

Disclosure Report Cover

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.

Amendment
☒ Yes ☐ No

1. Committee Information	
a. Full Name Campaign for Marsie West	c. ID Number 7CQBV9
b. Mailing Address (Include City, State and Zip Code) Marsie West 331 Carolina Circle Winston Salem, NC 27104	d. Date Filed 1/7/2026 e. Phone Number

2. Report Year 2024	3. Period Start Date (mm/dd/yyyy) 1/01/2024	4. Period End Date (mm/dd/yyyy) 02/17/2024	5. Treasurer Full Name Maribeth T. Tanen
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6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
☒ Candidate Campaign	☐ Party	☐ Organizational	☒ Organizational	☐ Organizational
☐ PAC	☐ Referendum	☐ Thirty-five day	☐ Quarterly	☐ Pre-referendum
☐ Independent Expenditure	☐ Joint Fundraiser	☐ Pre-primary	☒ First	☐ Final
☐ Legal Expense Fund		☐ Pre-election	☐ Second	☐ Supplemental Final
7. Type of Fund (if applicable, check one)		☐ Pre-runoff	☐ Third	☐ Annual
☐ Booster Fund		☐ Semi-annual	☐ Fourth	☐ Special
☐ Building Fund		☐ Mid Year	☐ Semi-annual	
☐ Other:		☐ Year End	☐ Mid Year	
8. Number of Fundraisers this Report		☐ Final	☐ Year End	10. Special Report Name
		☐ Special	☐ Final	
			☐ Special	

11. Account Information		11. Account Information	
a. Financial Institution Full Name Truist Bank	a. Financial Institution Full Name	b. Purpose Campaign donations and expenses	b. Purpose
c. Account Code 1	c. Account Code	d. Period Begin Balance \$ 347.85	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 of Elections.

Marsie K. West
 Printed Name of Signer

[Signature]
 Signature of Appointed Treasurer

1/7/2026
 Date

FOR OFFICE USE ONLY

Date Received:	Employee:	Delivery Method ☐ Normal Mail ☐ Registered Mail ☐ Hand Delivered ☐ Electronically Filed ☐ Signer has not received mandatory training
Date Postmarked:	Employee:	
Date Scanned:	Employee:	
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

☒ X

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		1st Quarter 2024		7CQQV9	
Start of Election Cycle: January 2023				Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start				\$ 347.85	0.00
RECEIPTS					
5) Aggregated Contributions from Individuals		<i>(CRO-1205)</i>	\$ 366.68	\$ 436.68	
6) Contributions from Individuals		<i>(CRO-1210)</i>	\$ 2,170.34	\$ 2,842.38	
7) Contributions from Political Party Committees		<i>(CRO-1220)</i>	\$ 808.85	\$ 808.85	
8) Contributions from Other Political Committees		<i>(CRO-1230)</i>	\$	\$ 0.00	
9) Loan Proceeds		<i>(CRO-1410)</i>	\$	\$ 300.00	
10) Refunds/Reimbursements To the Committee		<i>(CRO-1240)</i>	\$	\$ 0.00	
11) Other Receipt Sources					
11a) Interest on Bank Accounts		<i>(CRO-1250)</i>	\$	\$ 0.00	
11b) Contributions from Not-for-Profit Organizations		<i>(CRO-1250)</i>	\$	\$ 0.00	
11c) Outside Sources of Income		<i>(CRO-1250)</i>	\$	\$ 0.00	
11d) Legal Expense Fund – Other Sources		<i>(CRO-1270)</i>	\$	\$ 0.00	
11 e) Exempt Purchase Price Sales		<i>(CRO-1265)</i>	\$	\$ 0.00	
12) TOTAL RECEIPTS <i>(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)</i>			\$ 3,345.87	\$ 4,387.91	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures		<i>(CRO-1310)</i>	\$ 2,102.44	\$ 2,124.59	
13b) Contributions to Candidates/Political Committees		<i>(CRO-1310)</i>	\$ 224.12	\$ 224.12	
13c) Coordinated Party Expenditures		<i>(CRO-1310)</i>	\$	\$ 0.00	
14) Aggregated Non-Media Expenditures		<i>(CRO-1315)</i>	\$	\$ 0.00	
15) Loan Repayments		<i>(CRO-1420)</i>	\$	\$ 0.00	
16) Refunds/Reimbursements From the Committee		<i>(CRO-1320)</i>	\$	\$ 0.00	
17) In-Kind Contributions		<i>(CRO-1510)</i>	\$ 345.34	\$ 1,017.38	
18) TOTAL EXPENDITURES <i>(Add lines 13a, 13b, 13c, 14, 15, 16 and 17)</i>			\$ 2,671.90	\$ 3,366.09	
19) Cash on Hand at End <i>(Add lines 4 and 12 together, then subtract line 18)</i>			\$ 1,021.82	\$ 1,021.82	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees		<i>(CRO-1330)</i>	\$		
21) Outstanding Loans (incl. ones from other campaigns)		<i>(CRO-1430)</i>	\$ 300.00		
22) Debts and Obligations owed By the Committee		<i>(CRO-1610)</i>	\$		
23) Debts and Obligations owed To the Committee		<i>(CRO-1620)</i>	\$		
24) Account Transfers Within the Committee		<i>(CRO-1720)</i>	\$		
25) Administrative Support		<i>(CRO-1710)</i>	\$	\$ 0.00	
26) Forgiven Loans		<i>(CRO-1440)</i>	\$	\$ 0.00	
27) 48-Hour Notice Reports Sum		<i>(CRO-2220)</i>	\$	\$ 0.00	
28) Contributions to be Refunded		<i>(CRO-1215)</i>	\$	\$ 0.00	

