. Purpose COLLECTION AND DISBURSEMENTS OF FUNDS	c. Account Code LAV2017	b. Purpose	c. Account Code
	d. Period Begin Balance \$		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			
<u>Brenda Kolls</u> Printed Name of Signer		<u>Brenda Kolls</u> Signature of Appointed Treasurer	
		01/22/2017 Date	
FOR OFFICE USE ONLY			
Date Received:	Employee:	Delivery Method	
Date Postmarked: <u>Jan. 23, 17</u>	Employee: <u>bmcp</u>	<input checked="" type="checkbox"/> Normal Mail	
Date Scanned:	Employee: <u>CCN</u>	<input type="checkbox"/> Registered Mail	
Date Data Entered:	Employee:	<input type="checkbox"/> Hand Delivered	
		<input checked="" type="checkbox"/> Electronically Filed	
		<input type="checkbox"/> 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> 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	
COMMITTEE TO ELECT LAURIE VENZON		2016 Year End Semi-Annual			
Start of Election Cycle: January 1, 2016			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)		\$ 0.00		\$ 0.00	
6) Contributions from Individuals (CRO-1210)		\$ 2,508.20		\$ 2,508.20	
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00		\$ 0.00	
8) Contributions from Other Political Committees (CRO-1230)		\$ 0.00		\$ 0.00	
9) Loan Proceeds (CRO-1410)		\$ 0.00		\$ 0.00	
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$ 0.00		\$ 0.00	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$ 0.00		\$ 0.00	
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$ 0.00		\$ 0.00	
11c) Outside Sources of Income (CRO-1250)		\$ 0.00		\$ 0.00	
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$ 0.00		\$ 0.00	
11e) Exempt Purchase Price Sales (CRO-1265)		\$ 0.00		\$ 0.00	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 2,508.20		\$ 2,508.20	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 0.00		\$ 0.00	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$ 0.00		\$ 0.00	
13c) Coordinated Party Expenditures (CRO-1310)		\$ 0.00		\$ 0.00	
14) Aggregated Non-Media Expenditures (CRO-1315)		\$ 12.00		\$ 12.00	
15) Loan Repayments (CRO-1420)		\$ 0.00		\$ 0.00	
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$ 0.00		\$ 0.00	
17) In-Kind Contributions (CRO-1510)		\$ 258.20		\$ 258.20	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 270.20		\$ 270.20	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 2,238.00		\$ 2,238.00	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0.00			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 0.00			
22) Debts and Obligations owed by the Committee (CRO-1610)		\$ 0.00			
23) Debts and Obligations owed to the Committee (CRO-1620)		\$ 0.00			
24) Account Transfers Within the Committee (CRO-1720)		\$ 0.00			
25) Administrative Support (CRO-1710)		\$ 0.00		\$ 0.00	
26) Forgiven Loans (CRO-1440)		\$ 0.00		\$ 0.00	
27) 48-Hour Notice Reports Sum (CRO-2220)		\$ 0.00		\$ 0.00	
28) Contributions to be Refunded (CRO-1215)		\$ 0.00		\$ 0.00	

Contributions from Individuals

Pg 1 of 3

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 LAURIE VENZON						
3. Contributor 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	
RONALD CHARBONNEAU 18716 HAMMOCK LN DAVIDSON, NC 28036			RETIRED			
			c. Employer's Name/Specific Field RETIRED			
					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"/>	LAV2017	Check		12/11/2016	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor 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	
PATRICK COLEMAN 209 AVINGER LANE DAVIDSON, NC 28036			ORAL SURGEON			
			c. Employer's Name/Specific Field CAROLINA ORAL & FACIAL SURGERY			
					e. Election Sum to Date \$ 750.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	LAV2017	Check		12/29/2016	\$ 750.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor 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	
BRENDA KOLLS 19219 CALLAWAY HILLS LN DAVIDSON, NC 28036			ACCOUNTANT			
			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"/>	LAV2017	Check		12/23/2016	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 1,750.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 2,508.20	

