

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

Kevin Mundy for City Council

c. ID Number

n/a

b. Mailing Address (include City, State and Zip Code)

1100 Hudgins Hill Ct.
Winston-Salem, NC 27113

d. Date Filed

2/19/20

e. Phone Number

336-918-0259

2. Report Year

2020

3. Period Start Date (mm/dd/yy)

01/01/20

4. Period End Date (mm/dd/yy)

2/15/20

5. Treasurer Full Name

Rodney R. Windsor

6. Type of Committee (Check One)

- ☒ Candidate Campaign
☐ PAC
☐ Independent Expenditure
☐ Legal Expense Fund
☐ Party
☐ Referendum
☐ Joint Fundraiser

7. Type of Fund (if applicable, check one)

- ☐ "Booster Fund"
☐ Building Fund

☐ Other:

9. Type of Report (check only one type of report from one category)

Municipal

- ☐ Organizational
☐ Thirty-five day

- ☒ Pre-primary
☐ Pre-election
☐ Pre-runoff
☐ Semi-annual
☐ Mid Year
☐ Year End
☐ Final
☐ Special

State/County

- ☐ Organizational
☐ Quarterly

- ☐ First
☐ Second
☐ Third
☐ Fourth
☐ Semi-annual
☐ Mid Year
☐ Year End
☐ Final
☐ Special

Referendum

- ☐ Organizational
☐ Pre-referendum

- ☐ Final
☐ Supplemental Final
☐ Annual
☐ Special

8. Number of Fundraisers this Report

10. Special Report Name

11. Account Information

a. Financial Institution Full Name

BB&T

b. Purpose

Account for
Receipts &
Disbursement
of Campaign

c. Account Code

KM FCC - CHK

d. Period Begin Balance

\$ 1000.00

11. Account Information

a. Financial Institution Full Name

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 of Elections.

Rodney R. Windsor

Printed Name of Signer

Signature of Appointed Treasurer

2/19/20

Date

FOR OFFICE USE ONLY

Date Received:

2/22/20

Employee:

Date Postmarked:

Employee:

Date Scanned:

Employee:

Date Data Entered:

Employee:

Delivery Method

- ☐ Normal Mail
☒ Registered Mail
☐ Hand Delivered
☐ Electronically Filed
☐ Signer has not received mandatory training

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	
Kevin Mundy for City Council		First Quarter Plus 2020		n/a	
Start of Election Cycle: January 1, 2020		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 1000.00		\$ 1000.00	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$		\$	
6) Contributions from Individuals (CRO-1210)		\$ 4109.41		\$ 4109.41	
7) Contributions from Political Party Committees (CRO-1220)		\$ 1000.00		\$ 1000.00	
8) Contributions from Other Political Committees (CRO-1230)		\$		\$	
9) Loan Proceeds (CRO-1410)		\$		\$	
10) Refunds/Reimbursements To the Committee (CRO-1240)		\$		\$	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$		\$	
11b) Contributions from Not-for-Profit Organizations (CRO-1250)		\$		\$	
11c) Outside Sources of Income (CRO-1250)		\$		\$	
11d) Legal Expense Fund – Other Sources (CRO-1270)		\$		\$	
11 e) Exempt Purchase Price Sales (CRO-1265)		\$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 5109.41		\$ 5109.41	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 1174.39		\$ 1174.39	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$		\$	
13c) Coordinated Party Expenditures (CRO-1310)		\$		\$	
14) Aggregated Non-Media Expenditures (CRO-1315)		\$		\$	
15) Loan Repayments (CRO-1420)		\$		\$	
16) Refunds/Reimbursements From the Committee (CRO-1320)		\$		\$	
17) In-Kind Contributions (CRO-1510)		\$		\$	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 1174.39		\$ 1174.39	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 4935.02		\$ 4935.02	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$			
22) Debts and Obligations owed By the Committee (CRO-1610)		\$			
23) Debts and Obligations owed To the Committee (CRO-1620)		\$			
24) Account Transfers Within the Committee (CRO-1720)		\$			
25) Administrative Support (CRO-1710)		\$		\$	
26) Forgiven Loans (CRO-1440)		\$		\$	
27) 48-Hour Notice Reports Sum (CRO-2220)		\$		\$	
28) Contributions to be Refunded (CRO-1215)		\$		\$	

