

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

a. Full Name	c. ID Number
Beatrice Jones for Fremont	
b. Mailing Address (include City, State and Zip Code)	d. Date Filed
PO Box 477 Fremont, NC 27830	01/26/2024
	e. Phone Number
	(919) 273-9511

2. Report Year	3. Report Month	4. Report End Date	5. Treasurer Full Name																																																												
2023	10/24/2023	12/31/2023	Beatrice Jones																																																												
<table border="1"> <tr> <td><input checked="" type="checkbox"/> Candidate Campaign</td> <td><input type="checkbox"/> Party</td> <td>Municipal</td> <td>State/County</td> <td>Referendum</td> </tr> <tr> <td><input type="checkbox"/> PAC</td> <td><input type="checkbox"/> Referendum</td> <td><input type="checkbox"/> Organizational</td> <td><input type="checkbox"/> Organizational</td> <td><input type="checkbox"/> Organizational</td> </tr> <tr> <td><input type="checkbox"/> Independent Expenditure</td> <td><input type="checkbox"/> Joint Fundraiser</td> <td><input type="checkbox"/> Thirty-five day</td> <td>Quarterly</td> <td><input type="checkbox"/> Pre-referendum</td> </tr> <tr> <td><input type="checkbox"/> Legal Expense Fund</td> <td></td> <td><input type="checkbox"/> Pre-primary</td> <td><input type="checkbox"/> First</td> <td><input type="checkbox"/> Final</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/> Pre-election</td> <td><input type="checkbox"/> Second</td> <td><input type="checkbox"/> Supplemental Final</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/> Pre-runoff</td> <td><input type="checkbox"/> Third</td> <td><input type="checkbox"/> Annual</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/> Semi-annual</td> <td><input type="checkbox"/> Fourth</td> <td><input type="checkbox"/> Special</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/> Mid Year</td> <td><input type="checkbox"/> Semi-annual</td> <td></td> </tr> <tr> <td></td> <td></td> <td><input checked="" type="checkbox"/> Year End</td> <td><input type="checkbox"/> Mid Year</td> <td>6. Special Report Name</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/> Final</td> <td><input type="checkbox"/> Year End</td> <td></td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/> Special</td> <td><input type="checkbox"/> Final</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td><input type="checkbox"/> Special</td> <td></td> </tr> </table>				<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	Municipal	State/County	Referendum	<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	Quarterly	<input type="checkbox"/> Pre-referendum	<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final			<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final			<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual			<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special			<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual				<input checked="" type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	6. Special Report Name			<input type="checkbox"/> Final	<input type="checkbox"/> Year End				<input type="checkbox"/> Special	<input type="checkbox"/> Final					<input type="checkbox"/> Special	
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9. Account Information		10. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
Southern Bank			
b. Purpose	c. Account Code	b. Purpose	c. Account Code
Campaign Expenses	01	RECEIVED WCBOE JAN 26 2024	
	d. Period Begin Balance		d. Period Begin Balance
	\$ 3,674.77		\$

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.

Beatrice Jones

Printed Name of Signer

Beatrice Jones

01/26/2024

Date

FOR OFFICE USE ONLY

Date Received: 1/26/2024

Employee: 18

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

Yes

No

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

Beatrice Jones for Fremont	Semi-annual Year End	
Start of Election Cycle:	January 1, 2023	
		Total this Reporting Period
4) Cash on Hand at Start	\$ 3,674.77	\$ 0
5) Aggregated Contributions from Individuals	<i>(CRO-1205)</i>	\$ 50.00
6) Contributions from Individuals	<i>(CRO-1210)</i>	\$ 200.00
7) Contributions from Political Party Committees	<i>(CRO-1220)</i>	\$
8) Contributions from Other Political Committees	<i>(CRO-1230)</i>	\$
9) Loan Proceeds	<i>(CRO-1410)</i>	\$
10) Refunds/Reimbursements To the Committee	<i>(CRO-1240)</i>	\$
11) Other Receipt Sources		
11a) Interest on Bank Accounts	<i>(CRO-1250)</i>	\$
11b) Contributions from Not-for-Profit Organizations	<i>(CRO-1250)</i>	\$
11c) Outside Sources of Income	<i>(CRO-1250)</i>	\$
11d) Legal Expense Fund – Other Sources	<i>(CRO-1270)</i>	\$
11 e) Exempt Purchase Price Sales	<i>(CRO-1265)</i>	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$ 250.00	\$ 8,179.55
13) Disbursements		
13a) Operating Expenditures	<i>(CRO-1310)</i>	\$ 3,189.25
13b) Contributions to Candidates/Political Committees	<i>(CRO-1310)</i>	\$
13c) Coordinated Party Expenditures	<i>(CRO-1310)</i>	\$
14) Aggregated Non-Media Expenditures	<i>(CRO-1315)</i>	\$
15) Loan Repayments	<i>(CRO-1420)</i>	\$ 735.52
16) Refunds/Reimbursements From the Committee	<i>(CRO-1320)</i>	\$
17) In-Kind Contributions	<i>(CRO-1510)</i>	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 3,924.77	\$ 8179.55
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 0	\$ 0
20) Non-Monetary Gifts Given to Other Committees	<i>(CRO-1330)</i>	\$
21) Outstanding Loans (incl. ones from other campaigns)	<i>(CRO-1430)</i>	\$
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>	\$
26) Forgiven Loans	<i>(CRO-1440)</i>	\$ 264.48
27) 48-Hour Notice Reports Sum	<i>(CRO-2220)</i>	\$
28) Contributions to be Refunded	<i>(CRO-1215)</i>	\$

