

Disclosure Report Cover

COPY

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 LYDIA TILLEY EFFLER	c. ID Number
b. Mailing Address (include City, State and Zip Code) 24 WILLOUGHBY WAY MARION, NC 28752	d. Date Filed 02/26/2024
	e. Phone Number (828) 460-4199

2. Report Year 2024	3. Period Start Date (mm/dd/yy) 01/01/2024	4. Period End Date (mm/dd/yy) 02/17/2024	5. Treasurer Full Name LYDIA TILLEY EFFLER
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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	☐ Party	☐ Municipal	☐ State/County
☐ Joint Fundraiser	☐ PAC	☐ Organizational	☐ Organizational
☐ Referendum	☐ Legal Expense Fund	☐ Thirty-five day	☐ Quarterly
7. Type of Fund (if applicable, check one)		☐ Pre-primary	☒ First
☐ "Booster Fund"		☐ Pre-election	☐ Second
☐ Building Fund		☐ Pre-runoff	☐ Third
☐ Presidential Election Year Candidates Fund		☐ Semi-annual	☐ Fourth
☐ NC Public Campaign Financing Fund		☐ Mid Year	☐ Semi-annual
☐ Other:		☐ Year End	☐ Mid Year
		☐ Final	☐ Year End
		☐ Special	☐ Final
			☐ Special
8. Number of Fundraisers this Report 1		10. Special Report Name	

3. Account Information		3. Account Information	
a. Financial Institution Full Name MCDOWELL CORNERSTONE CREDIT UNION		a. Financial Institution Full Name	
b. Purpose CAMPAIGN ACCOUNT	c. Account Code A	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 1,905.02		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

Lydia Tilley Effler
Printed Name of Signer

Lydia Tilley Effler
Signature of Appointed Treasurer

02/26/2024
Date

FOR OFFICE USE ONLY

Date Received:

2/27/24

Employee:

Dan Dyer

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

COPY

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	
LYDIA TILLEY EFFLER		2024 First Quarter			
Start of Election Cycle: January 1, 2024		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 1,905.02		\$ 1,905.02	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 500.00		\$ 500.00	
6) Contributions from Individuals (CRO-1210)		\$ 9,950.00		\$ 9,950.00	
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00		\$ 0.00	
8) Contributions from Other Political Committees (CRO-1230)		\$ 750.00		\$ 750.00	
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)		\$ 11,200.00		\$ 11,200.00	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 3,549.06		\$ 3,549.06	
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)		\$ 1,500.00		\$ 1,500.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 5,049.06		\$ 5,049.06	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 8,055.96		\$ 8,055.96	
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	

Aggregated Contributions from Individuals

Page 1 of 1

Amendment

☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
LYDIA TILLEY EFFLER						
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
☐ Add	A	Cash		02/13/2024	\$ 50.00	
☐ Remove						
☐ Add	A	Cash		02/13/2024	\$ 50.00	
☐ Remove						
☐ Add	A	Cash		02/04/2024	\$ 50.00	
☐ Remove						
☐ Add	A	Cash		02/13/2024	\$ 50.00	
☐ Remove						
☐ Add	A	Cash		02/06/2024	\$ 50.00	
☐ Remove						
☐ Add	A	Cash		02/13/2024	\$ 50.00	
☐ Remove						
☐ Add	A	Cash		02/16/2024	\$ 50.00	
☐ Remove						
☐ Add	A	Cash		02/16/2024	\$ 50.00	
☐ Remove						
☐ Add	A	Cash		02/04/2024	\$ 50.00	
☐ Remove						
☐ Add	A	Cash		02/05/2024	\$ 50.00	
☐ Remove						
4. Total only this Page					\$ 500.00	
5. Total of ALL CRO-1205 Pages					\$ 500.00	
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

