

Disclosure Report Cover

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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 CRYSTAL COAST REPUBLICAN WOMEN		c. ID Number STA-C4349N-C-001	
b. Mailing Address (Include City, State and Zip Code) 115 PINE BLUFF DRIVE MOREHEAD CITY, NC 28557		d. Date Filed 07/07/2024	
		e. Phone Number 678-836-7517	
2. Report Year 2024	3. Period Start Date (mm/dd/yy) 02/18/2024	4. Period End Date (mm/dd/yy) 06/30/2024	5. Treasurer Full Name JENNIFER COX MANN
6. Type of Committee (Check One) <input type="checkbox"/> Candidate Campaign <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> Referendum <input checked="" type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Legal Expense Fund		9. Type of Report (check only one type of report from one category) 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 <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 checked="" 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	
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:		10. Special Report Name	
8. Number of Fundraisers this Report 3			
3. Account Information		3. Account Information	
a. Financial Institution Full Name BB&T		a. Financial Institution Full Name	
b. Purpose OPERATING ACCOUNT	c. Account Code 04	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 16,779.44		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			
JENNIFER COX MANN Printed Name of Signer		[Signature] Signature of Appointed Treasurer	
		07/07/2024 Date	
FOR OFFICE USE ONLY			
Date Received: 07/10/2024	Employee: [Signature]	Delivery Method <input type="checkbox"/> Normal Mail <input checked="" type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input checked="" type="checkbox"/> Electronically Filed	
Date Postmarked: 7/9/24	Employee: [Signature]	<input type="checkbox"/> Signer has not received mandatory training	
Date Scanned: 7/6/24	Employee: [Signature]		
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	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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	
CRYSTAL COAST REPUBLICAN WOMEN	2024 Second Quarter	STA-C4349N-C-001	
Start of Election Cycle: January 1, <u>2023</u>		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 25,861.76	\$ 39,312.94
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 1,089.00	\$ 3,519.00
6) Contributions from Individuals	(CRO-1210)	\$ 40,816.15	\$ 83,405.73
7) Contributions from Political Party Committees	(CRO-1220)	\$ 129.90	\$ 404.90
8) Contributions from Other Political Committees	(CRO-1230)	\$ 165.00	\$ 1,715.00
9) Loan Proceeds	(CRO-1410)	\$ 0.00	\$ 0.00
10) Refunds/Reimbursements to the Committee	(CRO-1340)	\$ 436.27	\$ 536.27
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	\$ 1,292.00
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)		\$ 42,636.32	\$ 90,872.90
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 16,421.27	\$ 53,771.54
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 300.00	\$ 10,717.26
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0.00	\$ 0.00
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 121.89	\$ 927.36
15) Loan Repayments	(CRO-1420)	\$ 0.00	\$ 0.00
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$ 270.77	\$ 1,826.49
17) In-Kind Contributions	(CRO-1510)	\$ 12,236.77	\$ 23,795.81
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 29,350.70	\$ 91,038.46
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 39,147.38	\$ 39,147.38
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

CCRN
115 Pine Bluff Drive
Morehead City, NC 28557



Retail



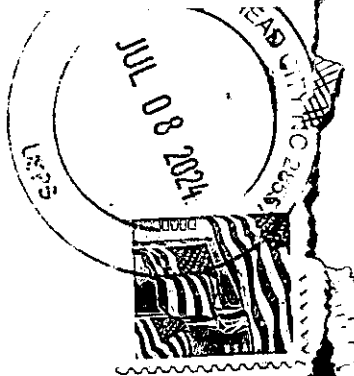
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\$4.40

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FCM LETTER
MOREHEAD CITY, NC 28557
JUL 08, 2024



PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE
CERTIFIED MAIL



9589 0710 5270 0291 3531 10

NC State Board of Elections
PO Box 27255
Raleigh, NC 27611-7255

2761187255 8025