Contributions from Individuals

Page 2 of 3

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 LAURIE VENZON						
3. Contributor 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
STEPHEN SZILAGYI 15027 JUNE WASHAM RD DAVIDSON, NC 28036				PRESIDENT		
				c. Employer's Name/Specific Field		e. Election Sum to Date
				SZILAGYI LEADERSHIP, LLC		
						\$ 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"/>	LAV2017	Check		12/09/2016		\$ 500.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
3. Contributor 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
LAURIE VENZON 1210 SAMUEL SPENCER PKWY DAVIDSON, NC 28036 (704) 975-1615				CONSULTANT		
				c. Employer's Name/Specific Field		e. Election Sum to Date
				SELF-EMPLOYED		
						\$ 258.20
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	LAV2017	In-Kind	MEALS/REFRESHMENTS FOR	11/11/2016		\$ 23.16
<input type="checkbox"/>	LAV2017	In-Kind	MEALS/REFRESHMENTS FOR	11/15/2016		\$ 22.32
<input type="checkbox"/>	LAV2017	In-Kind	THANK YOU NOTES	12/03/2016		\$ 20.00
3. Contributor 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
LAURIE VENZON 1210 SAMUEL SPENCER PKWY DAVIDSON, NC 28036 (704) 975-1615				CONSULTANT		
				c. Employer's Name/Specific Field		e. Election Sum to Date
				SELF-EMPLOYED		
						\$ 258.20
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	LAV2017	In-Kind	STAMPS	12/04/2016		\$ 10.00
<input type="checkbox"/>	LAV2017	In-Kind	MEALS/REFRESHMENTS FOR	12/05/2016		\$ 13.12
<input type="checkbox"/>	LAV2017	In-Kind	MEALS/REFRESHMENTS FOR	12/05/2016		\$ 35.00
4. Total only this Page						\$ 623.60
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 2,508.20

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	
COMMITTEE TO ELECT LAURIE VENZON						
3. Contributor 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
LAURIE VENZON 1210 SAMUEL SPENCER PKWY DAVIDSON, NC 28036 (704) 975-1615				CONSULTANT		
				c. Employer's Name/Specific Field		e. Election Sum to Date
				SELF-EMPLOYED		
						\$ 258.20
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	LAV2017	In-Kind	MEALS/REFRESHMENTS FOR	12/05/2016	\$ 42.72	
<input type="checkbox"/>	LAV2017	In-Kind	MEALS/REFRESHMENTS FOR	12/06/2016	\$ 24.54	
<input type="checkbox"/>	LAV2017	In-Kind	MEALS/REFRESHMENTS FOR	12/08/2016	\$ 12.32	
3. Contributor 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
LAURIE VENZON 1210 SAMUEL SPENCER PKWY DAVIDSON, NC 28036 (704) 975-1615				CONSULTANT		
				c. Employer's Name/Specific Field		e. Election Sum to Date
				SELF-EMPLOYED		
						\$ 258.20
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	LAV2017	In-Kind	MEALS/REFRESHMENTS FOR	12/08/2016	\$ 32.43	
<input type="checkbox"/>	LAV2017	In-Kind	MEALS/REFRESHMENTS FOR	12/27/2016	\$ 22.59	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 134.60	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 2,508.20	

CRO-1210

NC State Board of Elections

April 2007

Aggregated Non-Media ExpendituresPage 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	
COMMITTEE TO ELECT LAURIE VENZON						
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	LAV2017	Draft	O	12/09/2016	\$ 12.00	BANK FEES
<input type="checkbox"/> Remove						
4. Total only this Page					\$ 12.00	
5. Total of ALL CRO-1315 Pages					\$ 12.00	
<i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>						
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)						

