

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 COMMITTEE TO RE-ELECT MICHELLE BARSON		c. ID Number
b. Mailing Address (include City, State and Zip Code) 3929 WOODHAVEN CT CLEMMONS, NC 27012		d. Date Filed 04/25/2023
		e. Phone Number (614) 404-2111

2. Report Year 2021	3. Period Start Date (mm/dd/yy) 09/22/2021	4. Period End Date (mm/dd/yy) 10/18/2021	5. Treasurer Full Name JAMES GREGORY MARINO
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6. Type of Committee (Check One) <input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund		9. Type of Report (check only one type of report from one category)		
7. Type of Fund (if applicable, check one) <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:		Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input checked="" 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	State/County <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	Referendum <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special
8. Number of Fundraisers this Report 1		10. Special Report Name		

3. Account Information		3. Account Information	
a. Financial Institution Full Name TRULIANT FEDERAL CREDIT UNION		a. Financial Institution Full Name	
b. Purpose CAMPAIGN ACCOUNT	c. Account Code MB2021	b. Purpose	c. Account Code
	d. Period Begin Balance \$		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

Michelle Barson
Printed Name of Signer

Michelle Barson
Signature of Appointed Treasurer

04/25/2023
Date

FOR OFFICE USE ONLY

Date Received:	Employee	Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training
Date Postmarked:	Employee	
Date Scanned:	Employee	
Date Data Entered:	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 MICHELLE BARSON		2021 Pre-Election			
Start of Election Cycle: January 1, 2021		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 336.00		\$ 0.00	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 115.00		\$ 370.00	
6) Contributions from Individuals (CRO-1210)		\$ 775.00		\$ 1,360.00	
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00		\$ 250.00	
8) Contributions from Other Political Committees (CRO-1230)		\$ 0.00		\$ 0.00	
9) Loan Proceeds (CRO-1410)		\$ 0.00		\$ 0.00	
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)		\$ 890.00		\$ 1,980.00	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 950.42		\$ 1,440.42	
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)		\$ 87.52		\$ 101.52	
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		\$ 250.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 1,037.94		\$ 1,791.94	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 188.06		\$ 188.06	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0.00			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 0.00			
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	

Aggregated Contributions from IndividualsPage 1 of 1

Amendment

☒ Yes ☐ No

Optional form used to report NC Contributions From Individuals of \$50 or less

1. Committee Full Name (and Fund if applicable)					2. ID Number	
COMMITTEE TO RE-ELECT MICHELLE BARSON						
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	MB2021	Credit Card		10/12/2021	\$ 20.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	MB2021	Credit Card		10/05/2021	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	MB2021	Credit Card		10/05/2021	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	MB2021	Credit Card		10/01/2021	\$ 20.00	
4. Total only this Page					\$ 115.00	
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$ 115.00	

CRO-1205

NC State Board of Elections

April 2007

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	
COMMITTEE TO RE-ELECT MICHELLE BARSON						
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
KATHLEEN HAYDEN 3840 North Lakeshore Drive CLEMMONS, NC 27012				PROFESSOR		
				c. Employer's Name/Specific Field		e. Election Sum to Date
				WAKE FOREST UNIVERSITY		
						\$ 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"/>	MB2021	Credit Card		10/05/2021		\$ 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
JACK HEATH 4856 Hearthstone Rd CLEMMONS, NC 27012				IT CONSULTANT		
				c. Employer's Name/Specific Field		e. Election Sum to Date
						\$ 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"/>	MB2021	Credit Card		10/01/2021		\$ 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
DANIEL RATH 158 Fairway Drive ADVANCE, NC 27006				REALTOR		
				c. Employer's Name/Specific Field		e. Election Sum to Date
						\$ 500.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	MB2021	Credit Card		10/02/2021		\$ 500.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
4. Total only this Page						\$ 700.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 775.00

Contributions from Individuals

Pg 2 of 2

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 MICHELLE BARSON					
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
ERIN REGA 536 Drumheller Road CLEMMONS, NC 27012			c. Employer's Name/Specific Field		
					e. Election Sum to Date
					\$ 75.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	MB2021	Credit Card		09/28/2021	\$ 75.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 75.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 775.00

CRO-1210

NC State Board of Elections

April 2007

Disbursements

Page 1 of 1

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)					2. ID Number	
COMMITTEE TO RE-ELECT MICHELLE BARSON						
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 (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
ALPHA CREATIONS PO BOX 11624 WINSTON SALEM, NC 27116				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
				e. Election Sum to Date \$ 139.29		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
MB2021	Check	A	10/17/2021	\$ 139.29	ELECTION CARDS	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
AMERICAN SCREENPRINTING NC				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
				e. Election Sum to Date \$ 811.13		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
MB2021	Electric Funds Tran	AO	10/05/2021	\$ 811.13	T-SHIRTS	
				\$		
5. Total only this Page					\$ 950.42	
6. Total of ALL CRO-1310 Pages					\$ 950.42	
<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

Page 1 of 1

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 RE-ELECT MICHELLE BARSON						
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 <input type="checkbox"/> Remove	MB2021	Debit Card	O	10/10/2021	\$ 19.24	Clear Doorknob Bags
<input type="checkbox"/> Add <input type="checkbox"/> Remove	MB2021	Debit Card	O	10/14/2021	\$ 18.52	Literature Drop Bags
<input type="checkbox"/> Add <input type="checkbox"/> Remove	MB2021	Electric Funds Tran	C	09/28/2021	\$ 3.30	COLLECTION FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	MB2021	Electric Funds Tran	C	10/01/2021	\$ 5.40	COLLECTION FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	MB2021	Electric Funds Tran	C	10/02/2021	\$ 20.30	COLLECTION FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	MB2021	Electric Funds Tran	C	10/05/2021	\$ 7.90	COLLECTION FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	MB2021	Electric Funds Tran	C	10/12/2021	\$ 1.10	COLLECTION FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	MB2021	Debit Card	B	10/05/2021	\$ 11.76	BROCHUERS
4. Total only this Page					\$	87.52
5. Total of ALL CRO-1315 Pages					\$	87.52
(This line must be on line 14 of Detailed Summary Page CRO-1100)						
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)						

CRO-1315

NC State Board of Elections

December 2009