

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

Boyette for Council Campaign

c. ID Number

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

P O Box 986
Goldsboro, NC 27533

d. Date Filed

08-03-23

e. Phone Number

919.922.0251

2. Report Year

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

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

5. Treasurer Full Name

2023

01/01/2023

06/30/2023

John Walston

6. Type of Committee (Check One)

Candidate Campaign Party
 PAC Referendum
 Independent Joint Fundraiser
 Expenditure
 Legal Expense Fund

7. Type of Fund (if applicable, check one)

"Booster Fund"
 Building Fund
 Other:

8. Number of Fundraisers this Report

0

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

10. Special Report Name

11. Account Information

a. Financial Institution Full Name

First Bank

b. Purpose

All campaign expenses

c. Account Code

001

d. Period Begin Balance

\$ 0

11. Account Information

a. Financial Institution Full Name

RECEIVED
WCBOE

b. Purpose

AUG 03 2023

c. Account Code

BY

d. Period Begin Balance

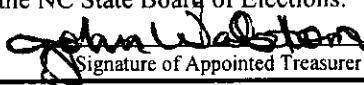
\$

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.

John Walston

Printed Name of Signer


Signature of Appointed Treasurer

08-03-23

Date

FOR OFFICE USE ONLY

Date Received: _____

Employee: _____

Delivery Method

Normal Mail
 Registered Mail
 Hand Delivered
 Electronically Filed
 Signer has not received mandatory training

Date Postmarked: _____

Employee: _____

Date Scanned: _____

Employee: _____

Date Data Entered: _____

Employee: _____

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Detailed Summary

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
Boyette For Council Campaign	Mid-Year	
Start of Election Cycle: January 1, 2023		
4) Cash on Hand at Start	\$ 0	\$ 0
RECEIPTS		
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 0	\$ 0
6) Contributions from Individuals (CRO-1210)	\$ 0	\$ 0
7) Contributions from Political Party Committees (CRO-1220)	\$ 0	\$ 0
8) Contributions from Other Political Committees (CRO-1230)	\$ 0	\$ 0
9) Loan Proceeds (CRO-1410)	\$ 500.00	\$ 500.00
10) Refunds/Reimbursements To the Committee (CRO-1240)	\$ 0	\$ 0
11) Other Receipt Sources		
11a) Interest on Bank Accounts (CRO-1250)	\$ 0	\$ 0
11b) Contributions from Not-for-Profit Organizations (CRO-1250)	\$ 0	\$ 0
11c) Outside Sources of Income (CRO-1250)	\$ 0	\$ 0
11d) Legal Expense Fund – Other Sources (CRO-1270)	\$ 0	\$ 0
11 e) Exempt Purchase Price Sales (CRO-1265)	\$ 0	\$ 0
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$ 500.00	\$ 500.00
EXPENDITURES		
13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$ 83.02	\$ 83.02
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$ 0	\$ 0
13c) Coordinated Party Expenditures (CRO-1310)	\$ 0	\$ 0
14) Aggregated Non-Media Expenditures (CRO-1315)	\$ 0	\$ 0
15) Loan Repayments (CRO-1420)	\$ 0	\$ 0
16) Refunds/Reimbursements From the Committee (CRO-1320)	\$ 0	\$ 0
17) In-Kind Contributions (CRO-1510)	\$ 0	\$ 0
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 83.02	\$ 83.02
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 416.98	\$ 416.98
ADDITIONAL INFORMATION		
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$ 0	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$ 500.00	
22) Debts and Obligations owed By the Committee (CRO-1610)	\$ 0	
23) Debts and Obligations owed To the Committee (CRO-1620)	\$ 0	
24) Account Transfers Within the Committee (CRO-1720)	\$ 0	
25) Administrative Support (CRO-1710)	\$ 0	\$ 0
26) Forgiven Loans (CRO-1440)	\$ 0	\$ 0
27) 48-Hour Notice Reports Sum (CRO-2220)	\$ 0	\$ 0
28) Contributions to be Refunded (CRO-1215)	\$ 0	\$ 0

