

# 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	c. ID Number
DUMOND FOR GOLDSBORO COMMITTEE	
b. Mailing Address (include City, State and Zip Code)	d. Date Filed
602 GLOUCESTER ROAD GOLDSBORO, NC 27534	02/20/2023
	e. Phone Number
	9194328837

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2023	02/13/2023	02/21/2023	LAURENCE FREDERICK III

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"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser	<table><tr><td>Municipal</td><td>State/County</td><td>Referendum</td></tr><tr><td><input checked="" type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day</td><td><input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly</td><td><input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum</td></tr><tr><td><input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special</td><td><input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special</td><td><input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special</td></tr></table>	Municipal	State/County	Referendum	<input checked="" type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly	<input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum	<input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special
Municipal	State/County	Referendum								
<input checked="" type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly	<input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum								
<input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special								
7. Type of Fund (if applicable, check one)	10. Special Report Name									
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund  <input type="checkbox"/> Other:										
8. Number of Fundraisers this Report										

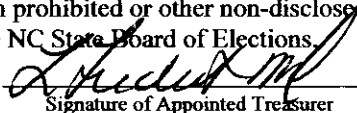
11. Account Information	11. Account Information
a. Financial Institution Full Name	a. Financial Institution Full Name
FIRST CITIZENS BANK	RECEIVED WCBOE FEB 21 2023
b. Purpose	b. Purpose
GENERAL OPERATING ACCOUNT	
c. Account Code	c. Account Code
BUS	
d. Period Begin Balance	d. Period Begin Balance
\$ 0.0	BY _____ \$

## 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.

LAURENCE FREDERICK

Printed Name of Signer

  
Signature of Appointed Treasurer

02/20/2023

Date

## FOR OFFICE USE ONLY

Date Received: 2/21/23

Employee: AH

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

1. Committee Full Name (and Fund if applicable)		2. Type of Report	3. ID Number
DIAMOND FOR GOLDSBORO COMMITTEE		ORGANIZATIONAL	
Start of Election Cycle: January 1, 2023		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 0	\$
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$	\$
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$ 1700	\$ 1700
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)		\$ 1700	\$ 1700
<b>EXPENDITURES</b>			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 1500	\$ 1500
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	\$
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$
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)		\$ 1500	\$ 1500
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 200	\$ 200
<b>ADDITIONAL INFORMATION</b>			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 1700	1700
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$	
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)	\$	\$

# Loan Proceeds

Pg

/

of

/

Amendment

☐

Yes

☒

No

Use this form to report proceeds from a loan and loan endorser's information

A loan proceeds statement must accompany each loan that is from an individual

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
DUMOND FOR GOLDSBORO COMMITTEE					
<b>3. Lender Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
CHRETIEN DUMOND 602 GLOUCESTER RD. GOLDSBORO, NC 27534 9194328837		OWNER OF YBR MARKETING			
		<b>c. Employer's Name/Specific Field</b>		<b>e. Start Date (mm/dd/yyyy)</b>	
		SELF/MARKETING		02/15/2023	
				<b>f. End Date (mm/dd/yyyy)</b>	
<b>g. Rate</b>	<b>h. Security Pledged</b>	<b>i. Account Code</b>	<b>j. Form of Payment</b>	<b>k. Amount</b>	
%		BUS	DRAFT	\$ 500	
<b>l. Full Name of Lending Institution</b>				<b>m. Loan Number</b>	
<b>4. Endorsers/Makers</b> <i>(The people who guarantee the loan.)</i>					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
		<b>d. Percentage</b>		<b>e. Amount</b>	
		%		\$	
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
		<b>d. Percentage</b>		<b>e. Amount</b>	
		%		\$	
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
		<b>d. Percentage</b>		<b>e. Amount</b>	
		%		\$	
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
		<b>d. Percentage</b>		<b>e. Amount</b>	
		%		\$	
<b>5. Total of ALL CRO-1410 Pages</b>				\$ 1700	
<i>(This line must be on line 9 of Detailed Summary Page CRO-1100)</i>					