Contributions from Individuals

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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)					2. ID Number	
LYDIA TILLEY EFFLER						
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
CHARLES ABERNATHY 357 LENTZ LANDING NEBO, NC 28761			ECONOMIC DIRECTOR			
			c. Employer's Name/Specific Field			
			MCDOWELL COUNTY ECONOMIC DEV.		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	
☐	A	Check		02/16/2024	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
DEBORAH BACH 324 MOUNTAIN HOPE DRIVE OLD FORT, NC 28762			RETIRED - DISABLE			
			c. Employer's Name/Specific Field			
			RETIRED - DISABLED		e. Election Sum to Date	
					\$ 350.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	A	Check		01/22/2024	\$ 100.00	
☐	A	Check		02/16/2024	\$ 250.00	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
FRANCES BAKER 209 MARLER RD MARION, NC 28752			BUSINESS OWNER			
			c. Employer's Name/Specific Field			
			BAKER TIRE AND AUTO		e. Election Sum to Date	
					\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	A	Check		02/08/2024	\$ 250.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 700.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 9,950.00	

Contributions from Individuals

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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) LYDIA TILLEY EFFLER					2. ID Number	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) LENA BAKER PO BOX 2726 MARION, NC 28752			b. Job Title/Profession COUNTY EMPLOYEE		d. Comments	
			c. Employer's Name/Specific Field MCDOWELL COUNTY REGISTER OF DEEDS		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	
☐	A	Check		02/16/2024	\$ 200.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) RICHARD BAKER 107 HIGH LAKE DR NEBO, NC 28761			b. Job Title/Profession CARE RESPONSE FOR RESPONDERS		d. Comments	
			c. Employer's Name/Specific Field CARE RESPONSE		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	
☐	A	Check		02/16/2024	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) GREG BARKESDALE WOODLAND DRIVE MARION, NC 28752			b. Job Title/Profession RANGE OFFICER		d. Comments	
			c. Employer's Name/Specific Field MCDOWELL COUNTY		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	
☐	A	Check		02/06/2024	\$ 100.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 400.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 9,950.00	

Contributions from Individuals

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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)					2. ID Number	
LYDIA TILLEY EFFLER						
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
TIM BOONE 463 Campbell Rd RIDGEVILLE, SC 29472			CHEMICAL ENGINEER			
			c. Employer's Name/Specific Field			
			Chemical Manufacturing			
					e. Election Sum to Date	
					\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	A	Check		02/03/2024	\$ 250.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
REBECCA BYRD 2034 TOMS CREEK RD MARION, NC 28752			COUNTY EMPLOYEE			
			c. Employer's Name/Specific Field			
			MCDOWELL COUNTY REGISTER OF DEEDS			
					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	
☐	A	Check		02/09/2024	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
ROBERT COLEATES 35 BOBCAT PATH MARION, NC 28752			RETIRED			
			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	
☐	A	Check		02/05/2024	\$ 100.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 450.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 9,950.00	

Contributions from Individuals

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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) LYDIA TILLEY EFFLER					2. ID Number	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
PERCY CRUTCHFIELD P.O. BOX 65 PITTSBORO, NC 27312			LAW ENFORCEMENT			
			c. Employer's Name/Specific Field			
			STATE OF NC		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	
☐	A	Check		02/16/2024	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
R MITCH GILLESPIE 185 CROSS CREEK N RIDGE DRIVE MARION, NC 28752			RETIRED STATE EMPLOYEE			
			c. Employer's Name/Specific Field			
			STATE OF NC		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	
☐	A	Check		02/16/2024	\$ 200.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
NATALIE GOUGE 416 PAXTON CREEK ROAD MARION, NC 28752			RETIRED - EDUCATION			
			c. Employer's Name/Specific Field			
			MCDOWELL COUNTY SCHOOLS		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	
☐	A	Check		02/05/2024	\$ 100.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 400.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 9,950.00	