Contributions from Individuals

Pg 1 of 12 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	
Kevin Mundy for City Council					n/a	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Karen Buoyer 1430 Crestlawn Trail Pfafftown, NC 27040 336-813-3750			not employed			
			c. Employer's Name/Specific Field			
			not employed			
					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
☐	I	on line		1/10/20		\$ 100.00
☐						\$
☐						\$
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Liz Guertin 1809 Kingsdale Ct. 29 Winston-Salem, NC 27103 336-829-0215			not employed			
			c. Employer's Name/Specific Field			
			not employed			
					e. Election Sum to Date	
					\$ 25.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
☐	I	on line		1/10/20		\$ 25.00
☐						\$
☐						\$
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Amanda Sullivan 28522 Wesleyan Lane Winston-Salem, NC 27106 336-926-0702			counselor			
			c. Employer's Name/Specific Field			
			Arts Based School;			
					e. Election Sum to Date	
					\$ 25.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
☐	I	on line		25.00		\$ 25.00
☐						\$
☐						\$
4. Total only this Page					\$ 150.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 4109.41	

Contributions from Individuals

Pg 2 of 12

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	
Kevin Mundy for City Council					n/a	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Jolyn Roberts 2424 Crenshaw Ct. Charlotte, NC 28216			Volunteer manager			
			c. Employer's Name/Specific Field			
			Ronald McDonald House			
			e. Election Sum to Date			
			\$ 25.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	I	on line		1/10/20	\$ 25.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Kimberly Durham 105 Stonburg Rd. Clemmons, NC 27012			not employed			
			c. Employer's Name/Specific Field			
			not employed			
			e. Election Sum to Date			
			\$ 25.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	I	on line		25.00	\$	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Robert Rocco 208 Charlestowne Circle Winston-Salem, NC 27103			Music teacher			
			c. Employer's Name/Specific Field			
			UNCOSA			
			e. Election Sum to Date			
			\$ 50.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	I	on line		1/11/20	\$ 50.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 100.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 4109.41	

Contributions from Individuals

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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	
Kevin Mundy for City Council					n/a	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Carol Kirby 3025 Lakeshore Drive Winston-Salem, NC 27106 336-701-9765			College professor			
			c. Employer's Name/Specific Field			
			Salem College			
			e. Election Sum to Date			
			\$ 25.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	I	on line		1/11/20	\$ 25.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Carol Hunter 1422 Crestlawn Trail Pfafftown, NC 27040			not employed			
			c. Employer's Name/Specific Field			
			not employed			
			e. Election Sum to Date			
			\$ 25.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	I	on line		1/11/20	\$ 25.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Bruce Cusson 218 Fearington Dr. Kernersville, NC 27284			Registered nurse			
			c. Employer's Name/Specific Field			
			Wake Forest Baptist Health			
			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	
☐	I	on line		1/12/20	\$ 100.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 150.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 4109.41	

Contributions from Individuals

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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	
Kevin Mundy for City Council					n/a	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Lisa Northrup 1000 Gales Ave. Winston-Salem, NC 27103 336-406-0073			Nonprofit professional			
			c. Employer's Name/Specific Field			
			SECU Family House			
					e. Election Sum to Date	
					\$ 25.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	I	On line		1/13/20	\$ 25.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Robert Egleston 624 W. 6 th Street Suite 110 Winston-Salem, NC 27101 336-782-8009			Non-profit management			
			c. Employer's Name/Specific Field			
			Leadership Winston-Salem			
					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	
☐	I	on line		1/13/20	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Richard Steele 218 Fearington Drive Kernersville, NC 27284			Project Manager			
			c. Employer's Name/Specific Field			
			BB&T now Truist			
					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	
☐	I	on line		1/13/20	\$ 100.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 225.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 4109.41	

