

# 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

Steve Schewel for City Council

### c. ID Number

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

2101 W. Club Blvd  
Durham, NC 27705-3211

### d. Date Filed

10-28-11

### e. Phone Number

681-5752

### 2. Report Year

2011

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

9/27/2011

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

10/24/2011

### 5. Treasurer Full Name

Rosemary Thorne

### 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

Wachovia Bank

### b. Purpose

Campaign  
Checking

### c. Account Code

### d. Period Begin Balance

\$ 19,534.66

## 11. Account Information

### a. Financial Institution Full Name

### b. Purpose

IN-PERSON

OCT 28 2011

DURHAM BO

### 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.

Rosemary Thorne

Printed Name of Signer

Signature of Appointed Treasurer

10-28-11

Date

## FOR OFFICE USE ONLY

Date Received:

10/28/2011

Employee:

mRy

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.

<b>1. Committee Full Name and Fund (if applicable)</b>		<b>2. Type of Report</b>	<b>3. ID Number</b>
Steve Schewel for City Council		Preelection	
<b>Start of Election Cycle:</b> January 1, <u>2011</u>		<b>Total this Reporting Period</b>	<b>Total this Election Cycle</b>
<b>4) Cash on Hand at Start</b>		\$ 19,534.66	\$
<b>5) Aggregated Contributions from Individuals</b> (CRO-1205)		\$ 65.00	\$ 4,211
<b>6) Contributions from Individuals</b> (CRO-1210)		\$ 650.00	\$ 18,398
<b>7) Contributions from Political Party Committees</b> (CRO-1220)		\$	\$
<b>8) Contributions from Other Political Committees</b> (CRO-1230)		\$	\$ 1,370
<b>9) Loan Proceeds</b> (CRO-1410)		\$	\$
<b>10) Refunds/Reimbursements To the Committee</b> (CRO-1240)		\$	\$
<b>11) Other Receipt Sources</b>			
<b>11a) Interest on Bank Accounts</b> (CRO-1250)		\$	\$
<b>11b) Contributions from Not-for-Profit Organizations</b> (CRO-1250)		\$	\$
<b>11c) Outside Sources of Income</b> (CRO-1250)		\$	\$
<b>11d) Legal Expense Fund – Other Sources</b> (CRO-1270)		\$	\$
<b>11 e) Exempt Purchase Price Sales</b> (CRO-1265)		\$	\$
<b>12) TOTAL RECEIPTS</b> (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 715	\$ 23,979
<b>13) Disbursements</b>			
<b>13a) Operating Expenditures</b> (CRO-1310)		\$ 1,471.34	\$ 5,200.68
<b>13b) Contributions to Candidates/Political Committees</b> (CRO-1310)		\$	\$
<b>13c) Coordinated Party Expenditures</b> (CRO-1310)		\$	\$
<b>14) Aggregated Non-Media Expenditures</b> (CRO-1315)		\$	\$
<b>15) Loan Repayments</b> (CRO-1420)		\$	\$
<b>16) Refunds/Reimbursements From the Committee</b> (CRO-1320)		\$ 50.00	\$ 50.00
<b>17) In-Kind Contributions</b> (CRO-1510)		\$	\$
<b>18) TOTAL EXPENDITURES</b> (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 1,521.34	\$ 5,250.68
<b>19) Cash on Hand at End</b> (Add lines 4 and 12 together, then subtract line 18)		\$ 18,728.32	\$ 18,728.32
<b>20) Non-Monetary Gifts Given to Other Committees</b> (CRO-1330)		\$	
<b>21) Outstanding Loans (incl. ones from other campaigns)</b> (CRO-1430)		\$	
<b>22) Debts and Obligations owed By the Committee</b> (CRO-1610)		\$	
<b>23) Debts and Obligations owed To the Committee</b> (CRO-1620)		\$	
<b>24) Account Transfers Within the Committee</b> (CRO-1720)		\$	
<b>25) Administrative Support</b> (CRO-1710)		\$	\$
<b>26) Forgiven Loans</b> (CRO-1440)		\$	\$
<b>27) 48-Hour Notice Reports Sum</b> (CRO-2200)		\$	\$
<b>28) Contributions to be Refunded</b> (CRO-1215)		\$	\$

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

1 of 1

☐

**Yes**

☒

**No**

April 2007

# Contributions from Individuals

Pg 1 of 2 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 if applicable)					2. ID Number	
Steve Schewel for City Council						
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	
Richard Scher 1002 Urban Ave. Durham, NC 27701			Physician			
			c. Employer's Name/Specific Field			
			Duke University			
					e. Election Sum to Date	
					\$ 200	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		10/08/2011	\$ 200	
<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	
Betsy Knott 7005 Old Trail Drive Durham, NC 27712			Retired			
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$ 100	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		Check		10/04/2011	\$ 100	
<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	
Ronald Horvath 7002 Old Trail Drive Durham, NC 27712  IN-PERSON OCT 28 2011 DURHAM BO			Civil Engineer			
			c. Employer's Name/Specific Field			
			Horvath Associates			
					e. Election Sum to Date	
					\$ 150	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		Check		10/01/2011	\$ 150	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this page					\$ 450	
5. Total of ALL CRO-1210 Pages					\$ 650	
(Total amount from this and attached Summary Page CRO-1100)						