Aggregated Contributions from Individuals

Page 1 of 1

Amendment

X	Yes
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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		
Campaign for Marsie West				7CQQV9		
3. Contributor Information						
a. Amend		b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
	Add		ETF		1/2/2024	\$ 15.00
	Remove					
	Add		ETF		1/2/2024	\$ 50.00
	Remove					
	Add		ETF		1/1/2024	\$ 10.00
	Remove					
	Add		ETF		1/22/2024	\$ 33.33
	Remove					
	Add		ETF		1/22/2024	\$ 50.00
	Remove					
	Add		ETF		1/24/2024	\$ 8.33
	Remove					
	Add		Cash		2/7/2024	\$ 13.33
	Remove					
	Add		Check		2/7/2024	\$ 50.00
	Remove					
	Add		Check		2/7/2024	\$ 20.00
	Remove					
	Add		ETF		1/28/2024	\$ 50.00
	Remove					
	Add		ETF		2/4/2024	\$ 33.33
	Remove					
	Add		ETF		2/4/2024	\$ 33.33
	Remove					
	Add					\$
	Remove					
	Add					\$
	Remove					
	Add					\$
	Remove					
	Add					\$
	Remove					
	Add					\$
	Remove					
	Add					\$
	Remove					
	Add					\$
	Remove					
4. Total only this Page					\$	366.67
5. Total of ALL CRO-1205 Pages					\$	366.67
(This line must be on line 5 of Detailed Summary Page CRO-1100)						

CRO-1205

Apr-07

0
0
4
4

2006 JAN - 7 PM 1:13

Contributions from Individuals

Pg 1 of 3 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) Campaign for Marsie West						2. ID Number 7CQV9	
3. Contributor Information ☐ Add ☒ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) Marsie West 331 Carolina Circle Winston Salem, NC 27104			b. Job Title/Profession Consultant		d. Comments		
			c. Employer's Name/Specific Field Enosys Group Financial Systems Consulting		e. Election Sum to Date \$ 1500.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	1	EFT		1/3/2024	\$ 1000.00		
☐	1	EFT		1/19/2024	\$ 200.00		
☐					\$		
3. Contributor Information ☒ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) Angela Levine 836 Oak Street #503 Winston Salem, NC 27101			b. Job Title/Profession Organizer		d. Comments		
			c. Employer's Name/Specific Field Connect Marketing		e. Election Sum to Date \$ 400.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	1	EFT		1/2/2024	\$ 100.00		
☐					\$		
☐					\$		
3. Contributor Information ☐ Add ☒ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) Lila Cruikshank 623 Rugby Rd Winston Salem, NC 27106			b. Job Title/Profession retired		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		
☐	1	EFT		1/05/2024	\$ 100.00		
☐					\$		
☐					\$		
4. Total only this Page					\$ 1400.00		
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 2,170.34		