# Loan Proceeds

Pg 1 of 1 Amendment ☐ Yes ☒ No

Use this form to report proceeds from a loan and loan endorser's information  
A loan proceeds statement must accompany each loan that is from an individual

<b>1. Committee Full Name (and Fund if applicable)</b> DUMOND FOR GOLDSBORO COMMITTEE				<b>2. ID Number</b>	
<b>3. Lender Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) CHRETIEN DUMOND 602 GLOUCESTER DRIVE GOLDSBORO, NC 27534 9194328837		<b>b. Job Title/Profession</b> OWNER OR YBR MARKETING		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> SELF/MARKETING		<b>e. Start Date (mm/dd/yyyy)</b> 02/16/2023	
				<b>f. End Date (mm/dd/yyyy)</b>	
<b>g. Rate</b> %	<b>h. Security Pledged</b>	<b>i. Account Code</b> BUS	<b>j. Form of Payment</b> DRAFT	<b>k. Amount</b> \$ 1200	
<b>l. Full Name of Lending Institution</b>				<b>m. Loan Number</b>	
<b>4. Endorsers/Makers</b> <i>(The people who guarantee the loan.)</i>					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
		<b>d. Percentage</b> %		<b>e. Amount</b> \$	
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
		<b>d. Percentage</b> %		<b>e. Amount</b> \$	
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
		<b>d. Percentage</b> %		<b>e. Amount</b> \$	
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
		<b>d. Percentage</b> %		<b>e. Amount</b> \$	
<b>5. Total of ALL CRO-1410 Pages</b> <i>(This line must be on line 9 of Detailed Summary Page CRO-1100)</i>				\$ 1700	

# Outstanding Loans

Amendment  
Pg 1 of 1 ☐ Yes ☒ No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

<b>1. Committee Full Name (and Fund if applicable)</b>			<b>2. ID Number</b>
DUMOND FOR GOLDSBORO COMMITTEE			
<b>3. Lender Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) CHRETIEN DUMOND 602 GLOUCESTER RD GOLDSBORO, NC 27534 919 432 8837	<b>b. Job Title/Profession</b>		<b>d. Comments</b>
	OWNER OF YBR MARKETING		
	<b>c. Employer's Name/Specific Field</b>		<b>e. Start Date (mm/dd/yyyy)</b>
	SELF/MARKETING		02/15/2023
		<b>f. End Date (mm/dd/yyyy)</b>	
<b>g. Rate</b>	<b>h. Security Pledged</b>	<b>i. Original Loan Amount</b>	<b>j. Remaining Loan Balance</b>
%		\$ 500	\$ 500
<b>k. Full Name of Lending Institution</b>			<b>l. Loan Number</b>
<b>3. Lender Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) CHRETIEN DUMOND 602 GLOUCESTER RD GOLDSBORO, NC 27534 919 432 8837	<b>b. Job Title/Profession</b>		<b>d. Comments</b>
	OWNER OF YBR MARKETING		
	<b>c. Employer's Name/Specific Field</b>		<b>e. Start Date (mm/dd/yyyy)</b>
	SELF/MARKETING		02/16/2023
		<b>f. End Date (mm/dd/yyyy)</b>	
<b>g. Rate</b>	<b>h. Security Pledged</b>	<b>i. Original Loan Amount</b>	<b>j. Remaining Loan Balance</b>
%		\$ 1200	\$ 1200
<b>k. Full Name of Lending Institution</b>			<b>l. Loan Number</b>
<b>3. Lender Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>b. Job Title/Profession</b>		<b>d. Comments</b>
	<b>c. Employer's Name/Specific Field</b>		<b>e. Start Date (mm/dd/yyyy)</b>
		<b>f. End Date (mm/dd/yyyy)</b>	
<b>g. Rate</b>	<b>h. Security Pledged</b>	<b>i. Original Loan Amount</b>	<b>j. Remaining Loan Balance</b>
%		\$	\$
<b>k. Full Name of Lending Institution</b>			<b>l. Loan Number</b>
<b>4. Total only this Page</b>			\$ 1700
<b>5. Total of ALL CRO-1430 Pages</b> (This line must be on line 21 of Detailed Summary Page CRO-1100)			\$ 1700



