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
JANIS SIMMONS FOR BOARD OF EDUCATION

c. ID Number
FDF 12 M

b. Mailing Address (include City, State and Zip Code)
1462 Longleaf Rd
Southport, NC 28461

d. Date Filed
01/09/2024

e. Phone Number
910 540-2482

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
	10/20/2024	12/31/2024	JANIS E SIMMONS

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
0

9. Type of Report (check only one type of report from one category)

Municipal
- ☐ Organizational
- ☐ Thirty-five day
- ☐ Pre-primary
- ☐ Pre-election
- ☐ Pre-runoff
- Semi-annual
- ☐ Mid Year
- ☐ Year End
- ☐ Final
- ☐ Special

State/County
- ☐ Organizational
- Quarterly
- ☐ First
- ☐ Second
- ☐ Third
- ■ Fourth
- Semi-annual
- ☐ Mid Year
- ☐ Year End
- ☐ Final
- ☐ Special

Referendum
- ☐ Organizational
- ☐ Pre-referendum
- ☐ Final
- ☐ Supplemental Final
- ☐ Annual
- ☐ Special

10. Special Report Name

11. Account Information

a. Financial Institution Full Name
SECU

b. Purpose
Operating

c. Account Code
JES4

d. Period Begin Balance
$ 2643.05

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.

JANIS E SIMMONS
Printed Name of Signer

Janis Simmons
Signature of Appointed Treasurer

12/09/2024
Date

FOR OFFICE USE ONLY

Date Received: **RECEIVED**   Employee: _NP_

Date Postmarked: JAN 10 2025   Employee: _____

Date Scanned: BRUNSWICK COUNTY BOARD OF ELECTIONS   Employee: _____

Date Data Entered: _____   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.

CRO-1000   NC State Board of Elections   August 2008

Detailed Summary

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
Janis Simmons for Board of Edu	4th Quarter	FDF12M

Start of Election Cycle: January 1, 2021		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$ 2643.05	$ 0

RECEIPTS

		Total this Reporting Period	Total this Election Cycle
5) Aggregated Contributions from Individuals	(CRO-1205)	$ 30.00	$ 30.00
6) Contributions from Individuals	(CRO-1210)	$ 140.00	$ 3760.19
7) Contributions from Political Party Committees	(CRO-1220)	$ 0.00	$ 1457.20
8) Contributions from Other Political Committees	(CRO-1230)	$ 0.00	$ 480.00
9) Loan Proceeds	(CRO-1410)	$ 0.00	$ 0.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	$ 90.00	$ 90.00
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	$ .31	$ .82
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	$	$
11c) Outside Sources of Income	(CRO-1250)	$	$
11d) Legal Expense Fund - Other Sources	(CRO-1270)	$	$
11e) Exempt Purchase Price Sales	(CRO-1265)	$	$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		$ 260.31	$ 5818.21

EXPENDITURES

		Total this Reporting Period	Total this Election Cycle
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	$ 96.92	$ 2298.59
13b) Contributions to Candidates/Political Committees	(CRO-1310)	$ 0.00	$ 50.00
13c) Coordinated Party Expenditures	(CRO-1310)	$	$
14) Aggregated Non-Media Expenditures	(CRO-1315)	$	$
15) Loan Repayments	(CRO-1420)	$	$
16) Refunds/Reimbursements from the Committee	(CRO-1320)	$ 200.00	$ 452.99
17) In-Kind Contributions	(CRO-1510)	$ 0.00	$ 410.19
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		$ 296.92	$ 3211.77
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		$	$

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)	$	$

CRO-1100   NC State Board of Elections   August 2008

Aggregated Contributions from Individuals

Page __1__ of __1__

Amendment
☐ Yes   ☒ No

1. Committee Full Name (and Fund if applicable)	2. ID Number
JANIS SIMMONS FOR BOARD OF EDUCATION	

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	JES4	electronic transfer		11/08/2024	$ 10.00	Ribble
☐ Add ☐ Remove	JES4	check		01/09/2024	$ 20.00	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
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☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	

4. Total only this Page	$ 30.00
5. Total of ALL CRO-1205 Pages (This line must be on line 5 of Detailed Summary Page CRO-1100)	$ 30.00