Aggregated Contributions from Individuals

Optional form used to report NC Contributions From Individuals of \$50 or less

Beatrice Jones for Fremont

4. Total only this Page

\$ 50.00

5. Total of ALL CRO-1205 Pages

(This line must be on line 5 of Detailed Summary Page CRO-1100)

\$ 50.00

Contributions from Individuals

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

Amendment
 Yes No

Beatrice Jones for Fremont					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Eric Mitchell 36 Abington Road Danvers, MA 01923		b. Job Title/Profession CEO	d. Comments c. Employer's Name/Specific Field Pathways for Children		
			e. Election Sum to Date \$ 100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		
<input type="checkbox"/>	01	Electronic			
<input type="checkbox"/>					
<input type="checkbox"/>					
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	Electronic		11/01/2023	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
a. Full Name, Mailing Address & Phone (include city, state, & zip) Leslie Summiel PO Box 7961 Ewing, NJ 08628		b. Job Title/Profession Not employed	d. Comments c. Employer's Name/Specific Field Pathways for Children		
			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
<input type="checkbox"/>	01	Check		11/06/2023	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
a. Full Name, Mailing Address & Phone (include city, state, & zip) CRO-1210		b. Job Title/Profession Not employed	d. Comments c. Employer's Name/Specific Field Pathways for Children		
			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
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
					\$ 200.00
					\$ 200.00

Disbursements

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.

Beatrice Jones for Fremont

Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures

a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Act Blue PO Box 441146 Somerville, MA		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	
				\$ 16.83	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	Draft	O	10/30/2023	\$11.71	Processing fees
01	Draft	O	11/01/2023	\$5.12	Processing fees
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
AccuCopy 322 N John St Goldsboro, NC 27530		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	
				\$ 202.82	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	Check	A	11/01/2023	\$186.81	Election Day Cards
01	Debit Card	A	11/06/2023	\$16.01	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Walker Communications Group 4637 Maytime Lane Culver City, CA 90230		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	
				\$ 2,500.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	Check	O	11/06/2023	\$2,000.00	Consulting & Mgmt. Fees
01	Check	O	12/05/2023	\$500.00	Consulting & Mgmt Fees
				\$ 2,719.65	
<p>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</p> <p>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</p> <p>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</p>					

A* - Media
E - Salaries
I - Postage
O* - Other

B* - Printing
F* - Equipment
J - Penalties

C* - Fundraising
G - Political Party
K* - Office Expenses

D - To Another Candidate
H* - Holding Public Office Expenses
Q* - Donation to Legal Expense Fund

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.

Beatrice Jones for Fremont

Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
Capitol Cafe 102 E Main St Fremont, NC 27830	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
		\$ 79.53

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	Debit Card	O	11/06/2023	\$25.08	Pre- Election Dinner
01	Debit Card	O	11/07/2023	\$54.45	Election Day Meals

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
Limelight Ink 205-C Fedelon Trail Goldsboro, NC 27530	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
		\$ 202.83

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	Check	A	10/31/2023	\$202.83	Campaign T-shirts
				\$	

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
Willie Middleton 103 E. South St. Fremont, NC 27830	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
		\$ 25.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	Check	O	11/07/2023	\$50.00	Election Day Worker
				\$	

(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)	\$ 307.36
(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)	

A* - Media
E - Salaries
I - Postage
O* - Other

B* - Printing
F* - Equipment
J - Penalties

C* - Fundraising
G - Political Party
K* - Office Expenses

D - To Another Candidate
H* - Holding Public Office Expenses
Q* - Donation to Legal Expense Fund

Disbursements

Pg 3 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.

