

Electioneering Communications Report

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

This form should be accompanied by forms CRO-2320, CRO-2330 and CRO-2340. For statutory guidance, please refer to N.C.G.S. § 163-278.6(8j), N.C.G.S. § 163-278.6(8k) and N.C.G.S. § 163-278.12C.

a. Full Name of Entity Making Disbursement HOME BUILDERS EDUCATION FUND, INC.		d. Entity Type (Check One) <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Other Organization <input type="checkbox"/> Nonprofit Organization		e. Federal ID Number (if applicable)	
b. Mailing Address (include City, State and Zip Code) and Phone Number PO BOX 99090 RALEIGH NC 27624-9090		f. Date Filed 04/12/2018		g. Employer's Name or Principal Place of Business	
				h. Occupation	

<input checked="" type="checkbox"/> Initial	Quarterly: <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth
<input type="checkbox"/> 48 Hour	Semi-Annual: <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Other (Specify) _____
Period Start Date (mm/dd/yyyy) 2018	Period End Date (mm/dd/yyyy) 04/12/2018

a. Full Name of Entity's Custodian of Books and Accounts MICHAEL C. ELLEDGE		BOARD OF ELECTIONS APR 12 2018	
b. Mailing Address (include City, State and Zip Code) and Phone Number PO BOX 99090 RALEIGH NC 27624-9090 (919) 676-9090		c. Employer's Name or Principal Place of Business NORTH CAROLINA HOME BUILDERS ASSOCIATION, INC.	
		d. Occupation CONTROLLER	
		\$ 300,000.00	
		\$ 129,835.00	

CERTIFICATION

I certify that this statement is complete, true and correct. As provided by N.C.G.S. 163-278.32 this certification is treated as being made under oath and any person making this certification knowing the information to be untrue is guilty of a class I felony.

MICHAEL C ELLEDGE Michael C. Elledge 4/12/18
 Printed Name of Signer Signature Date

Receipts for Electioneering Communications

An organization should use this form to report all electioneering communication donations that exceeds \$1,000 in aggregated amounts from the same donor during the reporting period. This form should be accompanied by forms CRO-2310, CRO-2320 and CRO-2340

a. Item Num	b. Donor's Full Name, Mailing Address & Phone Number (Include city, state, and zip)	c. Principal Occupation of Donor	d. Date (mm/dd/yyyy)	e. Amount
1	NORTH CAROLINA HOME BUILDERS ASSOCIATION, INC. 5580 CENTERVIEW DRIVE SUITE 415 RALEIGH, NC 27606-9090		10/20/2017	\$ 200,000.00
2	NORTH CAROLINA HOME BUILDERS ASSOCIATION, INC. 5580 CENTERVIEW DRIVE SUITE 415 RALEIGH, NC 27606-9090		12/27/2017	\$ 100,000.00
Total Receipts				\$ 300,000.00
Total Receipts Available				\$ 300,000.00

CRO-2330

NC State Board of Elections

August 2010

Incurred Costs for Electioneering Communications

An organization should use this form to report the entity with which costs were incurred for the electioneering communication as well as candidates identified or those to be identified. This form should be accompanied by forms CRO-2310, CRO-2320, and CRO-2330