Contributions from Individuals

Pg 2 of 3 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	
Campaign for Marsie West					7CQRV9	
3. Contributor Information ☐ Add ☒ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
Martha Apple 550 N. Liberty St #135 Winston Salem, NC 27101				not employed		
				c. Employer's Name/Specific Field		
				e. Election Sum to Date		
				\$ 250.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	1	EFT		1/05/2024	\$ 250.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
Paul Lowe 1580 Brockton Lane Winston Salem, NC 27106				pastor / politician		
				c. Employer's Name/Specific Field		
				e. Election Sum to Date		
				\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	1	EFT		1/28/2024	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
Patricia Deskin 4724 Tolley Creek Dr. Winston Salem, NC 27106						
				c. Employer's Name/Specific Field		
				e. Election Sum to Date		
				\$ 75.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	1	ETF		1/9/2024	\$ 25.00	
☐	1	ETF		2/11/2024	\$ 50.00	
☐					\$	
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)					\$ 3170.34	

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Contributions from Individuals

Pg 3 of 3

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	
Campaign for Marsie West				7CRQV9	
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
W. Fletcher West IV 404 E. 30th St, #203 Austin, TX 78705		freelance Contractor			
		c. Employer's Name/Specific Field		e. Election Sum to Date	
		information technology		\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	In Kind	Campaign Website set up	1/21/2024	\$250.00
☐					\$
☐					\$
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Maribeth Tanen 3332 Paddington Lane Winston Salem, NC 27106		Research Admin Coordinator			
		c. Employer's Name/Specific Field		e. Election Sum to Date	
		Atrium Wake Forest Baptist Health financial administration		\$ 19.10	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	In Kind	photocopying various forms	1/23/2024	\$ 19.10
☐					\$
☐					\$
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Marsie West 331 Caroline Circle Winston Salem, NC 27104		Consultant			
		c. Employer's Name/Specific Field		e. Election Sum to Date	
		Enosys Group - financial systems consulting		\$ 76.24	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	In Kind	supplies + chili ingredients for chili cook off	1/27/24	\$ 76.24
☐			Event supplies		\$
☐					\$
4. Total only this Page:					\$ 345.34
5. Total of ALL CRO-1210 Pages:					\$ 2,170.34
(This line must be on line 6 of Detailed Summary Page CRO-1100)					

Contributions from Other Political Committees

Pg 1 of 1 Amendment ☒ Yes ☐ No

Use this form to report contributions from other candidate, referendum or PAC committees

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Campaign for Marsie West				7CQRV9	
3. Contributor Information ☐ Add ☒ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee		d. Comments	
MacIntosh for City Council Committee 3945 Springlake Court Clemmons, NC 27012		☒ Candidate ☐ PAC			
		☐ Referendum			
		c. Level Registered (Specify)			
		☐ Federal ☐ County:		e. Election Sum to Date	
		☐ State ☒ Municipality:		\$ 200.00	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
1	check		2/11/2024	\$ 200.00	
				\$	
				\$	
3. Contributor Information ☐ Add ☒ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee		d. Comments	
Fields for Forsyth 3916 Creekside Court Winston Salem, NC 27127		☒ Candidate ☐ PAC		2026 JAN 7 PM 4:49 RECEIVED FORSYTH COUNTY BOARD OF ELECTIONS	
		☐ Referendum			
		c. Level Registered (Specify)			
		☐ Federal ☒ County:		e. Election Sum to Date	
		☐ State ☐ Municipality:		\$ 304.42	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
1	check		2/13/2024	\$ 304.42	
				\$	
				\$	
3. Contributor Information ☐ Add ☒ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee		d. Comments	
Vote for Valerie 455 Carolina Circle Winston Salem, NC 27104		☒ Candidate ☐ PAC			
		☐ Referendum			
		c. Level Registered (Specify)			
		☐ Federal ☒ County:		e. Election Sum to Date	
		☐ State ☐ Municipality:		\$ 304.43	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
1	check		2/14/2024	\$ 304.43	
				\$	
				\$	
4. Total only this Page				\$ 808.85	
5. Total of ALL CRO-1230 Pages				\$ 808.85	
(This line must be on line 8 of Detailed Summary Page CRO-1100)					