Contributions from Individuals

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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	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Mike Doughan 1853 Hunters Forest Drive Winston-Salem, NC 27103336-807-3842			Not employed			
			c. Employer's Name/Specific Field			
			Not employed			
					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	
☐	I	on line		1/15/20	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Nancy Young 2061 Polo Road Winston-Salem, NC 27106 336-331-2755			Not employed			
			c. Employer's Name/Specific Field			
			Not employed			
					e. Election Sum to Date	
					\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	I	check		1/13/20	\$ 200.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Vicki Lathery 1391 Baux Mountain Rd. Germanton, NC 27019 336-469-1589			Not employed			
			c. Employer's Name/Specific Field			
			Not employed			
					e. Election Sum to Date	
					\$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	I	check		1/13/20	\$ 150.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 450.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 4109.41	

Contributions from Individuals

Pg 6 of 12

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	
Kevin Mundy for City Council					n/a	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments		
Dean Grubbs 3 East Sprague St. Winston-Salem, NC 27127 336-408-3112		Payroll/Human Resources				
		c. Employer's Name/Specific Field				
		Parrish Tire		e. Election Sum to Date		
				\$ 25.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	I	on line		1/20/20	\$ 25.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments		
Carol Hoover 515 Archer Rd. Winston-Salem, NC 27106 336-817-4059		Not employed				
		c. Employer's Name/Specific Field				
		Not employed		e. Election Sum to Date		
				\$ 25.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	I	on line		1/21/20	\$ 25.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments		
Howard Jones 2521 Stockton St. Winston-Salem, NC 27127 336-399-2857		Not employed				
		c. Employer's Name/Specific Field				
		Not employed		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	
☐	I	on line		1/24/20	\$ 100.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 150.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 4109.41	

Contributions from Individuals

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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	
Kevin Mundy for City Council					n/a	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Susan Appt 2865 Monticello Drive Winston-Salem, NC 27106 336-409-5784			Veterinarian			
			c. Employer's Name/Specific Field			
			WFBH			
					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	
☐	I	on line		1/29/20	\$ 75.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Lee A. Chaden 2815Bartram Rd. Winston-Salem, NC 27105			Not employed			
			c. Employer's Name/Specific Field			
			Not employed			
					e. Election Sum to Date	
					\$ 1025.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	I	on line		1/30/20	\$ 1025.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Mike Douhan 1853 Hunters Forest Dr. Winston-Salem, NC 27103 336-807-3842						
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	I	on line		1/30/20	\$ 100.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 1300.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 4109.41	

Contributions from Individuals

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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	
Kevin Mundy for City Council					n/a	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Elizabeth Weiler 2745 Maplewood Ave. Winston-Salem, NC 27103 704-650-8299			Yoga teacher, Patient Actor			
			c. Employer's Name/Specific Field			
			City of W-S WFB Med School			
					e. Election Sum to Date	
					\$ 25.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	I	on line		2/2/20	\$ 25.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Martha Allman 1905 Faculty Dr. Winston-Salem, NC 27106			Administrator			
			c. Employer's Name/Specific Field			
			Wake Forest University			
					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	
☐	I	on line		1/31/20	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Jennifer Casey 361 Ivy Park Lane Winston-Salem, NC 27104			Not employed			
			c. Employer's Name/Specific Field			
			Not employed			
					e. Election Sum to Date	
					\$ 25.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	I	on line		2/6/20	\$ 25.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 150.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 4109.41	

Contributions from Individuals

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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	
Kevin Mundy for City Council					n/a	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Malcom M. Brown 1110 Arbor Rd. Winston-Salem, NC 27104			Not employed			
			c. Employer's Name/Specific Field			
			Not employed			
					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	
☐	I	check		2/7/20	\$ 250.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Dirk Robertson 5734 Woodside Forest Trail Lewisville, NC 27023 336-354-8059			Employee			
			c. Employer's Name/Specific Field			
			Lowe's Foods			
					e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	I	check		2/7/20	\$ 50.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
John J. Ceneviva 215 Nanzetta Way Lewisville, NC 27023			Professor			
			c. Employer's Name/Specific Field			
			UNCG			
					e. Election Sum to Date	
					\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	I	check		2/7/20	\$ 200.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 500.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 4109.41	

