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   **X** No

1. Committee Information

a. Full Name

Committee to Elect Rebecca Kelley

c. ID Number

b. Mailing Address (include City, State and Zip Code)

1020 N Caswell Ave
Southport, NC 28461

d. Date Filed

1/27/25

e. Phone Number

9104430371

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2024	1/1/2024	6/30/24	Rebecca Nan Charlap Kelley

6. Type of Committee (Check One)

X 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	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
X 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

First Citizens Bank

b. Purpose

c. Account Code

RK

d. Period Begin Balance

$ 1543.50

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.

Rebecca Kelley

Printed Name of Signer

Signature of Appointed Treasurer

1/27/25

Date

FOR OFFICE USE ONLY

			Delivery Method
Date Received:	1/27/25	Employee: NP	Normal Mail
Date Postmarked:		Employee:	Registered Mail
Date Scanned:	1/27/25	Employee: NP	✓ Hand Delivered / Electronically Filed
Date Data Entered:		Employee:	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.

Amendment
☐ Yes   ☒ No

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number
Committee to Elect Rebecca Kelley	2024 MYSA	

Start of Election Cycle: January 1, 2024		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$ 1,543.50	$ 1,543.50

RECEIPTS

			Total this Reporting Period	Total this Election Cycle
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

			Total this Reporting Period	Total this Election Cycle
13) Disbursements				
13a) Operating Expenditures	(CRO-1310)		$ 500.00	$ 500.00
13b) Contributions to Candidates/Political Committees	(CRO-1310)		$	$
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)		$	$
17) In-Kind Contributions	(CRO-1510)		$	$
18) TOTAL EXPENDITURES *(Add lines 13a, 13b, 13c, 14, 15, 16 and 17)*			$ 500.00	$ 500.00
19) Cash on Hand at End *(Add lines 4 and 12 together, then subtract line 18)*			$ 1,043.50	$ 1,043.50

ADDITIONAL INFORMATION

			Total this Reporting Period	Total this Election Cycle
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)		$	$

Disbursements

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
Committee to Elect Rebecca Kelley	

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
NC State Board of Elections P.O. Box 27255 Raleigh, NC 27611-7255	**c. Level Registered (Specify)** ☐ Federal ☐ County ☒ State ☐ Municipality	**e. Election Sum to Date** $ 500.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
RK	Check	J	03/01/2024	$500.00	
				$	

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	$ 500.00
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)*	$ 500.00

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)