CRO-1205 ✓   NC State Board of Elections   April 2007

Contributions from Individuals

Pg **1** of **1**

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
Janis Simmons for Board of Education	FDF 12M

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
Carolyn Yarbrough 251 South Shore Dr Southport, NC 28461	No Job Title	
	c. Employer's Name/Specific Field	
	Not employed	e. Election Sum to Date $ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	JES4	electronic transfer		10/31/2024	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
Janis Simmons 1462 Longleaf Rd Southport, NC 28461	No Job Title	Card use error (WHA)
	c. Employer's Name/Specific Field	
	Not Employed	e. Election Sum to Date $ 40.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	JES4	check		11/28/2024	$ 40.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
	c. Employer's Name/Specific Field	
		e. Election Sum to Date $

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

4. Total only this Page	$ 140.00
5. Total of ALL CRO-1210 Pages	$ 140.00
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

CRO-1210   NC State Board of Elections   April 2007

Refunds/Reimbursements To the Committee

Pg 1 of 1

Amendment: ☐ Yes ☒ No

Use this form to report refunds received by the committee or reimbursements for a previous expenditure.

1. Committee Full Name (and Fund if applicable)	2. ID Number
Janis Simmons for Board of Education	FDF 12M

3. Contributor Information — ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Type of Committee	g. Comments
Janis Simmons 1462 Longleaf Rd Southport, NC 28461	☒ Candidate ☐ PAC ☐ Referendum ☐ Party	
	e. Level Registered (Specify) ☐ Federal ☒ County: ☐ State ☐ Municipality:	**h. Original Expenditure Date** 10/15/2024
		i. Original Expenditure Amt $ 40.00

b. Job Title/Profession	c. Employer's Name/Specific Field	f. Purpose	j. Election Sum to Date
No Job Title	Not employed	Reimburse campaign credit card	$ 40.00

k. Account Code	l. Form of Payment	m. In-Kind Description	n. Date (mm/dd/yyyy)	o. Amount
JES4	check		10/19/2024	$ 40.00

3. Contributor Information — ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Type of Committee	g. Comments
Lead NC PO Box 1323 Raleigh, NC 27602	☒ Candidate ☐ PAC ☐ Referendum ☐ Party	Mo Green Training
	e. Level Registered (Specify) ☐ Federal ☒ County: ☐ State ☐ Municipality:	**h. Original Expenditure Date** 08/24/2024
		i. Original Expenditure Amt $ 100.00

b. Job Title/Profession	c. Employer's Name/Specific Field	f. Purpose	j. Election Sum to Date
No Job Title	Not Employed	Refund. Tom unable to attend	$ 50.00

k. Account Code	l. Form of Payment 1534	m. In-Kind Description	n. Date (mm/dd/yyyy)	o. Amount
JES4	check		08/09/2024	$ 50.00

3. Contributor Information — ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Type of Committee	g. Comments
	☐ Candidate ☐ PAC ☐ Referendum ☐ Party	
	e. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	**h. Original Expenditure Date**
		i. Original Expenditure Amt $

b. Job Title/Profession	c. Employer's Name/Specific Field	f. Purpose	j. Election Sum to Date
			$

k. Account Code	l. Form of Payment	m. In-Kind Description	n. Date (mm/dd/yyyy)	o. Amount
				$

4. Total only this Page	$ 90.00
5. Total of ALL CRO-1240 Pages (This line must be on line 10 of Detailed Summary Page CRO-1100)	$ 90.00

CRO-1240 ✓   NC State Board of Elections   December 2007

Other Receipt Sources

Use this form to report income not reported on another form. i.e. interest income, not for profit contributions etc.

1. Committee Full Name (and Fund if applicable)	2. ID Number
JANIS SIMMONS For Board of Education	FDF 12 M

3. Type of Receipt Source   *(Please use separate CRO-1250 forms for each type of Receipt Source.)*

☒ Interest   ☐ Contributions from Not-for-Profit Organizations   ☐ Outside Sources of Income

4. Contributor Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Not-for-Profit Federal ID #	d. Comments
SECU PO Box 29561 Raleigh, NC 27626	c. Outside Source Explanation Interest pd on campaign checking acct.	dividends e. Election Sum to Date $ .81

f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
JFS4	CASH		11/19/2024	$ .16
JES4	CASH		12/19/2024	$ .15