# Contributions from Individuals

Pg 2 of 2 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 Email if applicable)					2. ID Number	
Steve Schewel for City Council						
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	
Steve Cohn 1406 Pennsylvania Ave Durham, NC 27705			Publisher			
			c. Employer's Name/Specific Field			
			Duke University			
			e. Election Sum to Date			
			\$ 100			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		Check		10/06/2011	\$ 100	
<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	
Vinita Mittal 3005 London Bell Dr. Raleigh, NC 27614			Developer			
			c. Employer's Name/Specific Field			
			MJM Real Estate Group			
			e. Election Sum to Date			
			\$ 100			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		Check		10/21/2011	\$ 100	
<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	
<div style="text-align: center;"> <b>IN-PERSON</b>   OCT 28 2011   DURHAM BO </div>						
			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					\$ 200	
5. Total of ALL CRO-1210 Pages					\$ 650	
(This line must be on the 6 of Detailed Summary Page CRO-1210)						

# 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 e-mail address if e-file)					2. ID Number	
Steve Schewel for City Council						
3. Type of Disbursement (Check one box) (CRO-1100 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						
4. 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	
PA PAC 1821 Green Street, Ste 102 Durham, NC 27705					Mailing	
			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	
					\$ 500	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	Check	0	10/07/2011	\$500	Mailing expense	
				\$		
4. 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	
B&J Printing 1403 Person Street Durham, NC 27703						
			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	
					\$ 636.23	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	Check	B	10/07/2011	\$314.91	Printing flyer	
				\$		
4. 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	
Ad Spice 717 Broad Street Durham, NC 27705						
			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	
					\$ 601.74	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	Check	B	10/13/2011	\$190.38	Printing flyer	
				\$		
5. Total only this Page					\$ 1,005.29	
6. Total for ALL CRO-1100 Pages					\$ 1,471.34	
(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 2 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)					2. ID Number	
Steve Schewel for City Council						
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						
4. Payee Information <span style="float: right;">Add Remove</span>						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Chamber Legacy Foundation P.O. Box 3829 Durham, NC 27702						
			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	
					\$ 250	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	Check	O		\$250	Transit ref turnout	
				\$		
4. Payee Information <span style="float: right;">Add Remove</span>						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Omega Parker 111 Oakmont Ave Durham, NC 27713						
			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	
					\$ 166.05	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	Check	O	10/19/2011	\$166.05	Reimburse Meet & Greet Food	
				\$		
4. Payee Information <span style="float: right;">Add Remove</span>						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Minnie Forte-Brown 1612 Merrick Street Durham, NC 27701						
			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	
					\$ 50	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	Check	O	10/19/2011	\$50.00	Reimburse Meet & Greet Food	
				\$		
5. Total only this Page					\$ 466.05	
6. Total of ALL CRO-1310 Pages					\$ 1,471.34	
(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 Code (if not listed, please explain in (k) 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)						

# Refunds/Reimbursements From the Committee

Pg 1 of 1 Amendment Yes ☒ No ☐

Use this form to report refunds/reimbursements, including contributions returned to the contributor.

<b>1. Committee Full Name (and Fund if applicable)</b>			<b>2. ID Number</b>	
Steve Schewel for City Council				
<b>3. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove				
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>d. Type of Committee</b>		<b>h. Original Receipt Date</b>
George Calvert 111 N. Calvert Durham, NC 27701		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		07/21/2011
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		<b>e. Level Registered (Specify)</b>		<b>i. Original Receipt Amount</b>
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 200.00
<b>f. Purpose Code</b>		<b>j. Election Sum to Date</b>		
L				\$ 150.00
<b>b. Job Title/Profession</b>	<b>c. Employer's Name/Specific Field</b>	<b>g. Comments</b>		<b>k. Account Code</b>
Money Manager	Suntrust Banks			
<b>l. Form of Payment</b>	<b>m. Required Remarks</b>	<b>n. Date (mm/dd/yyyy)</b>	<b>o. Amount</b>	
Check	Initial contribution exceeded allowable	10/7/2011	\$ 50.00	
<b>3. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove				
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>d. Type of Committee</b>		<b>h. Original Receipt Date</b>
		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		<b>e. Level Registered (Specify)</b>		<b>i. Original Receipt Amount</b>
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$
<b>f. Purpose Code</b>		<b>j. Election Sum to Date</b>		
				\$
<b>b. Job Title/Profession</b>	<b>c. Employer's Name/Specific Field</b>	<b>g. Comments</b>		<b>k. Account Code</b>
<b>l. Form of Payment</b>	<b>m. Required Remarks</b>	<b>n. Date (mm/dd/yyyy)</b>	<b>o. Amount</b>	
			\$	
<b>3. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove				
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>d. Type of Committee</b>		<b>h. Original Receipt Date</b>
IN-PERSON OCT 28 2011 DURHAM BC		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		<b>e. Level Registered (Specify)</b>		<b>i. Original Receipt Amount</b>
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$
<b>f. Purpose Code</b>		<b>j. Election Sum to Date</b>		
				\$
<b>b. Job Title/Profession</b>	<b>c. Employer's Name/Specific Field</b>	<b>g. Comments</b>		<b>k. Account Code</b>
<b>l. Form of Payment</b>	<b>m. Required Remarks</b>	<b>n. Date (mm/dd/yyyy)</b>	<b>o. Amount</b>	
			\$	
<b>4. Total on this Page</b>				\$ 50.00
<b>5. Total on ALL CRO-1320 Pages (This line must be on line 16 of Detailed Summary Page CRO-1100)</b>				\$ 50.00
L - Returned to Contributor      M - Overpayment for Service      N - Exceeded Contribution Limit P* - Reimbursement of In-Kind      O* Other				
* Codes and full detailed explanation in required remarks field (m)				