Contributions from Individuals

Pg 10 of 12 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	
Kevin Mundy for City Council					n/a	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Sharon G. Hamilton 1144 Edgebrook Dr. Winston-Salem, NC 27106			b. Job Title/Profession Not employed		d. Comments 	
			c. Employer's Name/Specific Field Not employed			
			e. Election Sum to Date \$ 25.00			
			f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description
☐	I	check		2/7/20	\$ 25.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Fred Wagner 2507 Lullington Dr. Winston-Salem, NC 27103 336-408-7677			b. Job Title/Profession Reservation Agent		d. Comments 	
			c. Employer's Name/Specific Field American Airlines			
			e. Election Sum to Date \$ 25.00			
			f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description
☐	I	on line		2/9/20	\$ 25.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Michael Isley 1100 Hudgins Hill Ct. Winston-Salem, NC 27103 336-681-1411			b. Job Title/Profession 		d. Comments 	
			c. Employer's Name/Specific Field 			
			e. Election Sum to Date \$ 9.41			
			f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description
☐	I	Paypal		1/2/20	\$ 9.41	
☐					\$	
☐					\$	
4. Total only this Page					\$ 59.41	
5. Total of ALL CRO-1210 Pages					\$ 4109.41	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

Contributions from Individuals

Pg 11 of 12

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	
Kevin Mundy for City Council					n/a	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Lynn B. Eisenberg 411 S. Marshall St. Winston-Salem, NC 27101 336-725-3350			b. Job Title/Profession		d. Comments	
			Not employed			
			c. Employer's Name/Specific Field			
			Not employed		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	
☐	I	check		2/13/20	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Catharine O. Pfeiffer 2014 Forest Brook Dr. Winston-Salem, NC 27106 419-573-9630			b. Job Title/Profession		d. Comments	
			Retired			
			c. Employer's Name/Specific Field			
			Not employed		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	
☐	I	check		2/13/20	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Ellen M. Hendrix 6235 Poplar St. Winston-Salem, NC 27101			b. Job Title/Profession		d. Comments	
			business consultant			
			c. Employer's Name/Specific Field			
			Traction on Demand		e. Election Sum to Date	
				\$ 25.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	I	check		2/13/20	\$ 25.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 225.00	
5. Total of ALL CRO-1210 Pages					\$ 4109.41	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

Contributions from Individuals

Pg 12 of 12 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	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
W. Howard Upchurch, JR 2126 Buena Vista Rd. Winston-Salem, NC 27104 336-407-5596			Executive			
			c. Employer's Name/Specific Field			
			Hanes Brands			
					e. Election Sum to Date	
					\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	I	check		2/13/20	\$ 500.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Joan W. Greason 745 Arbor Rd. Winston-Salem, NC 27104			Not employed			
			c. Employer's Name/Specific Field			
			Not employed			
					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	
☐	I	check		2/13/20	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Bernadette Wallace 810 Marguerite Dr. Winston-Salem, NC 27106			marketing consultant			
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	I	check		2/13/20	\$ 50.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 650.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 4109.41	

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	
Kevin Mundy for City Council				n/a	
3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee		d. Comments	
Soluthern States PBA PAC Fund 2155 Highway 42 South McDonough, GA 30252		☐ Candidate ☒ PAC ☐ Referendum			
		c. Level Registered (Specify)			
		☐ Federal ☐ County: ☒ State ☐ Municipality:			
				e. Election Sum to Date	
				\$	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
1	check		2/7/20	\$ 1000.00	
				\$	
				\$	
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee		d. Comments	
		☐ Candidate ☐ PAC ☐ Referendum			
		c. Level Registered (Specify)			
		☐ Federal ☐ County: ☐ State ☐ Municipality:			
				e. Election Sum to Date	
				\$	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
				\$	
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee		d. Comments	
		☐ Candidate ☐ PAC ☐ Referendum			
		c. Level Registered (Specify)			
		☐ Federal ☐ County: ☐ State ☐ Municipality:			
				e. Election Sum to Date	
				\$	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
				\$	
4. Total only this Page				\$ 1000.00	
5. Total of ALL CRO-1230 Pages (This line must be on line 8 of Detailed Summary Page CRO-1100)				\$ 1000.00	

