

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 Re-elect Joe Pat Hatem Mayor			
b. Mailing Address (include City, State and Zip Code)		d. Date Filed	
610 A W Brown St Southport, NC 28461		7/13/23	
		e. Phone Number	
		910-367-8839	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2023	07/07/23	7/13/23	Susan DeLaney
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"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> Legal Expense Fund		Municipal <input checked="" 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 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"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:		<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	
8. Number of Fundraisers this Report		10. Special Report Name	
0			
11. Account Information		11. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
First Natineal Bank NATIONAL			
b. Purpose	c. Account Code	b. Purpose	c. Account Code
Campaign Transactions	JPH23		
	d. Period Begin Balance		d. Period Begin Balance
	\$ 0		\$
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.			
<u>Susan DeLaney</u> Printed Name of Signer		<u>[Signature]</u> Signature of Appointed Treasurer	
		<u>7-13-2023</u> Date	
FOR OFFICE USE ONLY			
Date Received:	Employee:	Delivery Method	
Date Postmarked: RECEIVED	Employee: <u>AR</u>	<input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training	
Date Scanned: JUL 13 2023	Employee: _____		
Date Data Entered: BRUNSWICK COUNTY BOARD OF ELECTIONS	Employee: _____		
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 Re-elect Joe Pat Hatem Mayor		Organizational			
Start of Election Cycle: January 1, 2022			Total this Reporting Period		Total this Election Cycle
4) Cash on Hand at Start			\$ 0		\$ 0
RECEIPTS					
5) Aggregated Contributions from Individuals		(CRO-1205)	\$		\$
6) Contributions from Individuals		(CRO-1210)	\$ 1010		\$ 1010
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)			\$ 1010		\$ 1010
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures		(CRO-1310)	\$		\$
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)	\$ 10		\$ 10
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)			\$ 10		\$ 10
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)			\$ 1000		\$ 1000
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)	\$		\$

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 Re-elect Joe pat Hatem Mayor						
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	
Joe Pat Hatem 610 A W Brown St Southport, NC 28461			Doctor			
			c. Employer's Name/Specific Field Doshier			
					e. Election Sum to Date	
					\$ 10.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		Cash	Filing Fee	07/07/2023	\$ 5.00	
<input type="checkbox"/>		Cash	Voter List	07/07/2023	\$ 5.00	
<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	
Ann Hollingsworth 956 Nicklaus Rd Southport, NC 28461			No job title			
			c. Employer's Name/Specific Field Not employed			
					e. Election Sum to Date	
					\$ 1000	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	JPH23	Check		07/10/2023	\$ 1000	
<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	
			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	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 1010.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 1010.00	

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 Re-elect Joe Pat Hatem Mayor		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip) Joe Pat Hatem 610 A W Brown St Southport, NC 28461	b. Type of Contributor <input type="checkbox"/> Individual <input checked="" 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 \$ 10.00
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Filing Fee	07/07/2023	\$ 5.00
Voter List	07/07/2023	\$ 5.00
		\$
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 <input 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 \$
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
		\$
		\$
		\$
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 <input 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 \$
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
		\$
		\$
		\$
4. Total only this Page		\$ 10.00
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		\$ 10.00