

Disclosure Report Cover

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.
Do not use this form to update information.

Amendment
☐ Yes ☒ No

1. Committee Information	
a. Full Name <u>Friends of Laura</u>	c. ID Number <u>2CBFEG</u>
b. Mailing Address (include City, State and Zip Code) <u>133 Eagles Terrace</u> <u>Shelby, NC 28150</u>	d. Date Filed <u>1/23/2026</u>
	e. Phone Number <u>704-477-5771</u>

2. Report Year <u>2025</u>	3. Period Start Date (mm/dd/yy) <u>09/05/25</u>	4. Period End Date (mm/dd/yy) <u>12/31/25</u>	5. Treasurer Full Name <u>Aubrey Melia Stover</u>
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6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)	
☒ Candidate Campaign ☐ PAC ☐ Independent Expenditure ☐ Legal Expense Fund	☐ Party ☐ Referendum ☐ Joint Fundraiser	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
7. Type of Fund (if applicable, check one) ☐ Booster Fund ☐ Building Fund ☐ Other:		10. Special Report Name	

11. Account Information		11. Account Information	
a. Financial Institution Full Name <u>Wells Fargo</u>	a. Financial Institution Full Name	b. Purpose <u>Campaign</u>	b. Purpose
b. Purpose	c. Account Code <u>01</u>	c. Account Code	c. Account Code
d. Period Begin Balance <u>\$ 200</u>	d. Period Begin Balance	d. Period Begin Balance	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.

A. Melia Stover A. Melia Stover 1/23/26
Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY			
Date Received: <u>1/23/26</u>	Employee: <u>[Signature]</u>	Delivery Method ☐ Normal Mail ☐ Registered Mail ☐ Hand Delivered ☒ Electronically Filed	
Date Postmarked: _____	Employee: _____	☐ Signer has not received mandatory training	
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
Friends of Laura		Year End	2CBFEG
Start of Election Cycle: January 1, _____		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 200	\$
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)		\$	\$
6) Contributions from Individuals (CRO-1210)		\$ 6922.44	\$ 6922.44
7) Contributions from Political Party Committees (CRO-1220)		\$	\$
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)		\$	\$
11e) Exempt Purchase Price Sales (CRO-1265)		\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 6922.44	\$ 6922.44
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$	\$
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$	\$
13c) Coordinated Party Expenditures (CRO-1310)		\$ 2259.16	\$ 2259.16
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)		\$ 2259.16	\$ 2259.16
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 4863.28	\$ 4863.28
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)		\$ 95.00	
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 ____ of ____

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) Friends of Laura					2. ID Number 2CBFEG	
3. Contributor Information ☒ Add ☒ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Patrick J O'Leary 6711 Camelback Rd. Unit 12 Scottsdale, AZ 85251				b. Job Title/Profession farmer		d. Comments
				c. Employer's Name/Specific Field Self-employed		
				e. Election Sum to Date \$ 6800		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☒	01	check		09/14/2025	\$ 6800	
☒					\$	
☒					\$	
3. Contributor Information ☒ Add ☒ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Jo Powell Boggs PO Box 25 Fallsboro, NC 28042				b. Job Title/Profession retired		d. Comments
				c. Employer's Name/Specific Field retired		
				e. Election Sum to Date \$ 122.44		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☒		check	paid candidate filing fee	12/16/2025	\$ 122.44	
☒					\$	
☒					\$	
3. Contributor Information ☒ Add ☒ 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	
☒					\$	
☒					\$	
☒					\$	
4. Total only this Page					\$ 6922.44	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 6922.44	

