

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		
LEVY 2024			
b. Mailing Address (include City, State and Zip Code)	d. Date Filed		
50 LAKE FOREST DR SW PINEHURST, NC 28374	10/22/2024		
	e. Phone Number (910) 295-6628		

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2024	07/01/2024	10/19/2024	N CAROL WHEELDON

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"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund	<table border="1"> <tr> <td>Municipal</td> <td>State/County</td> <td>Referendum</td> </tr> <tr> <td> <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 <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special </td> <td> <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 </td> <td> <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 </td> </tr> </table>	Municipal	State/County	Referendum	<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 <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<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	<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
Municipal	State/County	Referendum					
<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 <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<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	<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						
<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:							
8. Number of Fundraisers this Report	0						

3. Account Information	3. Account Information
a. Financial Institution Full Name	a. Financial Institution Full Name
FIRST BANK	
b. Purpose	c. Account Code
CHECKING	A
d. Period Begin Balance	
\$ 422.34	
b. Purpose	c. Account Code
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

N CAROL WHEELDON

Printed Name of Signer

Carol Wheeldon

Signature of Appointed Treasurer

10/22/2024

Date

FOR OFFICE USE ONLY

Date Received:

RECEIVED

Employee: AB

Delivery Method

- Normal Mail
- Registered Mail
- Hand Delivered
- Electronically Filed

Date Postmarked:

OCT 28 2024

Employee: _____

Signer has not received mandatory training

Date Scanned:

Employee: _____

Date Data Entered:

MOORE BOE

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) LEVY 2024	2. Type of Report 2024 Third Quarter	3. ID Number
Start of Election Cycle: January 1, 2023		Total this Reporting Period
4) Cash on Hand at Start		\$ 422.34 \$ 0.00
RECEIPTS		
5) Aggregated Contributions from Individuals	<i>(CRO-1205)</i>	\$ 0.00 \$ 0.00
6) Contributions from Individuals	<i>(CRO-1210)</i>	\$ 1,637.00 \$ 3,594.14
7) Contributions from Political Party Committees	<i>(CRO-1220)</i>	\$ 1,500.00 \$ 2,500.00
8) Contributions from Other Political Committees	<i>(CRO-1230)</i>	\$ 0.00 \$ 269.28
9) Loan Proceeds	<i>(CRO-1410)</i>	\$ 0.00 \$ 0.00
10) Refunds/Reimbursements to the Committee	<i>(CRO-1240)</i>	\$ 0.00 \$ 0.00
11) Other Receipt Sources		
11a) Interest on Bank Accounts	<i>(CRO-1250)</i>	\$ 0.00 \$ 0.00
11b) Contributions from Not-For-Profit Organizations	<i>(CRO-1250)</i>	\$ 0.00 \$ 0.00
11c) Outside Sources of Income	<i>(CRO-1250)</i>	\$ 0.00 \$ 0.00
11d) Legal Expense Fund - Other Sources	<i>(CRO-1270)</i>	\$ 0.00 \$ 0.00
11e) Exempt Purchase Price Sales	<i>(CRO-1265)</i>	\$ 0.00 \$ 0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		\$ 3,137.00 \$ 6,363.42
EXPENDITURES		
13) Disbursements		
13a) Operating Expenditures	<i>(CRO-1310)</i>	\$ 1,236.00 \$ 2,100.00
13b) Contributions to Candidates/Political Committees	<i>(CRO-1310)</i>	\$ 0.00 \$ 0.00
13c) Coordinated Party Expenditures	<i>(CRO-1310)</i>	\$ 0.00 \$ 0.00
14) Aggregated Non-Media Expenditures	<i>(CRO-1315)</i>	\$ 20.00 \$ 102.94
15) Loan Repayments	<i>(CRO-1420)</i>	\$ 0.00 \$ 0.00
16) Refunds/Reimbursements from the Committee	<i>(CRO-1320)</i>	\$ 0.00 \$ 0.00
17) In-Kind Contributions	<i>(CRO-1510)</i>	\$ 1,112.00 \$ 2,969.14
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 2,368.00 \$ 5,172.08
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 1,191.34 \$ 1,191.34
ADDITIONAL INFORMATION		
20) Non-Monetary Gifts Given to Other Committees	<i>(CRO-1330)</i>	\$ 0.00
21) Outstanding Loans (incl. ones from other campaigns)	<i>(CRO-1430)</i>	\$ 0.00
22) Debts and Obligations owed by the Committee	<i>(CRO-1610)</i>	\$ 0.00
23) Debts and Obligations owed to the Committee	<i>(CRO-1620)</i>	\$ 0.00
24) Account Transfers Within the Committee	<i>(CRO-1720)</i>	\$ 0.00
25) Administrative Support	<i>(CRO-1710)</i>	\$ 0.00 \$ 0.00
26) Forgiven Loans	<i>(CRO-1440)</i>	\$ 0.00 \$ 0.00
27) 48-Hour Notice Reports Sum	<i>(CRO-2220)</i>	\$ 0.00 \$ 0.00
28) Contributions to be Refunded	<i>(CRO-1215)</i>	\$ 0.00 \$ 0.00