4. Contributor Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Not-for-Profit Federal ID #	d. Comments
	c. Outside Source Explanation	
		e. Election Sum to Date $

f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
				$
				$

4. Contributor Information   ☐ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Not-for-Profit Federal ID #	d. Comments
	c. Outside Source Explanation	
		e. Election Sum to Date $

f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
				$
				$

5. Total only this Page	$ 0.31

6. Total of ALL CRO-1250 Pages

(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest)

(This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution) $ 0.31

(This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)

4th Q 10/20-12/31/24

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 __2__

Amendment
☐ Yes ☑ No

1. Committee Full Name (and Fund if applicable)	2. ID Number
JANIS SIMMONS FOR BOARD OF EDUCATION	FDF12M

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
SECU PO Box 29561 27626- Raleigh, NC ~~28441~~ 0561	**c. Level Registered (Specify)** ☐ Federal ☑ County: ☐ State ☐ Municipality:	Foundation Auto
		e. Election Sum to Date $ 12,00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
JES4	CASH	O	11/19/2024	$ 1.00	SECU Foundation
JES4	CASH	O	12/18/2024	$ 1.00	SECU Foundation

4. Payee Information   ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
Wal-Mart 1675 N Howe St Southport, NC 28461	**c. Level Registered (Specify)** ☐ Federal ☑ County: ☐ State ☐ Municipality:	Printing Reports Campaign letters
		e. Election Sum to Date $ 83.27

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
JES4	check	K	11/01/2024	$ 83.27	Blk+Color Inks
				$	

4. Payee Information   ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
ActBlue -VantivNC 366 Summer St Somerville, MA 02144	**c. Level Registered (Specify)** ☐ Federal ☑ County: ☐ State ☐ Municipality:	
		e. Election Sum to Date $ 11.86

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
JES4	CASH	C	10/20/24	$ 1.50	Operating Expenses
JES4	CASH	C	11/20/24	$ .15	

5. Total only this Page	$ 96.92

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)*	$ 96.92

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

Refunds/Reimbursements From the Committee

Pg 1 of 1

Amendment ☐ Yes ☒ No

Use this form to report refunds/reimbursements, including contributions returned to the contributor.

1. Committee Full Name (and Fund if applicable)	2. ID Number
JANIS SIMMONS FOR BOARD OF EDUCATION	FDF 12M

3. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Type of Committee	h. Original Receipt Date
~~HHHH~~ Simmons for Co Com 1462 Longleaf Rd Southport, NC 28461	☐ Candidate ☐ PAC ☐ Referendum ☐ Party	12/13/2024

	e. Level Registered	i. Original Receipt Amount
	☐ Federal ☒ County: ☐ State ☐ Municipality:	$ 432.28

	f. Purpose Code	j. Election Sum to Date
	O	$

b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments	k. Account Code
No Job Title	Not Employed	(1 of 3 bikes)	JES4

l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount
~~DEBIT~~	1 Bike for Wellers Wheels	12/17/2024	$ 200.00

3. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Type of Committee	h. Original Receipt Date
Tom Simmons 1462 Longleaf Rd Southport, NC 28461	☐ Candidate ☐ PAC ☐ Referendum ☐ Party	

	e. Level Registered	i. Original Receipt Amount
	☐ Federal ☐ County: ☐ State ☐ Municipality:	$

	f. Purpose Code	j. Election Sum to Date
		$

b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments	k. Account Code

l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount
			$

3. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Type of Committee	h. Original Receipt Date
	☐ Candidate ☐ PAC ☐ Referendum ☐ Party	

	e. Level Registered	i. Original Receipt Amount
	☐ Federal ☐ County: ☐ State ☐ Municipality:	$

	f. Purpose Code	j. Election Sum to Date
		$

b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments	k. Account Code

l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount
			$

4. Total only this Page	$ 200.00
5. Total of ALL CRO-1320 Pages (This line must be on line 16 of Detailed Summary Page CRO-1100)	$ 200.00

6. Purpose Codes (List detailed disbursement code in (f) above)

L - Returned to Contributor   M - Overpayment for Service   N - Exceeded Contribution Limit

P* - Reimbursement of In-Kind   O* Other

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