# NORTH CAROLINA

## STATE BOARD OF ELECTIONS

### Loan Proceeds Statement

This Statement is used to report detailed information about a new loan and is required to accompany the Loan Proceeds Form in the report for which the loan is initially disclosed. If the loan is from an individual, the lender's signature is required on this form.

This Statement is to be filed with the Election Board where the committee's reports are filed.

- Name of committee to receive loan: Diamond For Goldsboro Committee
- Person or committee to make loan: Chretien Diamond
- Date of loan to committee: 2/16/23
- Name of lending institution (source):  
N/A
- Amount of loan: \$1200
- Description (if in-kind loan): N/A
- Names of all parties responsible for payment of loan (guarantors):
- Period of loan: N/A
- Rate of interest of loan: N/A
- Security pledged for loan: N/A

I, Chretien M. Diamond, acknowledge that all of the information  
(Person lending money to committee)  
provided is complete, true, and accurate. I further understand I may not forgive a loan  
that has an outstanding balance to any source.

Chretien M. Diamond  
Signature of Lender

2/16/23  
Date Signed

L. Friedman  
Signature of Treasurer of Committee

2/16/23  
Date Signed





# NORTH CAROLINA

## STATE BOARD OF ELECTIONS

### Loan Proceeds Statement

This Statement is used to report detailed information about a new loan and is required to accompany the Loan Proceeds Form in the report for which the loan is initially disclosed. If the loan is from an individual, the lender's signature is required on this form.

This Statement is to be filed with the Election Board where the committee's reports are filed.

- Name of committee to receive loan: DUMOND FOR GOLDSBORO COMMITTEE
- Person or committee to make loan: CHRETIEN M. DUMOND
- Date of loan to committee: 02/15/2023
- Name of lending institution (source):  
N/A
- Amount of loan: \$500.00
- Description (if in-kind loan): N/A
- Names of all parties responsible for payment of loan (guarantors):  
N/A
- Period of loan: N/A
- Rate of interest of loan: N/A
- Security pledged for loan: N/A

I, CHRETIEN M. DUMOND, acknowledge that all of the information  
(Person lending money to committee)  
provided is complete, true, and accurate. I further understand I may not forgive a loan  
that has an outstanding balance to any source.

Chretien M. Dumond  
Signature of Lender

02-15-2023  
Date Signed

[Signature]  
Signature of Treasurer of Committee

02-15-23  
Date Signed

# 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.

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
DUMOND FOR GOLDSBORO COMMITTEE						
<b>3. Type of Disbursement</b> <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						
<b>4. Payee Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) CLIFTON BROADHURST 101 ROSEMARY COURT DUDLEY, NC 28333			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
			<b>c. Level Registered (Specify)</b>			
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:			
					<b>e. Election Sum to Date</b>	
						\$ 1500
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>	
BUS	CHECK	O	02/16/2023	\$1500	36. CONSULTANT GOTV	
				\$		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
			<b>c. Level Registered (Specify)</b>			
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
					<b>e. Election Sum to Date</b>	
						\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>	
				\$		
				\$		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
			<b>c. Level Registered (Specify)</b>			
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
					<b>e. Election Sum to Date</b>	
						\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>	
				\$		
				\$		
<b>5. Total only this Page</b>						\$ 1500
<b>6. Total of ALL CRO-1310 Pages</b>						
(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)						\$ 1500
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						
<b>7. Purpose Codes</b> (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)						