Contributions from Individuals

Pg 1 of 2

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		
LEVY 2024					
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 NOT CURRENTLY EMPLOYED	d. Comments e. Election Sum to Date \$ 100.00	
KENNETH* JAMES BENWAY 8 MARTIN WAY WHISPERING PINES, NC 28327			c. Employer's Name/Specific Field NOT CURRENTLY EMPLOYED		
f. Prior			g. Account Code	h. Form of Payment	i. In-Kind Description
<input type="checkbox"/> A				Check	
f. Prior			g. Account Code	h. Form of Payment	i. In-Kind Description
<input type="checkbox"/>			A	Check	
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 NOT CURRENTLY EMPLOYED	d. Comments e. Election Sum to Date \$ 250.00	
PAULINE BRUNO 135 JUNIPER CREEK BLVD PINEHURST, NC 28374			c. Employer's Name/Specific Field NOT CURRENTLY EMPLOYED		
f. Prior			g. Account Code	h. Form of Payment	i. In-Kind Description
<input type="checkbox"/>			A	Check	
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 NOT CURRENTLY EMPLOYED	d. Comments e. Election Sum to Date \$ 75.00	
JAMES LEGG 702 SUN RD ABERDEEN, NC 28315			c. Employer's Name/Specific Field NOT CURRENTLY EMPLOYED		
f. Prior			g. Account Code	h. Form of Payment	i. In-Kind Description
<input type="checkbox"/>			A	Check	
4. Total only this Page					
\$ 425.00					
5. Total of ALL CRO-1210 Pages					
(This line must be on line 6 of Detailed Summary Page CRO-1100)					
\$ 1,637.00					

Contributions from Individuals

Pg 2 of 2

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) LEVY 2024		2. ID Number										
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip) ROBERT LEVY 230 SW BROAD ST SOUTHERN PINES, NC 28387</td> <td>b. Job Title/Profession NOT CURRENTLY EMPLOYED</td> <td>d. Comments</td> </tr> <tr> <td></td> <td>c. Employer's Name/Specific Field</td> <td></td> </tr> <tr> <td></td> <td></td> <td>e. Election Sum to Date \$ 3,069.14</td> </tr> </table>				a. Full Name, Mailing Address & Phone (include city, state, & zip) ROBERT LEVY 230 SW BROAD ST SOUTHERN PINES, NC 28387	b. Job Title/Profession NOT CURRENTLY EMPLOYED	d. Comments		c. Employer's Name/Specific Field				e. Election Sum to Date \$ 3,069.14
a. Full Name, Mailing Address & Phone (include city, state, & zip) ROBERT LEVY 230 SW BROAD ST SOUTHERN PINES, NC 28387	b. Job Title/Profession NOT CURRENTLY EMPLOYED	d. Comments										
	c. Employer's Name/Specific Field											
		e. Election Sum to Date \$ 3,069.14										
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount							
<input type="checkbox"/>	A	In-Kind	NEWSPAPER AD OCT	09/19/2024	\$ 178.00							
<input type="checkbox"/>	A	In-Kind	NEWSPAPER AD NOV	09/19/2024	\$ 178.00							
<input type="checkbox"/>	A	In-Kind	RADIO ADS	10/18/2024	\$ 756.00							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove												
a. Full Name, Mailing Address & Phone (include city, state, & zip) KAREN THYNE 640 REDWOOD DR SOUTHERN PINES, NC 28387		b. Job Title/Profession NOT CURRENTLY EMPLOYED	d. Comments									
		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"/>	A	Check		08/06/2024	\$ 100.00							
<input type="checkbox"/>					\$							
<input type="checkbox"/>					\$							
4. Total only this Page				\$ 1,212.00								
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)				\$ 1,637.00								