Disbursements

Pg 1 of 2

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) Friends of Laura						2. ID Number 2CBFEG	
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) Dirt Cheap Signs 6706 Lohman Ford Rd. Lago Vista, TX 78645 1-888-255-5544				b. Coordinated Committee Name Friends of Laura		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☒ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ 1459.96	
f. Account Code 01	g. Form of Payment debit card	h. Purpose Code B	i. Date (mm/dd/yyyy) 10/06/2025	j. Amount \$ 1339.32	k. Required Remarks Yard Signs		
01	debit card	B	11/09/2025	\$ 120.64	Car magnets		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) Amazon.com, Inc. 410 Terry Ave N. Seattle, Washington 98109 (206) 266-1000				b. Coordinated Committee Name Friends of Laura		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☒ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ 263.14	
f. Account Code 01	g. Form of Payment debit card	h. Purpose Code B	i. Date (mm/dd/yyyy) 10/28/2025	j. Amount \$ 90.74	k. Required Remarks metal stakes		
01	debit card	B	11/18/2025	\$ 172.40	metal stakes		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) Dale Advertising 2523 Taylor Rd. Shelby, NC 28152 704-408-0828				b. Coordinated Committee Name Friends of Laura		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☒ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ 315.98	
f. Account Code 01	g. Form of Payment debit card	h. Purpose Code B	i. Date (mm/dd/yyyy) 11/21/2025	j. Amount \$ 315.98	k. Required Remarks Shirts		
				\$			
5. Total only this Page						\$ 2039.08	
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)						\$ 2259.16	
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

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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) Friends of Laura						2. ID Number 2CBFEG	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.) ☐ Operating Expenses ☐ Contributions to Candidates/Political Committees ☒ Coordinated Party Expenditures							
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) Oriental Trading Company, Inc. 4206 S. 108th St. Omaha, NE 68137 800-228-2269				b. Coordinated Committee Name Friends of Laura		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☒ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ 97.64	
f. Account Code 01	g. Form of Payment debit card	h. Purpose Code B	i. Date (mm/dd/yyyy) 11/26/2025	j. Amount \$ 97.64	k. Required Remarks pencils w/ name		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) Cleveland County Board of Elections PO Box 1299 Shelby, NC 28150 704-484-4858				b. Coordinated Committee Name Friends of Laura		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☒ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ 122.44	
f. Account Code	g. Form of Payment check	h. Purpose Code 0	i. Date (mm/dd/yyyy) 12-16-2025	j. Amount \$ 122.44	k. Required Remarks candidate filing fee		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ 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		
5. Total only this Page \$ 220.08							
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)						\$ 2259.16	
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)							

Debts and Obligations Owed By the Committee

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Amendment

☐ Yes ☒ No

Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card purchases.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Friends of Laura		2CBFEG	
3. Creditor Information ☐ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor.	
Victorian Rose Studio 212 S. Lafayette St. Shelby, NC 28150 704-482-9360		b. Description of Creditor Photography Studio	
c. Beginning Balance	d. Total Amount Paid	e. Total Amount Incurred	f. Remaining Balance
\$ 95.00	\$	\$ 95.00	\$ 95.00
g. Incurred Debts (what the committee received this period)			
g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)		g2. Date (mm/dd/yyyy)	g3. Amount
Victorian Rose Studio 212 S. Lafayette St. Shelby, NC 28150 704-482-9360		11/17/2025	\$ 95.00
		g4. Purpose Code	g5. Required Remarks
		B	Professional headshots
g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)		g2. Date (mm/dd/yyyy)	g3. Amount
			\$
		g4. Purpose Code	g5. Required Remarks
g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)		g2. Date (mm/dd/yyyy)	g3. Amount
			\$
		g4. Purpose Code	g5. Required Remarks
g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)		g2. Date (mm/dd/yyyy)	g3. Amount
			\$
		g4. Purpose Code	g5. Required Remarks
g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)		g2. Date (mm/dd/yyyy)	g3. Amount
			\$
		g4. Purpose Code	g5. Required Remarks
4. Total only this Page		\$ 95.00	
(This should be the sum of all 'g3.' from this page)			
5. Total of ALL CRO-1610 Pages		\$ 95.00	
(This line must be on line 22 of Detailed Summary Page CRO-1100)			
6. Purpose Codes (List detailed expenditure code in (g4.))			
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	O* - Other
* Codes require detailed explanation in required remarks field (g5.)			