Disbursement Information															
Item Number	Start Date (mm/dd/yyyy)	End Date (mm/dd/yyyy)	Purpose (including title(s) of candidate(s))												
1	04/02/2018	04/09/2018	DIRECT MAIL ADVERTISING												
CORNERSTONE SOLUTIONS NC, LLC 1101 HAYNES ST., SUITE 103 RALEIGH NC 27604			\$ 127,335.00												
<table border="1"> <thead> <tr> <th>Candidate Full Name</th> <th>Office Sought</th> <th>Amount</th> </tr> </thead> <tbody> <tr> <td>DON DAVIS</td> <td> <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>5</u> <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Other Officer _____ Co./Dst. _____ </td> <td>\$ 11,034.30</td> </tr> <tr> <td>TOM McINNIS</td> <td> <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>25</u> <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Other Officer _____ Co./Dst. _____ </td> <td>\$ 9,656.68</td> </tr> <tr> <td>SAM WATFORD</td> <td> <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>29</u> <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Other Officer _____ Co./Dst. _____ </td> <td>\$ 10,646.55</td> </tr> </tbody> </table>				Candidate Full Name	Office Sought	Amount	DON DAVIS	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>5</u> <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Other Officer _____ Co./Dst. _____	\$ 11,034.30	TOM McINNIS	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>25</u> <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Other Officer _____ Co./Dst. _____	\$ 9,656.68	SAM WATFORD	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>29</u> <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Other Officer _____ Co./Dst. _____	\$ 10,646.55
Candidate Full Name	Office Sought	Amount													
DON DAVIS	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>5</u> <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Other Officer _____ Co./Dst. _____	\$ 11,034.30													
TOM McINNIS	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>25</u> <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Other Officer _____ Co./Dst. _____	\$ 9,656.68													
SAM WATFORD	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>29</u> <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Other Officer _____ Co./Dst. _____	\$ 10,646.55													
1	04/02/2018	04/09/2018	DIRECT MAIL ADVERTISING												
CORNERSTONE SOLUTIONS NC, LLC 1101 HAYNES ST., SUITE 103 RALEIGH NC 27604			\$ 127,335.00												
<table border="1"> <thead> <tr> <th>Candidate Full Name</th> <th>Office Sought</th> <th>Amount</th> </tr> </thead> <tbody> <tr> <td>JOYCE KRAWIEC</td> <td> <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>31</u> <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Other Officer _____ Co./Dst. _____ </td> <td>\$ 13,314.60</td> </tr> <tr> <td>DAN BISHOP</td> <td> <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>39</u> <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Other Officer _____ Co./Dst. _____ </td> <td>\$ 10,343.95</td> </tr> <tr> <td>ANDY WELLS</td> <td> <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>42</u> <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Other Officer _____ Co./Dst. _____ </td> <td>\$ 11,155.34</td> </tr> </tbody> </table>				Candidate Full Name	Office Sought	Amount	JOYCE KRAWIEC	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>31</u> <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Other Officer _____ Co./Dst. _____	\$ 13,314.60	DAN BISHOP	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>39</u> <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Other Officer _____ Co./Dst. _____	\$ 10,343.95	ANDY WELLS	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>42</u> <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Other Officer _____ Co./Dst. _____	\$ 11,155.34
Candidate Full Name	Office Sought	Amount													
JOYCE KRAWIEC	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>31</u> <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Other Officer _____ Co./Dst. _____	\$ 13,314.60													
DAN BISHOP	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>39</u> <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Other Officer _____ Co./Dst. _____	\$ 10,343.95													
ANDY WELLS	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>42</u> <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Other Officer _____ Co./Dst. _____	\$ 11,155.34													
2 Total Disbursements THIS Page			\$ 127,335.00												
3 Total Disbursements ALL Pages			\$ 129,835.00												

Incurring Costs for Electioneering Communications

An organization should use this form to report the entity with which costs were incurred for the electioneering communication as well as candidates identified or those to be identified. This form should be accompanied by forms CRO-2310, CRO-2320, and CRO-2330