Contributions from Political Party Committees Pg 1 of 1

Amendment
 Yes No

Use this form to report contributions from a political party

1. Committee Full Name (and Fund if applicable)		2. ID Number	
LEVY 2024			
3. Contributor Information		<input type="checkbox"/> Add	<input type="checkbox"/> Remove
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Comments	
MOORE* COUNTY REPUBLICAN MEN'S CLUB PO BOX 1812 SOUTHERN PINES, NC 28388 (910) 695-8852		c. Election Sum to Date	
		\$ 1,000.00	
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)
A	Check		09/09/2024
			\$
			\$
3. Contributor Information		<input type="checkbox"/> Add	<input type="checkbox"/> Remove
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Comments	
MOORE*COUNTY REPUBLICAN PARTY PO BOX 4414 PINEHURST, NC 28374		c. Election Sum to Date	
		\$ 1,500.00	
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)
A	Check		09/09/2024
			\$
			\$
4. Total only this Page		\$ 1,500.00	
5. Total of ALL CRO-1220 Pages (This line must be on line 7 of Detailed Summary Page CRO-1100)		\$ 1,500.00	

Disbursements

Pg 1 of 1 Yes No

Amendment

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) LEVY 2024		2. ID Number															
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 <table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td><input type="checkbox"/> Add <input type="checkbox"/> Remove</td> <td>b. Coordinated Committee Name</td> <td>d. Comments</td> </tr> <tr> <td>WEEB TALK RADIO 1650 MIDLAND RD SOUTHERN PINES, NC 28887</td> <td></td> <td>c. Level Registered (Specify)</td> <td></td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:</td> <td>e. Election Sum to Date</td> </tr> <tr> <td></td> <td></td> <td></td> <td>\$ 2,100.00</td> </tr> </table>		a. Full Name, Mailing Address & Phone (include city, state, & zip)	<input type="checkbox"/> Add <input type="checkbox"/> Remove	b. Coordinated Committee Name	d. Comments	WEEB TALK RADIO 1650 MIDLAND RD SOUTHERN PINES, NC 28887		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				\$ 2,100.00
a. Full Name, Mailing Address & Phone (include city, state, & zip)	<input type="checkbox"/> Add <input type="checkbox"/> Remove	b. Coordinated Committee Name	d. Comments														
WEEB TALK RADIO 1650 MIDLAND RD SOUTHERN PINES, NC 28887		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														
			\$ 2,100.00														
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks												
A	Check	A	09/23/2024	\$ 864.00	RADIO ADS												
A	Check	A	10/18/2024	\$ 372.00	RADIO ADS												
5. Total only this Page				\$ 1,236.00													
6. Total of ALL CRO-1310 Pages <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>				\$ 1,236.00													
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>																	
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 1Amendment
 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		
LEVY 2024						
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	A	Draft	O	07/31/2024	\$ 10.00	BANK CHGS
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Draft	O	08/30/2024	\$ 10.00	BANK CHARGES
4. Total only this Page				\$ 20.00		
5. Total of ALL CRO-1315 Pages <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>				\$ 20.00		
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

In-Kind Contributions

Pg 1 of 1 Yes No

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) LEVY 2024		2. ID Number	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip) ROBERT LEVY 230 SW BROAD ST SOUTHERN PINES, NC 28387		b. Type of Contributor <input checked="" 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 \$ 3,069.14	
e. Description NEWSPAPER AD OCT		f. Date (mm/dd/yyyy) 09/19/2024	g. Fair Market Amount \$ 178.00
NEWSPAPER AD NOV		09/19/2024	\$ 178.00
RADIO ADS		10/18/2024	\$ 756.00
4. Total only this Page		\$ 1,112.00	
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		\$ 1,112.00	

CRO-1510

NC State Board of Elections

December 2007