

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	c. ID Number		
STEVIE HOWELL FOR WAYNE COUNTY SHERIFF			
b. Mailing Address (include City, State and Zip Code)	d. Date Filed		
115 EAST MAIN ST EUREKA, NC 27830	01/29/2026		
	e. Phone Number		
	(919) 223-3370		

2. Report Year | 3. Period Start Date (mm/dd/yy) | 4. Period End Date (mm/dd/yy) | 5. Treasurer Full Name

2025 | 07/01/2025 | 12/31/2025 | KAYE HOWELL

6. Type of Committee (Check One)

- Candidate Campaign Party
 Joint Fundraiser PAC
 Referendum Legal Expense Fund

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

- "Booster Fund"
 Building Fund
 Presidential Election Year Candidates Fund
 NC Public Campaign Financing Fund
 Other:

8. Number of Fundraisers this Report

0

9. Type of Report

(check only one type of report from one category)

Municipal	State/County	Referendum
<input type="checkbox"/>	Organizational	<input type="checkbox"/>
<input type="checkbox"/>	Thirty-five day	Organizational
<input type="checkbox"/>	Quarterly	<input type="checkbox"/>
<input type="checkbox"/>	Pre-primary	Pre-referendum
<input type="checkbox"/>	First	Final
<input type="checkbox"/>	Pre-election	Supplemental Final
<input type="checkbox"/>	Second	Annual
<input type="checkbox"/>	Pre-runoff	Special
<input type="checkbox"/>	Third	
<input type="checkbox"/>	Semi-annual	
<input type="checkbox"/>	Fourth	
<input type="checkbox"/>	Mid Year	
<input type="checkbox"/>	Year End	
<input type="checkbox"/>	Final	
<input type="checkbox"/>	Special	
		10. Special Report Name

3. Account Information

a. Financial Institution Full Name

KS BANK

3. Account Information

a. Financial Institution Full Name

Wayne County
Board of Elections

b. Purpose

FOR ALL CAMPAIGN
EXPENSES

c. Account Code

1

b. Purpose

1 A U 2 9 2 0 2 6

c. Account Code

d. Period Begin Balance

\$ 100.00

Received

By _____

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

Kaye Howell

Printed Name of Signer

Kaye Howell

Signature of Appointed Treasurer

01/29/2026

Date

FOR OFFICE USE ONLY

Date Received:

Employee:

Delivery Method

- Normal Mail
 Registered Mail
 Hand Delivered
 Electronically Filed

Date Postmarked:

Employee:

Date Scanned:

Employee:

Date Data Entered:

Employee:

- 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

Use this form to summarize all disclosure reporting forms and to total monetary information

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number	
STEVIE HOWELL FOR WAYNE COUNTY SHERIFF	2025 Year End Semi-Annual		
Start of Election Cycle: January 1, 2023		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 0.00	\$ 0.00
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 0.00	\$ 0.00
6) Contributions from Individuals	(CRO-1210)	\$ 16,100.00	\$ 16,100.00
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0.00	\$ 0.00
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0.00	\$ 0.00
9) Loan Proceeds	(CRO-1410)	\$ 0.00	\$ 0.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$ 0.00	\$ 0.00
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	\$ 0.00
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)		\$ 16,100.00	\$ 16,100.00
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 13,105.10	\$ 13,105.10
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 0.00	\$ 0.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0.00	\$ 0.00
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 0.00	\$ 0.00
15) Loan Repayments	(CRO-1420)	\$ 0.00	\$ 0.00
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$ 0.00	\$ 0.00
17) In-Kind Contributions	(CRO-1510)	\$ 0.00	\$ 0.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 13,105.10	\$ 13,105.10
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 2,994.90	\$ 2,994.90
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