1	04/02/2018	04/09/2018	DIRECT MAIL ADVERTISING	
CORNERSTONE SOLUTIONS NC, LLC 1101 HAYNES ST., SUITE 103 RALEIGH NC 27604				\$ 127,335.00
Candidate Full Name		Office Sought		Amount
SHIRLEY RANDLEMAN		<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>45</u> <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Other Officer: _____ Co./Dst. _____		\$ 11,470.25
Candidate Full Name		Office Sought		Amount
JIMMY DIXON		<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>4</u> <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Other Officer: _____ Co./Dst. _____		\$ 4,094.90
Candidate Full Name		Office Sought		Amount
PAT McELRAFT		<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>13</u> <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Other Officer: _____ Co./Dst. _____		\$ 5,608.96
1	04/02/2018	04/09/2018	DIRECT MAIL ADVERTISING	
CORNERSTONE SOLUTIONS NC, LLC 1101 HAYNES ST., SUITE 103 RALEIGH NC 27604				\$ 127,335.00
Candidate Full Name		Office Sought		Amount
JON HARDISTER		<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>59</u> <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Other Officer: _____ Co./Dst. _____		\$ 5,233.52
Candidate Full Name		Office Sought		Amount
LARRY POTTS		<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>81</u> <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Other Officer: _____ Co./Dst. _____		\$ 5,476.63
Candidate Full Name		Office Sought		Amount
SARAH STEVENS		<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>90</u> <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Other Officer: _____ Co./Dst. _____		\$ 4,595.49
2. CANDIDATE IDENTIFIED BUT NOT LISTED				\$ 127,335.00
3. CANDIDATE IDENTIFIED BUT NOT LISTED				\$ 129,835.00

CRO-2340

Incurred Costs for Electioneering Communications

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1	04/02/2018	04/09/2018	DIRECT MAIL ADVERTISING	
CORNERSTONE SOLUTIONS NC, LLC 1101 HAYNES ST., SUITE 103 RALEIGH NC 27604				\$ 127,335.00
Candidate Full Name	Office Sought		Amount	
JONATHAN JORDAN	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>93</u> <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Other Officer: _____ Co./Dst. _____		\$ 6,128.00	
Candidate Full Name	Office Sought		Amount	
JASON SAINÉ	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>97</u> <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Other Officer: _____ Co./Dst. _____		\$ 6,021.32	
Candidate Full Name	Office Sought		Amount	
RODNEY MOORE	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>99</u> <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Other Officer: _____ Co./Dst. _____		\$ 4,632.42	
1	04/02/2018	04/09/2018	DIRECT MAIL ADVERTISING	
CORNERSTONE SOLUTIONS NC, LLC 1101 HAYNES ST., SUITE 103 RALEIGH NC 27604				\$ 127,335.00
Candidate Full Name	Office Sought		Amount	
CARLA CUNNINGHAM	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>106</u> <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Other Officer: _____ Co./Dst. _____		\$ 4,541.12	
Candidate Full Name	Office Sought		Amount	
KELLY HASTINGS	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>110</u> <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Other Officer: _____ Co./Dst. _____		\$ 3,380.97	
Candidate Full Name	Office Sought		Amount	
	<input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Other Officer: _____ Co./Dst. _____		\$	
				\$ 127,335.00
				\$ 129,835.00

CRO-2340

Incurring Costs for Electioneering Communications

An organization should use this form to report the entity with which costs were incurred for the electioneering communication as well as candidates identified or those to be identified. This form should be accompanied by forms CRO-2310, CRO-2320, and CRO-2330

Disbursement Information			
Page	Date	Date	Description
2	04/06/2018	04/16/2018	RADIO ADVERTISING
MEDIA PARTNERS, INC. 13200 STRICKLAND ROAD, SUITE 114-153 RALEIGH NC 27613			\$ 2,500.00
Candidate Full Name	Office Sought		Amount
TOM MCINNIS	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>25</u> <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Other Officer: _____ Co./Dst. _____		\$ 2,500.00
Candidate Full Name	Office Sought		Amount
	<input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Other Officer: _____ Co./Dst. _____		\$
Candidate Full Name	Office Sought		Amount
	<input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Other Officer: _____ Co./Dst. _____		\$
			\$
Candidate Full Name	Office Sought		Amount
	<input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Other Officer: _____ Co./Dst. _____		\$
Candidate Full Name	Office Sought		Amount
	<input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> Co./Municipal Office _____ Co. _____ <input type="checkbox"/> Council of State (specify): _____ <input type="checkbox"/> Other Officer: _____ Co./Dst. _____		\$
Total Disbursement on this Page			\$ 2,500.00
Total Disbursement All Pages			\$ 129,835.00