CRO-1315

NC State Board of Elections

December 2009

In-Kind ContributionsPg 1 of 2Amendment
☐ 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	
COMMITTEE TO ELECT LAURIE VENZON			
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	
LAURIE VENZON 1210 SAMUEL SPENCER PKWY DAVIDSON, NC 28036 (704) 975-1615		<input checked="" type="checkbox"/> Individual	
		<input type="checkbox"/> Candidate	
		<input type="checkbox"/> Party	
		<input type="checkbox"/> PAC	
		<input type="checkbox"/> Referendum	
		<input type="checkbox"/> Other Receipt Source	
		d. Election Sum to Date	
		\$ 258.20	
e. Description		f. Date (mm/dd/yyyy)	
MEALS/REFRESHMENTS FOR FUNDRAISING/AWARENESS/INPUT MEETINGS		11/11/2016	
		\$ 23.16	
MEALS/REFRESHMENTS FOR FUNDRAISING/AWARENESS/INPUT MEETINGS		11/15/2016	
		\$ 22.32	
THANK YOU NOTES		12/03/2016	
		\$ 20.00	
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	
LAURIE VENZON 1210 SAMUEL SPENCER PKWY DAVIDSON, NC 28036 (704) 975-1615		<input checked="" type="checkbox"/> Individual	
		<input type="checkbox"/> Candidate	
		<input type="checkbox"/> Party	
		<input type="checkbox"/> PAC	
		<input type="checkbox"/> Referendum	
		<input type="checkbox"/> Other Receipt Source	
		d. Election Sum to Date	
		\$ 258.20	
e. Description		f. Date (mm/dd/yyyy)	
STAMPS		12/04/2016	
		\$ 10.00	
MEALS/REFRESHMENTS FOR FUNDRAISING/AWARENESS/INPUT MEETINGS		12/05/2016	
		\$ 13.12	
MEALS/REFRESHMENTS FOR FUNDRAISING/AWARENESS/INPUT MEETINGS		12/05/2016	
		\$ 35.00	
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	
LAURIE VENZON 1210 SAMUEL SPENCER PKWY DAVIDSON, NC 28036 (704) 975-1615		<input checked="" type="checkbox"/> Individual	
		<input type="checkbox"/> Candidate	
		<input type="checkbox"/> Party	
		<input type="checkbox"/> PAC	
		<input type="checkbox"/> Referendum	
		<input type="checkbox"/> Other Receipt Source	
		d. Election Sum to Date	
		\$ 258.20	
e. Description		f. Date (mm/dd/yyyy)	
MEALS/REFRESHMENTS FOR FUNDRAISING/AWARENESS/INPUT MEETINGS		12/05/2016	
		\$ 42.72	
MEALS/REFRESHMENTS FOR FUNDRAISING/AWARENESS/INPUT MEETINGS		12/06/2016	
		\$ 24.54	
MEALS/REFRESHMENTS FOR FUNDRAISING/AWARENESS/INPUT MEETINGS		12/08/2016	
		\$ 12.32	
4. Total only this Page		\$ 203.18	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 258.20	

In-Kind Contributions

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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	
COMMITTEE TO ELECT LAURIE VENZON			
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	
LAURIE VENZON 1210 SAMUEL SPENCER PKWY DAVIDSON, NC 28036 (704) 975-1615		<input checked="" type="checkbox"/> Individual	
		<input type="checkbox"/> Candidate	
		<input type="checkbox"/> Party	
		<input type="checkbox"/> PAC	
		<input type="checkbox"/> Referendum	
		<input type="checkbox"/> Other Receipt Source	
		d. Election Sum to Date	
		\$ 258.20	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
MEALS/REFRESHMENTS FOR FUNDRAISING/AWARENESS/INPUT MEETINGS		12/08/2016	\$ 32.43
MEALS/REFRESHMENTS FOR FUNDRAISING/AWARENESS/INPUT MEETINGS		12/27/2016	\$ 22.59
			\$
4. Total only this Page		\$ 55.02	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 258.20	

CRO-1510

NC State Board of Elections

December 2007