Disbursements

Pg 1 of 5

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) <u>Campaign for Marsie West</u>					2. ID Number <u>7CQQV9</u>	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)						
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures						
4. Payee Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Vistaprint</u> <u>275 Wyman St</u> <u>Waltham, MA 02451</u> <u>781-652-6300</u>			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify)		e. Election Sum to Date	
			☐ Federal ☐ County: ☐ State ☐ Municipality:			
					\$ <u>805.83</u>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
<u>1</u>	<u>EFT</u>	<u>B</u>	<u>1/4/2024</u>	<u>\$442.08</u>	<u>door hangers</u>	
<u>1</u>	<u>EFT</u>	<u>B</u>	<u>1/18/2024</u>	<u>\$363.75</u>	<u>campaign signs and door hangers</u>	
4. Payee Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Office Depot</u> <u>1235 Silas Creek Pkwy</u> <u>Winston Salem, NC 27127</u> <u>336-773-1080</u>			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify)		e. Election Sum to Date	
			☐ Federal ☐ County: ☐ State ☐ Municipality:			
					\$ <u>19.25</u>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
<u>1</u>	<u>EFT</u>	<u>C</u>	<u>1/17/2024</u>	<u>\$19.25</u>	<u>balloons, flags for Chili Cookoff</u>	
				\$		
4. Payee Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Allegria Design</u> <u>3250 Healy Drive</u> <u>Winston Salem, NC 27103</u> <u>336-777-8615</u>			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify)		e. Election Sum to Date	
			☐ Federal ☐ County: ☐ State ☐ Municipality:			
					\$ <u>1107.45</u>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
<u>1</u>	<u>EFT</u>	<u>B</u>	<u>1/22/2024</u>	<u>\$1107.45</u>	<u>campaign yard signs</u>	
				\$		
5. Total only this Page					\$ <u>1932.53</u>	
6. Total of ALL CRO-1310 Pages					\$ <u>2,102.44</u>	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)						
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)						
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						
7. Purpose Codes (List detailed expenditure code in (k) 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

Pg 2 of 5 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) <u>Campaign for Marsie West</u>					2. ID Number <u>7C2QV9</u>	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)						
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures						
4. Payee Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
<u>638 Breunling Company</u> <u>638 W. Fourth St</u> <u>Winston Salem, NC 27101</u> <u>336-777-3340</u>			c. Level Registered (Specify)		e. Election Sum to Date	
			☐ Federal ☐ County: ☐ State ☐ Municipality:			
					\$ <u>25.00</u>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
<u>1</u>	<u>EFT</u>	<u>C</u>	<u>1/24/2024</u>	\$ <u>25.00</u>	<u>Volunteer welcome</u> <u>for fundraising +</u> <u>postcards, door</u> <u>hangers</u>	
				\$		
4. Payee Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
<u>USPS</u> <u>3450 Robinhood Rd</u> <u>Winston Salem NC 27106</u> <u>800-275-8777</u>			c. Level Registered (Specify)		e. Election Sum to Date	
			☐ Federal ☐ County: ☐ State ☐ Municipality:			
					\$ <u>6.03</u>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
<u>1</u>	<u>EFT</u>	<u>I</u>	<u>1/24/2024</u>	\$ <u>6.03</u>		
				\$		
4. Payee Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
<u>Dollar Tree</u> <u>3440 Robinhood Rd</u> <u>Winston Salem NC 27106</u> <u>336-955-8299</u>			c. Level Registered (Specify)		e. Election Sum to Date	
			☐ Federal ☐ County: ☐ State ☐ Municipality:			
					\$ <u>28.62</u>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
<u>1</u>	<u>EFT</u>	<u>C</u>	<u>1/24/2024</u>	\$ <u>28.62</u>	<u>supplies for</u> <u>chili cookoff</u>	
				\$		
5. Total only this Page					\$ <u>59.65</u>	
6. Total of ALL CRO-1310 Pages					\$ <u>3102.44</u>	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						
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)						

