

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 FRIENDS TO ELECT WALTER SPURLING			c. ID Number NOT-GIVEN-0-1	
b. Mailing Address (include City, State and Zip Code) 146 SAINT PETERS CH RD LAWNDALE, NC 28090			d. Date Filed 05/09/2022	
			e. Phone Number	
2. Report Year 2022	3. Period Start Date (mm/dd/yy) 01/01/2022	4. Period End Date (mm/dd/yy) 04/30/2022	5. Treasurer Full Name PAMELA D KELLER	
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"/> Joint Fundraiser <input type="checkbox"/> Referendum <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:		<input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Legal Expense Fund Municipal <input 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 Mid Year Year End <input type="checkbox"/> Final <input type="checkbox"/> Special State/County <input type="checkbox"/> Organizational Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth 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		
7. Type of Fund (if applicable, check one)		10. Special Report Name		
8. Number of Fundraisers this Report 0		CLEVELAND COUNTY BO MAY 11 2 2 PM 12:06		
3. Account Information		3. Account Information		
a. Financial Institution Full Name BANK OF OZARKS		a. Financial Institution Full Name		
b. Purpose CAMPAIGN	c. Account Code 01	b. Purpose	c. Account Code	
	d. Period Begin Balance \$ 95.14		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				
<u>Pamela D Keller</u> Printed Name of Signer		<u>Pamela D Keller</u> Signature of Appointed Treasurer		05/09/2022 Date
FOR OFFICE USE ONLY				
Date Received:	<u>5/11</u>	Employee	<u>CP</u>	Delivery Method
Date Postmarked:	_____	Employee	_____	<input checked="" type="checkbox"/> Registered Mail
Date Scanned:	_____	Employee	_____	<input type="checkbox"/> Hand Delivered
Date Data Entered:	_____	Employee	_____	<input type="checkbox"/> Electronically Filed
<input type="checkbox"/> 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	
FRIENDS TO ELECT WALTER SPURLING	2022 First Quarter	NOT-GIVEN-0-1	
Start of Election Cycle: January 1, <u>2021</u>		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 95.14	\$ 0.00
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 294.28	\$ 344.28	
6) Contributions from Individuals (CRO-1210)	\$ 298.54	\$ 298.54	
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	\$ 2,000.00	
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)	\$ 592.82	\$ 2,642.82	
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)	\$ 571.80	\$ 2,526.66	
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	\$ 0.00	
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)	\$ 571.80	\$ 2,526.66	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 116.16	\$ 116.16	
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$ 0.00		
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$ 2,000.00		
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 Individuals

Page 1 of 1

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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	
FRIENDS TO ELECT WALTER SPURLING					NOT-GIVEN-0-1	
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	01	Cash		02/08/2022	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		01/06/2022	\$	49.64
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Cash		02/22/2022	\$	30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Cash		02/22/2022	\$	30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Cash		02/08/2022	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Cash		02/08/2022	\$	40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		01/06/2022	\$	49.64
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		01/03/2022	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Cash		02/08/2022	\$	40.00
4. Total only this Page					\$	\$294.28
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$	\$294.28

CRO-1205

NC State Board of Elections

April 2007

Contributions from Individuals

Pg 1 of 1

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	
FRIENDS TO ELECT WALTER SPURLING						NOT-GIVEN-0-1	
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	
THOMAS BARNES 2976 WEST MOR DRIVE CLARKSVILLE, TN 37043				OWNER/OPERATOR			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				DUSTLESS MOBILE BLASTING OF CLARKSVILLE		\$ 99.27	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	01	Credit Card		01/06/2022	\$ 99.27		
<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	
DONALD PEELER 130 COVINGTON RD LAWNDALE, NC 28090				FARMER			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				SELF		\$ 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"/>	01	Check		01/05/2022	\$ 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	
MARSHA SPURLING 150 SAINT PETERS CH RD LAWNDALE, NC 28090				NO PROFESSION			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				NO EMPLOYER		\$ 99.27	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	01	Credit Card		01/06/2022	\$ 99.27		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 298.54	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 298.54	

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	
FRIENDS TO ELECT WALTER SPURLING						NOT-GIVEN-0-1	
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	
FACEBOOK FACEBOOK FACEBOOK, AK							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 171.51	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
01	Draft	A	04/08/2022	\$ 10.00	AD		
01	Draft	A	04/11/2022	\$ 10.00	AD		
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	
FACEBOOK FACEBOOK FACEBOOK, AK							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 171.51	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
01	Draft	A	04/11/2022	\$ 10.00	AD		
01	Draft	A	04/11/2022	\$ 15.00	AD		
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	
FACEBOOK FACEBOOK FACEBOOK, AK							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 171.51	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
01	Draft	A	04/11/2022	\$ 15.00	AD		
01	Draft	A	04/15/2022	\$ 26.51	AD		
5. Total only this Page						\$ 86.51	
6. Total of ALL CRO-1310 Pages						\$ 571.80	
<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)							

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)						2. ID Number	
FRIENDS TO ELECT WALTER SPURLING						NOT-GIVEN-0-1	
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	
FACEBOOK FACEBOOK FACEBOOK, AK							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 171.51	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
01	Draft	A	04/19/2022	\$ 35.00	AD		
01	Draft	A	04/25/2022	\$ 50.00	AD		
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	
VISTAPRINT 95 HAYDEN AVE LEXINGTON, MA 02421							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 400.29	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
01	Debit Card	B	03/02/2022	\$ 239.64	CARDS		
01	Debit Card	B	04/21/2022	\$ 160.65	PENS		
5. Total only this Page						\$ 485.29	
6. Total of ALL CRO-1310 Pages						\$ 571.80	
<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)							

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	
FRIENDS TO ELECT WALTER SPURLING		NOT-GIVEN-0-1	
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
WALTER SCOTT SPURLING 146 SAINT PETERS CH RD LAWNDALE, NC 28090		INSTRUCTOR	
		e. Start Date (mm/dd/yyyy)	
		c. Employer's Name/Specific Field	12/06/2021
		CLEVELAND COMMUNITY COLLEGE	f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$ 2,000.00	\$ 2,000.00
k. Full Name of Lending Institution		l. Loan Number	
4. Total only this Page		\$ 2,000.00	
5. Total of ALL CRO-1430 Pages (This line must be on line 21 of Detailed Summary Page CRO-1100)		\$ 2,000.00	