Disbursements

Amendment
Pg 1 of 4 ☐ 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	
Kevin Mundy for City Council					n/a	
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) Sign Depot 1100 W. Colonial Drive Orlando, FL 32804 407-894-0090			b. Coordinated Committee Name		d. Comments e. Election Sum to Date \$ 350.00	
			c. Level Registered (Specify)			
			☐ Federal ☐ County: ☐ State ☐ Municipality:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	VISA	B	1/1/20	\$350.00	Yard Signs	
				\$		
4. Payee Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Vista Print on line @ www.vistaprint.com			b. Coordinated Committee Name		d. Comments e. Election Sum to Date \$ 56.49	
			c. Level Registered (Specify)			
			☐ Federal ☐ County: ☐ State ☐ Municipality:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	Debit card	B	1/7/20	\$56.49	Business cards	
				\$		
4. Payee Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Walmart 4550 Kester Mill Rd. Winston-Salem, NC 27103			b. Coordinated Committee Name		d. Comments e. Election Sum to Date \$ 12.19	
			c. Level Registered (Specify)			
			☐ Federal ☐ County: ☐ State ☐ Municipality:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	VISA	K	1/11/20	\$12.19	Direct mail app	
				\$		
5. Total only this Page					\$ 418.68	
6. Total of ALL CRO-1310 Pages					\$ 1174.39	
<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>						
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)						

Disbursements

Pg 2 of 4

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	
Kevin Mundy for City Council						
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	
Bradford Exchange Checks on line www.BradfordExchangeChecks.com						
			c. Level Registered (Specify)			
			☐ Federal ☐ County: ☐ State ☐ Municipality:			
					e. Election Sum to Date	
					\$ 6.93	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	debit card	K	1/17/20	\$6.93	checks	
				\$		
4. Payee Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Hostinger on line en@hostinger.com						
			c. Level Registered (Specify)			
			☐ Federal ☐ County: ☐ State ☐ Municipality:			
					e. Election Sum to Date	
					\$ 45.18	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	VISA	O	1/17/20	\$45.18	domain hosting	
				\$		
4. Payee Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Amazon on lineBuild a Sign						
			c. Level Registered (Specify)			
			☐ Federal ☐ County: ☐ State ☐ Municipality:			
					e. Election Sum to Date	
					\$ 67.35	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	debit card	O	1/25/20	\$67.35	Sign stakes	
				\$		
5. Total only this Page					\$ 119.46	
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)						
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)						

Disbursements

Pg 3 of 4

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) Kevin Mundy for City Council					2. ID Number n/a	
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) Food Lion 2530 Somerset Center Dr. Winston-Salem, NC 27103			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:			
					e. Election Sum to Date	
					\$ 22.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	debit card	I	1/27/20	\$22.00	Postage stamps	
				\$		
4. Payee Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Yard Sign Wholesale on line www.yardsignwholesale.com			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:			
					e. Election Sum to Date	
					\$ 230.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	debit card	B	1/29/20	\$230.00	100 Yard Signs	
				\$		
4. Payee Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Hewlett Packard on line hp@email.hpconnected.com			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:			
					e. Election Sum to Date	
					\$ 10.66	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	debit card	K	2/6/20	\$10.66	Instant ink pla	
				\$		
5. Total only this Page					\$ 262.66	
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>					\$ 1174.39	
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).						

Disbursements

Pg 4 of 4

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) Kevin Mundy for City Council					2. ID Number n/a	
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) ActBlue www.actblue.com			b. Coordinated Committee Name 		d. Comments 	
			c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ 34.18	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	acct debit	C	2/5/20	\$34.18	Fees	
				\$		
4. Payee Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Big City Sports Wear on line www.BigCitySportsWear..com			b. Coordinated Committee Name 		d. Comments 	
			c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ 282.78	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	debit card	O	2/10/20	\$282.78	T shirts	
				\$		
4. Payee Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) ActBlue ActBlue.com			b. Coordinated Committee Name 		d. Comments fees	
			c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ 56.63	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	acct debit	C	2/10/20	\$56.63		
				\$		
5. Total only this Page					\$ 373.59	
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)					\$ 1174.39	
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)						