RECEIVED
 2026 JAN -7 PM 4:49
 FORSYTH COUNTY
 BOARD OF ELECTIONS

Disbursements

Pg 3 of 5

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) Campaign for Marsie West					2. ID Number 74RRV9	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)						
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures						
4. Payee Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
The Remedy 492 W. End Blvd Winston Salem, NC 27101 336-243-8147			c. Level Registered (Specify)		e. Election Sum to Date	
			☐ Federal ☐ County: ☐ State ☐ Municipality:		\$ 8.86	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	EFT	C	2/5/2024	\$ 8.86	candidate meet and greet	
				\$		
4. Payee Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Old Nick Williams Co. 2675 Williamis Rd. Lewisville, NC 27023 336-946-1165			c. Level Registered (Specify)		e. Election Sum to Date	
			☐ Federal ☐ County: ☐ State ☐ Municipality:		\$ 12.70	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	EFT	C	2/6/2024	\$ 12.70	candidate meet and greet	
				\$		
4. Payee Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Lesser Known Beer 901 S. Broad St Winston Salem NC 27101			c. Level Registered (Specify)		e. Election Sum to Date	
			☐ Federal ☐ County: ☐ State ☐ Municipality:		\$ 19.26	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	EFT	C	2/12/2024	\$ 19.26	candidate meet and greet	
				\$		
5. Total only this Page:					\$ 40.82	
6. Total of ALL CRO-1310 Pages:					\$ 2102.44	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						
7. Purpose Codes (List detailed expenditure code in (k) 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

Pg 4 of 5 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	
Campaign for Marsie West					7CQQRV9	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)						
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures						
4. Payee Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Mojito Latin Soul Food 723 Trade St NW Winston Salem NC 27101 336-723-7239			c. Level Registered (Specify)		e. Election Sum to Date	
			☐ Federal ☐ County: ☐ State ☐ Municipality:			
					\$ 32.36	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	EFT	C	2/15/2024	\$ 32.36	Candidate meet and greet	
				\$		
4. Payee Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Art Blue P.O. Box 441146 Somerville, NC 02144			c. Level Registered (Specify)		e. Election Sum to Date	
			☐ Federal ☐ County: ☐ State ☐ Municipality:			
					\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	ETF	0	1/2/2024	\$ 6.80	Processing Fee	
1	ETF	0	1/4/2024	\$ 0.60	Processing Fee	
4. Payee Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Art Blue P.O. Box 441146 Somerville, NC 02144			c. Level Registered (Specify)		e. Election Sum to Date	
			☐ Federal ☐ County: ☐ State ☐ Municipality:			
					\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	ETF	0	1/9/2024	\$ 13.41	Processing Fee	
1	ETF	0	1/11/2024	\$ 1.16	Processing Fee	
5. Total only this Page					\$ 54.33	
6. Total of ALL CRO-1310 Pages					\$ 2102.44	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						
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)						

