

Disclosure Report Cover

| | | |
|-----------|------------------------------|--|
| Amendment | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> 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 Jovonia Lonte' Lewis Jovonia Lewis for School Board | c. ID Number |
| b. Mailing Address (include City, State and Zip Code) 1908 Cedar Street Durham, NC 27707 | d. Date Filed 03/31/2020 |
| | e. Phone Number 919-353-3655 |

| | | | |
|-------------------------------|--|---|---|
| 2. Report Year 2020 | 3. Period Start Date (mm/dd/yy) 02/16/2020 | 4. Period End Date (mm/dd/yy) 3/15/2020 | 5. Treasurer Full Name Victoria R. Morris |
|-------------------------------|--|---|---|

| | | | | |
|--|---|--|--|---|
| 6. Type of Committee (Check One) | | 9. Type of Report (check only one type of report from one category) | | |
| <input checked="" type="checkbox"/> Candidate Campaign | <input type="checkbox"/> Party | Municipal | State/County | Referendum |
| <input type="checkbox"/> PAC | <input type="checkbox"/> Referendum | <input type="checkbox"/> Organizational | <input checked="" 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 | | | | |
| 7. Type of Fund (if applicable, check one) | | <input type="checkbox"/> Pre-primary | <input type="checkbox"/> First | <input type="checkbox"/> Final |
| <input type="checkbox"/> "Booster Fund" | | <input type="checkbox"/> Pre-election | <input checked="" type="checkbox"/> Second | <input type="checkbox"/> Supplemental Final |
| <input type="checkbox"/> Building Fund | | <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"/> Other: | | <input type="checkbox"/> Mid Year | Semi-annual | |
| | | <input type="checkbox"/> Year End | <input type="checkbox"/> Mid Year | |
| | | <input type="checkbox"/> Final | <input type="checkbox"/> Year End | |
| | | <input type="checkbox"/> Special | <input type="checkbox"/> Final | |
| | | | <input type="checkbox"/> Special | |
| 8. Number of Fundraisers this Report None | | 10. Special Report Name | | |

| | | | |
|---|--|------------------------------------|-------------------------------|
| 11. Account Information | | 11. Account Information | |
| a. Financial Institution Full Name Suntrust Bank | c. Account Code Win 2020 | a. Financial Institution Full Name | c. Account Code |
| b. Purpose Campaign Donations | d. Period Begin Balance \$ 1,406.22 | b. Purpose | 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.

Victoria R. Morris
Printed Name of Signer

Victoria R. Morris
Signature of Appointed Treasurer

3/24/2020
Date

FOR OFFICE USE ONLY

| | | |
|--------------------------|-----------------|---|
| Date Received: _____ | Employee: _____ | Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> 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.

| 1. Committee Full Name (and Fund if applicable) | 2. Type of Report | 3. ID Number | |
|--|-------------------|------------------------------------|----------------------------------|
| Jovonia Lewis for School Board | Organizational | | |
| Start of Election Cycle: January 1, 2020 | | Total this Reporting Period | Total this Election Cycle |
| 4) Cash on Hand at Start | | \$ 1,406.22 | \$ 1,406.22 |
| RECEIPTS | | | |
| 5) Aggregated Contributions from Individuals | <i>(CRO-1205)</i> | \$ 225.00 | \$ 225.00 |
| 6) Contributions from Individuals | <i>(CRO-1210)</i> | \$ 450.00 | \$ 450.00 |
| 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 <i>(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)</i> | | \$ 675.00 | \$ 675.00 |
| EXPENDITURES | | | |
| 13) Disbursements | | | |
| 13a) Operating Expenditures | <i>(CRO-1310)</i> | \$ 955.79 | \$ 955.79 |
| 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> | \$ | \$ |
| 16) Refunds/Reimbursements From the Committee | <i>(CRO-1320)</i> | \$ | \$ |
| 17) In-Kind Contributions | <i>(CRO-1510)</i> | \$ | \$ |
| 18) TOTAL EXPENDITURES <i>(Add lines 13a, 13b, 13c, 14, 15, 16 and 17)</i> | | \$ | \$ |
| 19) Cash on Hand at End <i>(Add lines 4 and 12 together, then subtract line 18)</i> | | \$ 1,125.43 | \$ 1,125.43 |
| 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> | \$ | \$ |
| 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> | \$ | \$ |
| 27) 48-Hour Notice Reports Sum | <i>(CRO-2220)</i> | \$ | \$ |
| 28) Contributions to be Refunded | <i>(CRO-1215)</i> | \$ 0.00 | \$ 0.00 |

