

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 ELECT MELISSA MASON	
b. Mailing Address (include City, State and Zip Code)	d. Date Filed
170 PARTRIDGE ROAD WILMINGTON, NC 28412	07/24/2024
	e. Phone Number
	(585) 255-0248

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2024	01/01/2024	06/30/2024	LAURIE LA FOND

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"/> Joint Fundraiser	<input type="checkbox"/> PAC	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Referendum	<input type="checkbox"/> Legal Expense Fund	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> NC Public Campaign Financing Fund		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
<input type="checkbox"/> Other:		<input type="checkbox"/> Year End	<input checked="" type="checkbox"/> Mid Year	10. Special Report Name
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
8. Number of Fundraisers this Report		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
0			<input type="checkbox"/> Special	

3. Account Information		3. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
FIRST CITIZENS BANK		REC'D IN PERSON	
b. Purpose	c. Account Code	b. Purpose	c. Account Code
CAMPAIGN EXPENDITURES	1	JUL 24 2024	
	d. Period Begin Balance	NHC BD OF ELECTIONS	d. Period Begin Balance
	\$ 101.10		\$

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

Laurie A. LaFond Laurie A. LaFond 07/24/2024
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: 7/24/24 Employee: LDON **Delivery Method**

Date Postmarked: _____ Employee: _____ Normal Mail

Date Scanned: _____ Employee: _____ Registered Mail

Date Data Entered: _____ Employee: _____ 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

JUL 24 2024

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 MELISSA MASON		2024 Mid Year Semi-Annual		
Start of Election Cycle: January 1, <u>2023</u>		Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start		\$ 101.10	\$ 0.00	
RECEIPTS				
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 0.00	\$ 15.00	
6) Contributions from Individuals	(CRO-1210)	\$ 0.00	\$ 0.00	
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0.00	\$ 0.00	
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0.00	\$ 0.00	
9) Loan Proceeds	(CRO-1410)	\$ 0.00	\$ 100.00	
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$ 0.00	\$ 0.00	
11) Other Receipt Sources				
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0.00	\$ 0.00	
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$ 0.00	\$ 0.00	
11c) Outside Sources of Income	(CRO-1250)	\$ 0.00	\$ 0.00	
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$ 0.00	\$ 0.00	
11e) Exempt Purchase Price Sales	(CRO-1265)	\$ 0.00	\$ 0.00	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		\$ 0.00	\$ 115.00	
EXPENDITURES				
13) Disbursements				
13a) Operating Expenditures	(CRO-1310)	\$ 0.00	\$ 0.00	
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 0.00	\$ 0.00	
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0.00	\$ 0.00	
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 0.00	\$ 13.90	
15) Loan Repayments	(CRO-1420)	\$ 0.00	\$ 0.00	
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$ 0.00	\$ 0.00	
17) In-Kind Contributions	(CRO-1510)	\$ 0.00	\$ 0.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 0.00	\$ 13.90	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 101.10	\$ 101.10	
ADDITIONAL INFORMATION				
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0.00		
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 100.00		
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$ 0.00		
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$ 0.00		
24) Account Transfers Within the Committee	(CRO-1720)	\$ 0.00		
25) Administrative Support	(CRO-1710)	\$ 0.00	\$ 0.00	
26) Forgiven Loans	(CRO-1440)	\$ 0.00	\$ 0.00	
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$ 0.00	\$ 0.00	
28) Contributions to be Refunded	(CRO-1215)	\$ 0.00	\$ 0.00	

Outstanding Loans

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
COMMITTEE TO ELECT MELISSA MASON			
3. Lender 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
MELISSA MASON 170 PARTRIDGE RD WILMINGTON, NC 28412		EDUCATOR	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		CAPE FEAR COMMUNITY COLLEGE	04/14/2023
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$ 100.00	\$ 100.00
k. Full Name of Lending Institution			l. Loan Number
4. Total only this Page			\$ 100.00
5. Total of ALL CRO-1430 Pages <i>(This line must be on line 21 of Detailed Summary Page CRO-1100)</i>			\$ 100.00

CRO-1430

NC State Board of Elections

December 2007

REC'D IN PERSON

JUL 24 2024

NHC BD OF ELECTIONS