

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		REPORT FILED ELECTRONICALLY SEE STATE WEBSITE FOR COMPLETE REPORT WWW.NCSBE.GOV		c. ID Number						
Campaign for Marsie West				7CQUUQ						
b. Mailing Address (include City, State and Zip Code)				d. Date Filed						
331 Carolina Circle Winston Salem, NC 27104				02/22/2026						
				e. Phone Number						
				(919) 622-5141						
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name							
2026	01/01/2026	02/14/2026	Patricia J Gillenwater							
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"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> Legal Expense Fund		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>Municipal</th> <th>State/County</th> <th>Referendum</th> </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 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 Quarterly <input checked="" 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 </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 Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<input type="checkbox"/> Organizational Quarterly <input checked="" 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	<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								
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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"/> Other		RECEIVED 2026 FEB 23 PM 12:13 FORS COUNTY BOARD OF ELECTIONS								
8. Number of Fundraisers this Report										
0										
11. Account Information		11. Account Information								
a. Financial Institution Full Name		a. Financial Institution Full Name								
Truist Bank										
b. Purpose	c. Account Code	b. Purpose	c. Account Code							
Campaign revenues and expenses	1									
	d. Period Begin Balance		d. Period Begin Balance							
	\$9,132.29		\$							
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 of Elections.										
Patricia Jane Gillenwater Printed Name of Signer		pgillenwater Signature of Appointed Treasurer		2/23/26 Date						
FOR OFFICE USE ONLY										
Date Received: _____	Employee: _____	Delivery Method								
Date Postmarked: _____	Employee: _____	<input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed								
Date Scanned: _____	Employee: _____	<input type="checkbox"/> Signer has not received mandatory training								
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	
Campaign for Marsie West	First Quarter Plus	7CQQUQ	
Start of Election Cycle: January 1, <u>2023</u>	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start	\$9,132.29	\$645.08	
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)	\$50.00	\$910.00	
6) Contributions from Individuals (CRO-1210)	\$3,950.00	\$12,523.30	
7) Contributions from Political Party Committees (CRO-1220)	\$1,000.00	\$2,000.00	
8) Contributions from Other Political Committees (CRO-1230)	\$0	\$0	
9) Loan Proceeds (CRO-1410)	\$0	\$0	
10) Refunds/Reimbursements to the Committee (CRO-1240)	\$0	\$0	
11) Other Receipt Sources			
11a) Interest on Bank Accounts (CRO-1250)	\$0	\$0	
11b) Contributions from Not-For-Profit Organizations (CRO-1250)	\$0	\$0	
11c) Outside Sources of Income (CRO-1250)	\$0	\$0	
11d) Legal Expense Fund - Other Sources (CRO-1270)	\$0	\$0	
11e) Exempt Purchase Price Sales (CRO-1265)	\$0	\$0	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)	\$5,000.00	\$15,433.30	
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)	\$2,344.69	\$2,935.11	
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$0	\$0	
13c) Coordinated Party Expenditures (CRO-1310)	\$0	\$0	
14) Aggregated Non-Media Expenditures (CRO-1315)	\$0	\$82.37	
15) Loan Repayments (CRO-1420)	\$0	\$0	
16) Refunds/Reimbursements from the Committee (CRO-1320)	\$0	\$0	
17) In-Kind Contributions (CRO-1510)	\$1,000.00	\$2,273.30	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$3,344.69	\$5,290.78	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$10,787.60	\$10,787.60	
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$0		
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$0		
22) Debts and Obligations owed by the Committee (CRO-1610)	\$0		
23) Debts and Obligations owed to the Committee (CRO-1620)	\$0		
24) Account Transfers Within the Committee (CRO-1720)	\$0		
25) Administrative Support (CRO-1710)	\$0	\$0	
26) Forgiven Loans (CRO-1440)	\$0	\$0	
27) 48-Hour Notice Reports Sum (CRO-2220)	\$0	\$0	
28) Contributions to be Refunded (CRO-1215)	\$0	\$0	