Contributions from Individuals

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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)					2. ID Number	
LYDIA TILLEY EFFLER						
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
JIMMY HACHADURIAN 534 RESERVIOR RD MARION, NC 28752			RETIRED TRUCK DRIVER			
			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	
☐	A	Check		02/13/2024	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
ANN HARKEY 90 BROAD ST MARION, NC 28752			RETIRED EDUCATOR			
			c. Employer's Name/Specific Field			
			RETIRED EDUCATOR			
					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	
☐	A	Check		02/08/2024	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
ELAINE HARTSOCK 4925 OLD FORT SUGAR HILL RD OLD FORT, NC 28762			RETIRED - HOMEMAKER			
			c. Employer's Name/Specific Field			
			RETIRED HOMEMAKER			
					e. Election Sum to Date	
					\$ 1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	A	Check		01/18/2024	\$ 500.00	
☐	A	Check		02/16/2024	\$ 500.00	
☐					\$	
4. Total only this Page					\$ 1,200.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 9,950.00	

Contributions from Individuals

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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)					2. ID Number	
LYDIA TILLEY EFFLER						
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
MARK HILTON 1351 NORTHERN DRIVE NW CONOVER, NC 28613			LAW ENFORCEMENT			
			c. Employer's Name/Specific Field			
			STATE OF NC			
					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	
☐	A	Check		02/16/2024	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
BARBARA HILTY 802 VETERANS DRIVE MARION, NC 28752			RETIRED - FNANCIAL			
			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	
☐	A	Check		02/05/2024	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
JOSEPH KING JR PO BOX 944 KINGS MOUNTAIN, NC 28086			REGISTERED LOBBIEST			
			c. Employer's Name/Specific Field			
			OLD NORTH STATE			
					e. Election Sum to Date	
					\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	A	Check		02/05/2024	\$ 500.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 700.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 9,950.00	

Contributions from Individuals

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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)						2. ID Number	
LYDIA TILLEY EFFLER							
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
STEPHEN LITTLE 370 S GARDEN ST MARION, NC 28752				ATTORNEY			
				c. Employer's Name/Specific Field			
				LITTLE LATTIMORE LEDFORD ATTORNEYS			
						e. Election Sum to Date	
						\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	A	Check		02/05/2024		\$ 250.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
COREY MACKINNON 36 HARBORSIDE DRIVE NEBO, NC 28761				JUDGE			
				c. Employer's Name/Specific Field			
				STATE OF NC			
						e. Election Sum to Date	
						\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	A	Check		02/08/2024		\$ 250.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JAMES MANIS 9186 SUGARHILL ROAD MARION, NC 28752				LAW ENFORCEMENT			
				c. Employer's Name/Specific Field			
				STATE OF NC			
						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	
☐	A	Check		02/16/2024		\$ 200.00	
☐						\$	
☐						\$	
4. Total only this Page						\$ 700.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 9,950.00	

Contributions from Individuals

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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)						2. ID Number	
LYDIA TILLEY EFFLER							
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
MARY MARETT PO BOX 386 BLACK MOUNTAIN, NC 28711				NC CORRECTIONS - RETIRED			
				c. Employer's Name/Specific Field			
				STATE OF NC			
						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	
☐	A	Check		02/05/2024		\$ 100.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
DIANE MCKINNEY 246 SUNNY STREET MARION, NC 28752				REALTOR			
				c. Employer's Name/Specific Field			
				JO ANN HOWELL REALTY			
						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	
☐	A	Check		02/03/2024		\$ 200.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
AIMEE MERRILL 300 MORGAN ST MARION, NC 28752				BUSINESS OWNER			
				c. Employer's Name/Specific Field			
				POSSIBILITIES INC			
						e. Election Sum to Date	
						\$ 1,500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	A	In-Kind	FOOD, DECORATIONS, AND HOME USE FOR	02/13/2024		\$ 1,500.00	
☐						\$	
☐						\$	
4. Total only this Page						\$ 1,800.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 9,950.00	

Contributions from Individuals

Pg 9 of 14

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)						2. ID Number	
LYDIA TILLEY EFFLER							
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
RICHARD MESSNER 1813 MOUNTAIN CREST DR S. MARION, NC 28752				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
						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	
☐	A	Check		02/16/2024		\$ 200.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
LARRY MILLER 1304 VETERANS DRIVE EXT MARION, NC 28752				RETIRED COMMERCIAL BUILDER			
				c. Employer's Name/Specific Field			
				GEM CONSTRUCTION			
						e. Election Sum to Date	
						\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	A	Check		02/16/2024		\$ 500.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
LISA MORGAN 6379 US HWY 221 S MARION, NC 28752				LAW ENFORCEMENT			
				c. Employer's Name/Specific Field			
				STATE OF NC			
						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	
☐	A	Check		02/13/2024		\$ 200.00	
☐						\$	
☐						\$	
4. Total only this Page						\$ 900.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 9,950.00	