Loan Proceeds

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

1. Committee Full Name (and Fund if applicable) Boyette for Council Campaign		2. ID Number																																																		
3. Lender Information		<input type="checkbox"/> Add	<input type="checkbox"/> Remove																																																	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Robert Christopher Boyette P O Box 986 Goldsboro, NC 27533 919.922.0251		b. Job Title/Profession Self Employed		d. Comments																																																
				e. Start Date (mm/dd/yyyy) 06/21/23																																																
				f. End Date (mm/dd/yyyy)																																																
g. Rate %	h. Security Pledged	i. Account Code 001	j. Form of Payment Check	k. Amount \$ 100.00																																																
l. Full Name of Lending Institution			m. Loan Number																																																	
4. Endorsers/Makers <i>(The people who guarantee the loan.)</i> <table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Job Title/Profession</td> <td>c. Employer's Name/Specific Field</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>d. Percentage %</td> <td>e. Amount \$</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Job Title/Profession</td> <td>c. Employer's Name/Specific Field</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>d. Percentage %</td> <td>e. Amount \$</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Job Title/Profession</td> <td>c. Employer's Name/Specific Field</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>d. Percentage %</td> <td>e. Amount \$</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Job Title/Profession</td> <td>c. Employer's Name/Specific Field</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>d. Percentage %</td> <td>e. Amount \$</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>					a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field					d. Percentage %	e. Amount \$				a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field					d. Percentage %	e. Amount \$				a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field					d. Percentage %	e. Amount \$				a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field					d. Percentage %	e. Amount \$			
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	d. Percentage %	e. Amount \$																																																		
5. Total of ALL CRO-1410 Pages (This line must be on line 9 of Detailed Summary Page CRO-1100)			\$ 500.00																																																	

Loan Proceeds

Pg

1

of

Amendment

2

□

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

1. Committee Full Name (and Fund if applicable) Boyette for Council Campaign		2. ID Number		
3. Lender Information		<input type="checkbox"/> Add	<input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Robert Christopher Boyette P O Box 986 Goldsboro, NC 27533 919.922.0251		b. Job Title/Profession Self Employed		d. Comments
				e. Start Date (mm/dd/yyyy) 06/28/23
				f. End Date (mm/dd/yyyy)
g. Rate %	h. Security Pledged	i. Account Code 001	j. Form of Payment Bank draft	k. Amount \$ 400.00
l. Full Name of Lending Institution			m. Loan Number	
4. Endorsers/Makers <i>(The people who guarantee the loan.)</i>				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	c. Employer's Name/Specific Field	
		d. Percentage %	e. Amount \$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	c. Employer's Name/Specific Field	
		d. Percentage %	e. Amount \$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	c. Employer's Name/Specific Field	
		d. Percentage %	e. Amount \$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	c. Employer's Name/Specific Field	
		d. Percentage %	e. Amount \$	
5. Total of ALL CRO-1410 Pages \$ 500.00				
<i>(This line must be on line 9 of Detailed Summary Page CRO-1100)</i>				



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:** Boyette for Council Campaign
- **Person or committee to make loan:** Chris Boyette
- **Date of loan to committee:** 06-21-23
- **Name of lending institution (source):**
- **Amount of loan:** \$100.00
- **Description (if in-kind loan):**
- **Names of all parties responsible for payment of loan (guarantors):**
None
- **Period of loan:** one year
- **Rate of interest of loan:** none
- **Security pledged for loan:** none

I, Chris Boyette, 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.

Chris Boyette
Signature of Lender

07/27/2023

Date Signed

07/27/2023

Date Signed

John Wadsworth
Signature of Treasurer of Committee

CRO-6100

Loan Proceeds Statement



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:** Boyette for Council Campaign
- **Person or committee to make loan:** Chris Boyette
- **Date of loan to committee:** 06-28-23
- **Name of lending institution (source):**
- **Amount of loan:** \$400.00
- **Description (if in-kind loan):**
- **Names of all parties responsible for payment of loan (guarantors):**
None
- **Period of loan:** one year
- **Rate of interest of loan:** none
- **Security pledged for loan:** none

I, Chris Boyette, 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.

R. Chris Boyette 07/27/2023
Signature of Lender Date Signed
Chris Walker 07/27/2023
Signature of Treasurer of Committee Date Signed
CRO-6100

Disbursements

Pg 1 of 1

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
Boyette for Council Campaign					
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Deluxe Business Systems c/o First Bank P O Box 986 Greensboro, NC 27404 (866) 792-4537			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal	<input type="checkbox"/> County:	
			<input type="checkbox"/> State	<input checked="" type="checkbox"/> Municipality:	e. Election Sum to Date
					\$ 83.02
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	draft	k	06/26/2023	\$83.02	check, printing
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Deluxe Business Systems c/o First Bank P O Box 986 Greensboro, NC 27404 (866) 792-4537			b. Coordinated Committee Name		d. Comments
			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
					\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Deluxe Business Systems c/o First Bank P O Box 986 Greensboro, NC 27404 (866) 792-4537			b. Coordinated Committee Name		d. Comments
			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
					\$
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					\$
6. Total of ALL CRO-1310 Pages					
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					\$
7. Purpose Codes (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)					