Contributions from Individuals

Pg 1 of 1 Yes No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

a. Contributors Name, and Email (if applicable)				b. Job Title/Profession		c. Employer's Name/Specific Field		d. Comments		e. Election Sum to Date																																																									
STEVIE HOWELL FOR WAYNE COUNTY SHERIFF										\$ 16,100.00																																																									
<table border="1"> <thead> <tr> <th colspan="4">f. Prior</th> <th colspan="2">g. Account Code</th> <th colspan="2">h. Form of Payment</th> <th colspan="2">i. In-Kind Description</th> <th colspan="2">j. Date (mm/dd/yyyy)</th> <th colspan="2">k. Amount</th> </tr> </thead> <tbody> <tr> <td colspan="4"><input type="checkbox"/></td> <td colspan="2">1</td> <td colspan="2">Check</td> <td colspan="2"></td> <td colspan="2">08/19/2025</td> <td colspan="2">\$ 100.00</td> </tr> <tr> <td colspan="4"><input type="checkbox"/></td> <td colspan="2">1</td> <td colspan="2">Money Order</td> <td colspan="2"></td> <td colspan="2">08/26/2025</td> <td colspan="2">\$ 5,000.00</td> </tr> <tr> <td colspan="4"><input type="checkbox"/></td> <td colspan="2">1</td> <td colspan="2">Money Order</td> <td colspan="2"></td> <td colspan="2">09/11/2025</td> <td colspan="2">\$ 5,000.00</td> </tr> </tbody> </table>												f. Prior				g. Account Code		h. Form of Payment		i. In-Kind Description		j. Date (mm/dd/yyyy)		k. Amount		<input type="checkbox"/>				1		Check				08/19/2025		\$ 100.00		<input type="checkbox"/>				1		Money Order				08/26/2025		\$ 5,000.00		<input type="checkbox"/>				1		Money Order				09/11/2025		\$ 5,000.00	
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Disbursements

Amendment

Pg 1 of 2 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
STEVIE HOWELL FOR WAYNE COUNTY SHERIFF	

1. Disbursements *(Please use separate CRO-1310 forms for each type of Disbursement.)*

Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures

1. Payee Information		<input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments			
WAYNE COUNTY BOARD OF ELECTIONS NC	c. Level Registered (Specify)	e. Election Sum to Date			
	<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:				
		\$ 1,034.80			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	O	12/04/2025	\$ 1,034.80	FILING FEE
				\$	

1. Payee Information		<input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments			
SW PROMOTIONS NC	c. Level Registered (Specify)	e. Election Sum to Date			
	<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:				
		\$ 6,825.30			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	B	09/18/2025	\$ 2,048.88	SIGNS
1	Check	B	10/17/2025	\$ 3,115.74	SIGNS

1. Payee Information		<input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments			
SW PROMOTIONS NC	c. Level Registered (Specify)	e. Election Sum to Date			
	<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:				
		\$ 6,825.30			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	B	11/18/2025	\$ 1,330.00	SIGNS
1	Check	B	12/19/2025	\$ 330.68	SIGNS

5. Total only on Page **6. Total for All 10 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 Commt)

(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			

8. Codes require detailed explanation in required remarks field (k)

Disbursements

Amendment
Pg 2 of 2 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/Unit Name (and Fund if applicable) STEVIE HOWELL FOR WAYNE COUNTY SHERIFF		2. ID Number									
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.) <input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures											
<input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip) LAMAR SIGNS NC</td> <td>b. Coordinated Committee Name</td> <td colspan="2">d. Comments</td> </tr> <tr> <td></td> <td>c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:</td> <td colspan="2">e. Election Sum to Date \$ 5,245.00</td> </tr> </table>				a. Full Name, Mailing Address & Phone (include city, state, & zip) LAMAR SIGNS NC	b. Coordinated Committee Name	d. Comments			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Sum to Date \$ 5,245.00	
a. Full Name, Mailing Address & Phone (include city, state, & zip) LAMAR SIGNS NC	b. Coordinated Committee Name	d. Comments									
	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Sum to Date \$ 5,245.00									
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)								
1	Check	B	09/10/2025								
1	Check	B	10/15/2025								
j. Amount											
\$ 3,950.00 BILLBOARD											
\$ 1,295.00 BILLBOARD											
k. Required Remarks											
5. Total on this Page \$ 5,245.00 6. Total in All CRO-1310 Pages \$ 13,105.10 <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. Codes for Disbursement (Use the expenditure code as (a) above)											
A* - Media		B* - Printing									
E - Salaries		F* - Equipment									
I - Postage		J - Penalties									
O* Other		C* - Fundraising									
		G - Political Party									
		K* - Office Expenses									
		D - To Another Candidate									
		H* - Holding Public Office Expenses									
		Q* - Donation to Legal Expense Fund									
* Codes require detailed explanation in required remarks field (k)											

CRO-1310

NC State Board of Elections

December 2009