Contributions from Individuals

Pg 10 of 14

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)						2. ID Number	
LYDIA TILLEY EFFLER							
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
DAVID PATNEAUDE 691 JACKTOWN RD MARION, NC 28762				REALTOR			
				c. Employer's Name/Specific Field			
				CATAWBA PROPERTIES			
						e. Election Sum to Date	
						\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	A	Check		01/25/2024		\$ 500.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
TERESA QUEEN 1708 WATERFORD WAY MORGANTON, NC 28655				EDUCATION			
				c. Employer's Name/Specific Field			
				NC DEPT OF PUBLIC INSTRUCTION			
						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	
☐	A	Check		02/16/2024		\$ 200.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
ROBIN RAMSEY 26 RAMSEY FARM ROAD FAIRVIEW, NC 28730				US SENATE STAFF			
				c. Employer's Name/Specific Field			
				US SENATE			
						e. Election Sum to Date	
						\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	A	Check		02/05/2024		\$ 250.00	
☐						\$	
☐						\$	
4. Total only this Page						\$ 950.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 9,950.00	

Contributions from Individuals

Pg 11 of 14

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)					2. ID Number	
LYDIA TILLEY EFFLER						
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
APRIL RIDDLE 248 PEDDLERS TRAIL MARS HILL, NC 28754				FIELD REP		
				c. Employer's Name/Specific Field REGIONAL COMMERCE NC		
						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
☐	A	Check		02/16/2024		\$ 200.00
☐						\$
☐						\$
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
WESLEY SHELLEY 223 FOREST HEIGHTS MARION, NC 28752				ATTORNEY		
				c. Employer's Name/Specific Field EVANS AND SHELLEY		
						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
☐	A	Check		02/08/2024		\$ 100.00
☐						\$
☐						\$
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
ANN SMILEY 85 GRANDVIEW PEAKS DRIVE NEBO, NC 28761				RETIRED		
				c. Employer's Name/Specific Field RETIRED		
						e. Election Sum to Date
						\$ 250.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
☐	A	Check		02/08/2024		\$ 250.00
☐						\$
☐						\$
4. Total only this Page						\$ 550.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 9,950.00

Contributions from Individuals

Pg 12 of 14

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)						2. ID Number	
LYDIA TILLEY EFFLER							
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
MARTY SUMNER 2517 FINCH FARM ROAD TRINITY, NC 27370				SENIOR DEPUTY			
				COMMISSIONER			
				c. Employer's Name/Specific Field STATE OF NC DEPT OF INS.			
						e. Election Sum to Date	
						\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	A	Check		02/05/2024		\$ 250.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
KAY TATE 249 FOREST HEIGHTS DR MARION, NC 28752				TEACHER - RETIRED			
				c. Employer's Name/Specific Field			
				Educational Services			
						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	
☐	A	Check		02/03/2024		\$ 100.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
CHAD TONEY 555 BRACKETT TOWN RD NEBO, NC 28761				INSURANCE			
				c. Employer's Name/Specific Field			
				CHAD TONEY INSURANCE			
						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	
☐	A	Check		02/09/2024		\$ 200.00	
☐						\$	
☐						\$	
4. Total only this Page						\$ 550.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 9,950.00	

