

Disclosure Report Cover

Amendment	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
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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 <i>DEANNA KAPLAN 4 School Board</i>	c. ID Number <i>DCQ6LQ</i>
b. Mailing Address (include City, State and Zip Code) <i>1514 CLOVERDALE AVENUE WINSTON - SALEM, NC 27104</i>	d. Date Filed <i>7-2-18</i>
	e. Phone Number <i>336-577-9980</i>

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
<i>2018</i>	<i>4-22-18</i>	<i>6-30-18</i>	<i>ERNEST V. LOGEMANN</i>

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	Municipal	State/County	Referendum
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	Quarterly	<input type="checkbox"/> Pre-referendum
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
		<input type="checkbox"/> Pre-election	<input checked="" type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
		Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
		<input type="checkbox"/> Mid Year	Semi-annual	
		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	

7. Type of Fund (if applicable, check one)

Booster Fund

Building Fund

Other:

8. Number of Fundraisers this Report

-0-

10. Special Report Name

11. Account Information		11. Account Information	
a. Financial Institution Full Name <i>BB+T</i>	a. Financial Institution Full Name	b. Purpose <i>CAMPAIGN RECEIPTS + DISBURSEMENTS</i>	b. Purpose
c. Account Code <i>5478</i>	c. Account Code	d. Period Begin Balance <i>\$ 207.65</i>	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.

ERNEST V. LOGEMANN *Ernest V. Logemann* *7-2-18*

Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: _____ Employee: _____

Date Postmarked: _____ Employee: _____

Date Scanned: _____ 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.

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	
DEANNA KAPLAN 4 SCHOOL BOARD	CAMPAIGN	OCQ6LQ	
Start of Election Cycle: January 1, 2018	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start	\$ 207.65	\$ -0-	
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)	\$	\$	
6) Contributions from Individuals (CRO-1210)	\$ 1,350.00	\$ 22,599.00	
7) Contributions from Political Party Committees (CRO-1220)	\$	\$ 100.00	
8) Contributions from Other Political Committees (CRO-1230)	\$	\$	
9) Loan Proceeds (CRO-1410)	\$	\$ 6,233.30	
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)	\$ 1,350.00	\$ 28,932.30	
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)	\$ 37.00	\$ 26,100.51	
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$	\$	
13c) Coordinated Party Expenditures (CRO-1310)	\$	\$ 1,311.14	
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)	\$ 37.00	\$ 27,411.65	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 1,520.65	\$ 1,520.65	
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

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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	
DEANNA KAPLAN 4 School Board						OCQ6LQ	
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	
JOHN A HOLT Houser 439 W. Academy STREET WINSTON-SALEM, NC 27101				RETIRED			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				N/A		\$ 100.00	
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"/>						\$	
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	
JACKSON D + JANIE B. WILSON 1069 E. KENT ROAD WINSTON-SALEM, NC 27104				Executives			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				Excalibur Enterprises, INC		\$ 1,000.00	
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"/>						\$	
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	
GRAHAM + JANICE BENNETT P.O. Box 2736 WINSTON-SALEM, NC 27102				EXECUTIVE			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				Quality Oil COMPANY		\$ 250.00	
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						\$ 1,350.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 1,350.00	

Disbursements

Amendment
 Yes No

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): DEANNA KAPLAN 4 SCHOOL BOARD 2. ID Number: OCQ 6 L Q

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):
BB+T
WINSTON - Salem, NC

b. Coordinated Committee Name: _____

c. Level Registered (Specify):
 Federal County:
 State Municipality:

d. Comments: Service charges

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
<u>5478</u>	<u>Debit</u>	<u>0</u>	<u>VARIOUS</u>	<u>\$ 37.00</u>	<u>Service charges</u>
				\$	

4. Payee Information: Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): _____

b. Coordinated Committee Name: _____

c. Level Registered (Specify):
 Federal County:
 State Municipality:

d. Comments: _____

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: _____

c. Level Registered (Specify):
 Federal County:
 State Municipality:

d. Comments: _____

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: \$ 37.00

6. Total of ALL CRO-1310 Pages: \$ 37.00
 (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)

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)