Beatrice Jones for Fremont

Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name		d. Comments
Dollar General 579 S. Wilson St. Fremont, NC 27830	c. Level Registered (Specify)		e. Election Sum to Date
	<input type="checkbox"/> Federal	<input type="checkbox"/> County:	\$ 12.24
<input type="checkbox"/> State	<input type="checkbox"/> Municipality:		

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	Draft	O	11/07/2023	\$12.24	Supplies
				\$	

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name		d. Comments
Rochelle Reid 304B Pine St. Fremont, NC 27830	c. Level Registered (Specify)		e. Election Sum to Date
	<input type="checkbox"/> Federal	<input type="checkbox"/> County:	\$ 50.00
<input type="checkbox"/> State	<input type="checkbox"/> Municipality:		

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	Check	O	11/07/2023	\$50.00	Election Day Worker
				\$	

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name		d. Comments
Vera Middleton 103 E. South Street Fremont, NC 27830	c. Level Registered (Specify)		e. Election Sum to Date
	<input type="checkbox"/> Federal	<input type="checkbox"/> County:	\$ 50.00
<input type="checkbox"/> State	<input type="checkbox"/> Municipality:		

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	Check	O	11/07/2023	\$50.00	Election Day Worker
				\$	

(\$ 112.24)	\$ 112.24
<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>	

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 required for detailed explanations in Remarks items 1-3

Disbursements

Pg 4 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.

Beatrice Jones for Fremont

Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures

a. Full Name, Mailing Address & Phone
(include city, state, & zip)

Laqwicha Coley
204 North Street
Fremont, NC 27830

b. Coordinated Committee Name

d. Comments

c. Level Registered (Specify)

Federal County:
 State Municipality:

e. Election Sum to Date

\$ 50.00

f. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks

01 Check O 11/07/2023 \$50.00 Election Day Worker

a. Full Name, Mailing Address & Phone
(include city, state, & zip)

b. Coordinated Committee Name

d. Comments

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

Code for detailed explanation of purpose/remarks field

A* - Media
E - Salaries
I - Postage
O* - Other

B* - Printing
F* - Equipment
J - Penalties

C* - Fundraising
G - Political Party
K* - Office Expenses

D - To Another Candidate
H* - Holding Public Office Expenses
Q* - Donation to Legal Expense Fund

Loan Repayments

Use this form to report payments on an existing loan.

Amendment

Pg ____ of ____

Yes No

Beatrice Jones for Fremont

**a. Full Name, Mailing Address & Phone
(include city, state, & zip)**

Beatrice Jones
PO Box 477
Fremont, NC 27830

b. Comments

c. Remaining Loan Balance

\$ 264.48

f. Account Code

01

g. Form of Payment

draft

h. Date (mm/dd/yyyy)

12/31/2023

i. Repayment Amount

\$ 735.52

\$

**a. Full Name, Mailing Address & Phone
(include city, state, & zip)**

c. Remaining Loan Balance

\$

f. Account Code

g. Form of Payment

h. Date (mm/dd/yyyy)

i. Repayment Amount

\$

\$

**a. Full Name, Mailing Address & Phone
(include city, state, & zip)**

c. Remaining Loan Balance

\$

f. Account Code

g. Form of Payment

h. Date (mm/dd/yyyy)

i. Repayment Amount

\$

\$

\$ 735.52

\$ 735.52

Forgiven Loans

Pg 1 of 1 Amendment Yes No

Use this form to report any loan which has been forgiven by the lender.

A Forgiven loan statement (CRO-6200) must accompany each forgiven loan.

1. Committee Full Name (and Fund if applicable)		2. ID Number
<i>Beatrice Jones for Fremont</i>		
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Beatrice Jones PO Box 477 Fremont, NC 27830</i>		
b. Comments c. Original Loan Date (mm/dd/yyyy) <i>06/23/2023</i> f. Election Sum to Date <i>\$ 1,000.00</i> d. Original Loan Amount <i>\$ 1,000.00</i> g. Date (mm/dd/yyyy) <i>12/31/2023</i> e. Remaining Loan Balance <i>\$ 0</i> h. Forgiven Amount <i>\$ 264.48</i>		
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) b. Comments c. Original Loan Date (mm/dd/yyyy) <i>\$</i> f. Election Sum to Date <i>\$</i> d. Original Loan Amount <i>\$</i> g. Date (mm/dd/yyyy) e. Remaining Loan Balance <i>\$</i> h. Forgiven Amount <i>\$</i>		
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) b. Comments c. Original Loan Date (mm/dd/yyyy) <i>\$</i> f. Election Sum to Date <i>\$</i> d. Original Loan Amount <i>\$</i> g. Date (mm/dd/yyyy) e. Remaining Loan Balance <i>\$</i> h. Forgiven Amount <i>\$</i>		
4. Total only this Page <i>\$</i>		
5. Total of ALL CRO-1440 Pages <i>\$</i> <small>(This line must be on line 26 of Detailed Summary Page CRO-1100)</small>		

The lender information should contain the same information as supplied on the original loan proceed statement.