

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	
COMMITTEE TO ELECT LAURIE VENZON			
b. Mailing Address (include City, State and Zip Code)		d. Date Filed	
1210 SAMUEL SPENCER PKWY DAVIDSON, NC 28036		03/04/2017	
		e. Phone Number	
		(704) 975-1615	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2016	11/02/2016	12/31/2016	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 <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> 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:		Referendum <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		10. Special Report Name	
0			
3. Account Information		3. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
BB&T			
b. Purpose	c. Account Code	b. Purpose	c. Account Code
COLLECTION AND DISBURSEMENTS OF FUNDS	LAV2017		
	d. Period Begin Balance		d. Period Begin Balance
	\$ 25.19		\$
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>BKolls</u> Signature of Appointed Treasurer	<u>03/04/2017</u> Date
FOR OFFICE USE ONLY			
Date Received:	<u>Mecklenburg County</u>	Employee:	<u>CCN</u>
Date Postmarked:	<u>MAR 04 2017</u>	Employee:	<u>CCN</u>
Date Scanned:	<u>Board of Elections</u>	Employee:	<u>CCN</u>
Date Data Entered:	<u>Board of Elections</u>	Employee:	<u>CCN</u>
Delivery Method <input checked="" type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input 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
 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	
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		\$ 25.19	\$ 0.00
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 0.00	\$ 0.00
6) Contributions from Individuals	(CRO-1210)	\$ 2,508.20	\$ 2,590.52
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	\$ 2,590.52
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 0.00	\$ 24.81
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	\$ 290.52
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 270.20	\$ 327.33
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 2,263.19	\$ 2,263.19
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

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				RETIREED INT'L PAPER ENGINEERING EXEC			
				c. Employer's Name/Specific Field INTERNATIONAL PAPER			
						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

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 SZILAGYI LEADERSHIP, LLC			
					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		12/09/2016	\$ 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 SELF-EMPLOYED			
					e. Election Sum to Date	
					\$ 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"/>		In-Kind	MEALS/REFRESHMENTS FOR	11/11/2016	\$ 23.16	
<input type="checkbox"/>		In-Kind	MEALS/REFRESHMENTS FOR	11/15/2016	\$ 22.32	
<input type="checkbox"/>		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 SELF-EMPLOYED			
					e. Election Sum to Date	
					\$ 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"/>		In-Kind	STAMPS	12/04/2016	\$ 10.00	
<input type="checkbox"/>		In-Kind	MEALS/REFRESHMENTS FOR	12/05/2016	\$ 13.12	
<input type="checkbox"/>		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

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			
			SELF-EMPLOYED		e. Election Sum to Date	
					\$ 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"/>		In-Kind	MEALS/REFRESHMENTS FOR	12/05/2016	\$ 42.72	
<input type="checkbox"/>		In-Kind	MEALS/REFRESHMENTS FOR	12/06/2016	\$ 24.54	
<input type="checkbox"/>		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			
			SELF-EMPLOYED		e. Election Sum to Date	
					\$ 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"/>		In-Kind	MEALS/REFRESHMENTS FOR	12/08/2016	\$ 32.43	
<input type="checkbox"/>		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 <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 2,508.20	

In-Kind Contributions

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	
		c. Comments	
		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		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	
		c. Comments	
		d. Election Sum to Date	
		\$ 258.20	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
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	
		c. Comments	
		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		12/05/2016	\$ 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

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	
		c. Comments	
		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	

Aggregated Non-Media Expenditures

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)						