Distributions

Page 5 of 5

Amendment	☒ Yes	☐ No
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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	
Campaign for Marsie West						7CQQV9	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
☒ Operating Expenses		☐ Contributions to Candidates/Political Committees			☐ Coordinated Party Expenditures		
4. Payee Information				Add		Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ActBlue PO Box 441146 Somerville, MA 02144							
c. Level Registered (Specify)							
Federal County:							
State Municipality:							
						e. Election Sum to Date	
						\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	EFT	O	1/24/2024	\$ 3.54	Payment Processing Fees		
1	EFT	O	1/26/2024	\$ 0.54	Payment Processing Fees		
4. Payee Information				Add		Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ActBlue PO Box 441146 Somerville, MA 02144							
c. Level Registered (Specify)							
Federal County:							
State Municipality:							
						e. Election Sum to Date	
						\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	EFT	O	1/31/2024	\$ 6.01	Payment Processing Fees		
1	EFT	O	2/7/2024	\$ 1.47	Payment Processing Fees		
4. Payee Information				Add		Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ActBlue PO Box 441146 Somerville, MA 02144							
c. Level Registered (Specify)							
Federal County:							
State Municipality:							
						e. Election Sum to Date	
						\$ 37.08	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	EFT	O	2/11/2024	\$ 3.55	Payment Processing Fees		
				\$			
5. Total only this Page						\$ 15.11	
6. Total of ALL CRO-1310 Pages							
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)							
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)							
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						\$ 2,102.44	
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)							

FORSYTH COUNTY
 BOARD OF ELECTIONS
 2026 JUN -7 PM 4:49
 RECEIVED

Disbursements

Pg 1 of 1

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) <u>Campaign for Marsie West</u>					2. ID Number <u>7CQ QV9</u>	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)						
☐ Operating Expenses ☒ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures						
4. Payee Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
<u>Vote for Valerie</u> <u>455 Carolina Circle</u> <u>Winston Salem, NC 27104</u>			c. Level Registered (Specify)		e. Election Sum to Date	
			☐ Federal ☒ County: ☐ State ☐ Municipality:			
					\$ <u>74.33</u>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
<u>1</u>	<u>EFT</u>	<u>I</u>	<u>2/14/2024</u>	<u>\$74.33</u>	<u>post cards postage</u>	
				\$		
4. Payee Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
<u>Fields for Forsyth</u> <u>3916 Creekside Court</u> <u>Winston Salem, NC 27127</u>			c. Level Registered (Specify)		e. Election Sum to Date	
			☐ Federal ☒ County: ☐ State ☐ Municipality:			
					\$ <u>149.79</u>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
<u>1</u>	<u>EFT</u>	<u>I</u>	<u>2/14/2024</u>	<u>\$ 149.79</u>	<u>post cards postage</u>	
				\$		
4. Payee Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify)		e. Election Sum to Date	
			☐ Federal ☐ County: ☐ State ☐ Municipality:			
					\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				\$		
				\$		
5. Total only this Page					\$ <u>224.12</u>	
6. Total of ALL CRO-1310 Pages					\$ <u>224.12</u>	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						
7. Purpose Codes (List detailed expenditure code in (k) 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)						

In-Kind Contributions

Pg 1 of 1 Amendment ☒ 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)		2. ID Number	
Campaign for Marsie West		7CQQV9	
3. Contributor Information ☐ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
W. Fletcher West IV 404 E. 30th St, Apt 203 Austin, TX 78705		☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	
		c. Comments	
		d. Election Sum to Date \$ 250.00	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Campaign website set up		1/21/2024	\$ 250.00
			\$
			\$
3. Contributor Information ☐ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
Maribeth Tanen 3332 Paddington Lane Winston Salem, NC 27106		☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	
		c. Comments	
		d. Election Sum to Date \$ 19.10	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
UPS Store - CRO forms photocopying		1/23/2024	\$ 19.10
			\$
			\$
3. Contributor Information ☐ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
Marsie West 331 Carolina Circle Winston Salem, NC 27104		☐ Individual ☒ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	
		c. Comments	
		d. Election Sum to Date \$ 373.40	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Chili Cookoff - registration, ingredients, and serving supplies		1/27/2024	\$ 76.24
			\$
			\$
4. Total only this Page		\$ 345.34	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 345.34	