Contributions from Individuals

Pg 13 of 14 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)						2. ID Number	
LYDIA TILLEY EFFLER							
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
BRENDA VAUGHN 897 BETHEL CHURCH RD MARION, NC 28752				RETIREED			
				c. Employer's Name/Specific Field			
				MCDOWELL COUNTY SHERIFF			
				e. Election Sum to Date			
				\$		250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	A	Check		02/16/2024	\$ 250.00		
☐					\$		
☐					\$		
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
LUANNE WALKER 45 PERRY ST MARION, NC 28752				BUSINESS OWNER			
				c. Employer's Name/Specific Field			
				SELF EMPLOYED CLEANING			
				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		
☐	A	Check		02/16/2024	\$ 200.00		
☐					\$		
☐					\$		
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
LOUIS WILLIAMS PO BOX 475 NEBO, NC 28761				RETIREED TROOPER			
				c. Employer's Name/Specific Field			
				STATE OF NC			
				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		
☐	A	Check		02/13/2024	\$ 100.00		
☐					\$		
☐					\$		
4. Total only this Page						\$ 550.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 9,950.00	

Contributions from Individuals

Pg 14 of 14

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)					2. ID Number	
LYDIA TILLEY EFFLER						
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
LYNN WILSON 74 PARKER COVE RD WEAVERVILLE, NC 28787				RETIRE POLICE		
				c. Employer's Name/Specific Field RETIRE ASHEVILLE POLICE		
				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	
☐	A	Check		02/08/2024	\$ 100.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 100.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 9,950.00	

CRO-1210

NC State Board of Elections

April 2007

Contributions from Other Political Committees Pg 1 of 1 Amendment ☐ Yes ☒ No

Use this form to report contributions from other candidate, referendum or PAC committees

1. Committee Full Name (and Fund if applicable)				2. ID Number	
LYDIA TILLEY EFFLER					
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Type of Committee		d. Comments
RICKY BUCHANAN FOR SHERIFF PO BOX 3026 MARION, NC 28752			☒ Candidate ☐ PAC ☐ Referendum		
			c. Level Registered (Specify) ☐ Federal ☒ County: ☐ State ☐ Municipality:		
			McDowell		e. Election Sum to Date
					\$ 250.00
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)		j. Amount
A	Check		02/13/2024		\$ 250.00
					\$
					\$
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Type of Committee		d. Comments
WARREN DANIEL FOR NC SENATE PO BOX 1854 MORGANTON, NC 28655			☒ Candidate ☐ PAC ☐ Referendum		
			c. Level Registered (Specify) ☐ Federal ☐ County: ☒ State ☐ Municipality:		
					e. Election Sum to Date
					\$ 500.00
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)		j. Amount
A	Check		02/16/2024		\$ 500.00
					\$
					\$
4. Total only this Page					\$ 750.00
5. Total of ALL CRO-1230 Pages (This line must be on line 8 of Detailed Summary Page CRO-1100)					\$ 750.00

Disbursements

Amendment
Pg 1 of 1 ☐ 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	
LYDIA TILLEY EFFLER							
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)				b. Coordinated Committee Name		d. Comments	
ALLEGRA ASHEVILLE 2 WESTGATE PARKWAY ASHEVILLE, NC 28806							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 2,826.36	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
A	Debit Card	BIO	02/09/2024	\$ 2,826.36	DESIGN, PRINT, AND MAILING CARD		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
COLEY'S GRAPHICS AND MORE 124 S GARDEN STREET MARION, NC 28752							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 722.70	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
A	Debit Card	O	02/08/2024	\$ 292.60	HOODIES FOR CAMPAIGN		
A	Debit Card	O	02/15/2024	\$ 430.10	T-SHIRTS FOR WORKERS		
5. Total only this Page						\$ 3,549.06	
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)						\$ 3,549.06	
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)							

In-Kind Contributions

Pg 1 of 1 Amendment ☐ Yes ☒ No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.

Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
LYDIA TILLEY EFFLER			
3. Contributor Information ☐ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
AIMEE MERRILL 300 MORGAN ST MARION, NC 28752		☒ Individual	
		☐ Candidate	
		☐ Party	
		☐ PAC	
		☐ Referendum	
		☐ Other Receipt Source	
		d. Election Sum to Date	
		\$ 1,500.00	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
FOOD, DECORATIONS, AND HOME USE FOR DINNER HOSTING RECEPTION		02/13/2024	\$ 1,500.00
			\$
			\$
4. Total only this Page		\$ 1,500.00	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 1,500.00	

CRO-1510

NC State Board of Elections

December 2007