

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 JAVINE LEVIAN	2023 Pre election Report	
Start of Election Cycle: January 1, 2020	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	\$ 6075.02	\$ 0
RECEIPTS		
5) Aggregated Contributions from Individuals (CRO-1205)	\$	\$
6) Contributions from Individuals (CRO-1210)	\$ 455	\$ 6693.38
7) Contributions from Political Party Committees (CRO-1220)	\$	\$ 500
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)	\$	\$
11e) Exempt Purchase Price Sales (CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$ 455	\$ 7193.38
EXPENDITURES		
13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$ 884.66	\$ 1422.83
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$	\$
13c) Coordinated Party Expenditures (CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures (CRO-1315)	\$ 12.65	\$ 97.46
15) Loan Repayments (CRO-1420)	\$	\$
16) Refunds/Reimbursements from the Committee (CRO-1320)	\$	\$
17) In-Kind Contributions (CRO-1510)	\$	\$ 40.38
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 897.31	\$ 1520.24
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 5632.71	\$ 5632.71
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)	\$	\$

(40) 1560.61

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 Joanne Levitan							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
Zazzle 1800 Seaport Blvd Redwood City CA 94063 650 853 0100						Promotional Cards	
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$ 396.66	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	CC	0	9/30/23	\$396.66	Promo Cards		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
Go Daddy 2155 E. Go Daddy Way Tempe AZ 85284 480-505-8877						Software add	
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$ 25.49	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	CC	0	9/29/23	\$25.49	Software Email		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
AGE GRAPHICS 52231 STATE RT 248 LONG BOTTOM OH 45743						CAMPAIGN SIGNS	
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$ 860.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	CC	0	10/3/23	\$430.00	CAMPAIGN SIGNS		
				\$			
5. Total only this Page						\$ 852.15	
6. Total of ALL CRO-1310 Pages						\$ 884.66	
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>							
<i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>							
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>							
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)							

Aggregated Non-Media Expenditures

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 JOANNE LEVITAN							
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	/	Deduct From	O	8/15/23	\$.38	ACT BLUE PRCESSING FEE	
<input type="checkbox"/> Remove	/	CC Payment	O	9/27/23	\$.38		
<input type="checkbox"/> Add	/		O	10/7/23	\$ 1.50		
<input type="checkbox"/> Remove	/		O	10/10/23	\$.38		
<input type="checkbox"/> Add	/		O	8/28/23	\$.75		
<input type="checkbox"/> Remove	/		O	10/10/23	\$.38		
<input type="checkbox"/> Add	/		O	10/8/23	\$.50		
<input type="checkbox"/> Remove	/		O	10/2/23	\$.38		
<input type="checkbox"/> Add	/		O	9/27/23	\$.78		STRIPE FEE
<input type="checkbox"/> Remove	/		O	9/30/23	\$.78		
<input type="checkbox"/> Add	/		O	10/2/23	\$.78		
<input type="checkbox"/> Remove	/		O	10/3/23	\$.78		
<input type="checkbox"/> Add	/		O	10/7/23	\$ 2.43		
<input type="checkbox"/> Remove	/		O	10/8/23	\$.89		
<input type="checkbox"/> Add	/		O	10/12/23	\$.78		
<input type="checkbox"/> Remove	/		O	10/12/23	\$.78		
<input type="checkbox"/> Add					\$		
<input type="checkbox"/> Remove					\$		
<input type="checkbox"/> Add					\$		
<input type="checkbox"/> Remove					\$		
4. Total only this Page					\$	12.65	
5. Total of ALL CRO-1315 Pages					\$		
<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)							
E - Salaries	B* - Printing	C* - Fundraising	D - To Another Candidate				
I - Postage	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses				
O* - Other	J - Penalties	K* - Office Expenses	Q* - Donations to Legal Expense Fund				
* Codes require detailed explanation in required remarks field (g)							

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 Joanna Levitan							
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	
Theresa Accitelli 2106 Colony Pines Leland NC 28451				No Job Title			
				c. Employer's Name/Specific Field			
				NOT Employed		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		
<input type="checkbox"/>	1	CC		8/15/23	\$ 25.00		
<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	
Richard Cooper 1008 Little Egret Run Leland NC 28451				No Job Title			
				c. Employer's Name/Specific Field			
				NOT Employed		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		
<input type="checkbox"/>	1	CC		9/27/23	\$ 25.00		
<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	
				No Job Title			
				c. Employer's Name/Specific Field			
				NOT Employed		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		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 50.00	
5. Total of ALL CRO-1210 Pages						\$ 455	
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>							

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 JOANNO HEVITAN							
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	
Deborah Antonelli 2144 Cokesbury Leland NC 28451				No Job Title			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				NOT Employed		\$	
7. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	/	CC		10/7/23	\$ 100.00		
<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	
Eric Pascoe 2149 Forestview Cir. Leland NC 28451				No Job Title			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				NOT Employed		\$	
7. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	/	CC		10/12/23	\$ 25.00		
<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	
Andrea West 5027 Stoney Pt Dr. Leland NC 28451				No Job Title			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				NOT Employed		\$	
7. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	/	CC		8/28/23	\$ 50.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 175.00	
5. Total of ALL CRO-1210 Pages						\$ 455	
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>							

Contributions from Individuals

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 JOANNE LEVITAN						
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
Brian Danielson 1121 Sandy Grove Pl. Leland NC 28451				Program Mgr		
				c. Employer's Name/Specific Field Power Ten Inc.		
				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	
<input type="checkbox"/>	1	check		10/10/23	\$ 50.00	
<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
Roy Patterson 263 Windchime Way Leland NC 28451				No Job Title		
				c. Employer's Name/Specific Field NOT Employed		
				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	
<input type="checkbox"/>	1	CC		14/12/23	\$ 25.00	
<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
Helen Goldenborg 13 Shinnecock Pl Weston CT 06883				No Job Title		
				c. Employer's Name/Specific Field NOT Employed		
				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	
<input type="checkbox"/>	1	CC		10/8/23	\$ 30.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 105.00	
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>					\$ 455	

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 JOANNE HEVITAN						
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
ROYSTER HEDGEPEATH 4210 CROCKETTE RD WILMINGTON NC 28409				NO JOB TITLE		
				c. Employer's Name/Specific Field		e. Election Sum to Date
				NOT EMPLOYED		\$
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	1	CHECK		9/28/23		\$ 50.00
<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
PAUL STOVICK ^{ES} 2185 TALMAGE DR LELAND NC 28451				NO JOB TITLE		
				c. Employer's Name/Specific Field		e. Election Sum to Date
				NOT EMPLOYED		\$
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	1	CHECK		10/2/23		\$ 50.00
<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
SHELLEY ALLEN 873 OCEAN BLVD W HOLDEN BEACH NC 28462				NO JOB TITLE		
				c. Employer's Name/Specific Field		e. Election Sum to Date
				NOT EMPLOYED		\$
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	1	CC		10/2/23		\$ 25.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
4. Total only this Page					\$ 125.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 455	