Disclosure Report Cover
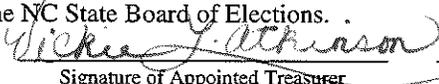
Use this form for general report and committee information, must be signed and submitted along with other detailed forms.
Do not use this form to update information

Amendment ☐ Yes ☒ No

1. Committee Information

a. Full Name
COMMITTEE TO ELECT JOEL CHURCHWELL

c. ID Number
OHCA88

b. Mailing Address (include City, State and Zip Code)
Vickie L. Atkinson
5192 Sherwood Court
Tarawa Terrace, NC 28543

d. Date Filed
04/29/2019

e. Phone Number
910-750-3034

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2019	12/31/2018	01/23/2019	Vickie L. Atkinson

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

1

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
Union Bank

b. Purpose
Campaign Funds

c. Account Code
964

d. Period Begin Balance
$ 0.00

11. Account Information

a. Financial Institution Full Name

b. Purpose

c. Account Code
JC

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. .

Vickie L. Atkinson
Printed Name of Signer

[signature] 04/29/2019
Signature of Appointed Treasurer   Date

FOR OFFICE USE ONLY

Date Received:
Date Postmarked: RECEIVED APR 2019 BY:
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

Use this form to summarize all disclosure reporting forms and to total monetary information.

Amendment ☐ Yes ☒ No

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number
COMMITTEE TO ELECT JOEL CHURCHWELL	Final	OHCA88

Start of Election Cycle: January 1, _2018_		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$ 194.89	$ 0.00

RECEIPTS

5) Aggregated Contributions from Individuals	(CRO-1205)	$ 0.00	$ 0.00
6) Contributions from Individuals	(CRO-1210)	$ 00.00	$ 6,645.81
7) Contributions from Political Party Committees	(CRO-1220)	$ 00.00	$ 100.00
8) Contributions from Other Political Committees	(CRO-1230)	$ 00.00	$ 50.00
9) Loan Proceeds	(CRO-1410)	$ 00.00	$ 00.00
10) Refunds/Reimbursements To the Committee	(CRO-1240)	$ 00.00	$ 00.00
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	$ 00.00	$ 00.00
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	$ 0.00	$ 0.00
11c) Outside Sources of Income	(CRO-1250)	$ 00.00	$ 00.00
11d) Legal Expense Fund – Other Sources	(CRO-1270)	$ 00.00	$ 00.00
11 e) Exempt Purchase Price Sales	(CRO-1265)	$ 00.00	$ 00.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		$ 0.00	$ 6,795.81

EXPENDITURES

13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	$ 194.89	$ 2,446.89
13b) Contributions to Candidates/Political Committees	(CRO-1310)	$ 00.00	$ 00.00
13c) Coordinated Party Expenditures	(CRO-1310)	$ 00.00	$ 00.00
14) Aggregated Non-Media Expenditures	(CRO-1315)	$ 00.00	$ 00.00
15) Loan Repayments	(CRO-1420)	$ 00.00	$ 00.00
16) Refunds/Reimbursements From the Committee	(CRO-1320)	$ 00.00	$ 1,948.11
17) In-Kind Contributions	(CRO-1510)	$ 00.00	$ 2,400.81
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		$ 194.89	$ 6,795.81
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		$ 0.00	$ 0.00

ADDITIONAL INFORMATION

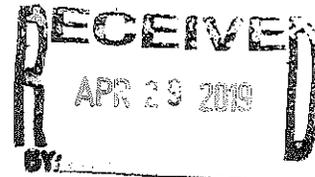|				
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	$ 00.00	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	$ 00.00	
22) Debts and Obligations owed By the Committee	(CRO-1610)	$ 00.00	
23) Debts and Obligations owed To the Committee	(CRO-1620)	$ 00.00	
24) Account Transfers Within the Committee	(CRO-1720)	$ 00.00	
25) Administrative Support	(CRO-1710)	$ 00.00	$ 00.00
26) Forgiven Loans	(CRO-1440)	$ 00.00	$ 00.00
27) 48-Hour Notice Reports Sum	(CRO-2200)	$ 00.00	$ 00.00
28) Contributions to be Refunded	(CRO-1215)	$ 00.00	$ 00.00

Disbursements

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

Pg _1_ of _1_ Amendment ☐ Yes ☒ No

1. Committee Full Name (and Fund if applicable)	2. ID Number
COMMITTEE TO ELECT JOEL CHURCHWELL	OHCA88

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
Onslow County Ministries 600 Court Street Jacksonville, NC 28540 910-455-5733	**c. Level Registered (Specify)** ☐ Federal ☒ County: ☐ State ☐ Municipality:	S **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
964	Ck# 1017	O	01/23/2019	$194.89	Donation to Soup Kitchen
				$	

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	$ 194.89

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)

$ 194.89

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)

CRO-1310 NC State Board of Elections December 2009

North Carolina
State Board of Elections
441 N Harrington Street
Raleigh, NC 27603

RECEIVED
APR 29 2019
BY:

Kim Westbrook Strach
Executive Director

Mailing Address
PO Box 27255
Raleigh, NC 27611-7255
(919) 733-7173

Certification to Close Committee

This Certification is used to express the intent to close the committee after all funds have been properly disbursed.

This Certification is filed at the Board of Elections office where the committee's campaign reports are filed.

FILED BY:

Committee Name: _Committe to Elect Joel Churchwell_

Treasurer Name: _Vickie L. Atkinson_

Treasurer Address: _5192 Sherwood Ct_

(include city, state, & zip) _Tarawa Terrace, NC 28543_

Treasurer Phone: _910-750-3034_

I certify that the above mentioned Committee intends to close and cease existence. Upon signing this certification, I declare that all funds have been distributed and reported (if required). In addition, no contributions will be accepted or disbursements made after the "Final Report" is filed or this form is signed. If the Committee at any future time intends to accept or spend funds in support or opposition of any candidate or ballot issue, a new political committee must be formed and registered with the Board of Elections before such activities may commence.

Committees that have filed under the $1,000 threshold will only be required to sign this Certification. No "Final Report" will be required for committees meeting this criterion. Any Committee that did not file under the $1,000 threshold must submit a "Final Report" with this Certification. This report must have a zero balance with no outstanding loans or debts.

_4/29/19_
Date Signed

Vickie L. Atkinson
Signature

CRO-3400   Certification to Close Committee   July 2014