Contributions from Individuals

| | |
|------------------------------|--|
| Amendment | |
| <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> 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 | |
| Jovonia Lewis for School Board | | | | | | |
| 3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Mrs. Sherron H Williams 4412 Hinsberry Circle Durham, NC 27712 | | | Home Executive | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Retired | | | |
| | | | | | 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"/> | 1 | Ck # 6089 | | 02/10/2020 | \$ 100.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Tracie Greene 1215 Antler Pointe Drive Durham, NC 27713 | | | Manager | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Greene Solutions, LLC | | | |
| | | | | | 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"/> | 1 | CC-Discove | | 02/20/2020 | \$ 100.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Josh Grossman 2004 University Drive Durham, NC | | | Sensus | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Plastic Manufacturer | | | |
| | | | | | 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"/> | 1 | CC-Visa | | 02/05/2020 | \$ 100.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 300.00 | |
| 5. Total of ALL CRO-1210 Pages | | | | | \$ 450.00 | |
| <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | |

Contributions from Individuals

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 | |
|--|-----------------|--------------------|--|----------------------|--------------------------------------|--|
| Jovonia Lewis for School Board | | | | | | |
| 3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) Claudia Curtis 2207 Wilshire Drive Durham, NC 27707 | | | b. Job Title/Profession School Psychologist | | d. Comments | |
| | | | c. Employer's Name/Specific Field Durham Public Schools | | | |
| | | | | | 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 | |
| <input type="checkbox"/> | 1 | CC - Amex | | 02/12/2020 | \$ 150.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| | | | 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 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| | | | 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 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 150.00 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | \$ 450.00 | |

Disbursements

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 |
| Jovonia Lewis for School Board | | | | | |
| 3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i> | | | | | |
| <input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures | | | | | |
| 4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | b. Coordinated Committee Name | | d. Comments | |
| Home Depot 1700 N. Pointe Drive Durham, NC 27705 | | | | | |
| | | 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: | | \$ 68.46 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| 1 | Credit card | Supplies | 02/03/2020 | \$33.05 | campaign supplies |
| 1 | Credit card | Supplies | 02/27/2020 | \$35.41 | campaign supplies |
| 4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | b. Coordinated Committee Name | | d. Comments | |
| Longleaf Agency, LLC 1209 Moultrie Court Raleigh, NC 27615 | | | | | |
| | | c. Level Registered (Specify) | | e. Election Sum to Date | |
| | | <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | \$ 870.00 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| 1 | Credit card | palm cards | 02/14/2020 | \$265.00 | campaign supplies |
| 1 | Credit card | yard signs | 02/14/2020 | \$605.00 | campaign supplies |
| 4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | b. Coordinated Committee Name | | d. Comments | |
| Stripe www.stripe.com internet payment processing software | | | | | |
| | | c. Level Registered (Specify) | | e. Election Sum to Date | |
| | | <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | \$ 17.33 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| 1 | bank draft | service fee | 02/28/2020 | \$17.33 | |
| | | | | \$ | |
| 5. Total only this Page | | | | | \$ 955.79 |
| 6. Total of ALL CRO-1310 Pages | | | | | \$ 955.79 |
| <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 <i>(List detailed expenditure code in (h.) above)</i> | | | | | |
| A* - Media | | B* - Printing | | C* - Fundraising | |
| E - Salaries | | F* - Equipment | | G - Political Party | |
| I - Postage | | J - Penalties | | K* - Office Expenses | |
| O* - Other | | | | D - To Another Candidate | |
| | | | | H* - Holding Public Office Expenses | |
| | | | | Q* - Donation to Legal Expense Fund | |
| * Codes require detailed explanation in required remarks field (k) | | | | | |