

# 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.

<b>1. Committee Information</b>			
<b>a. Full Name</b>		<b>c. ID Number</b>	
JAMIE TAYLOR FOR DISTRICT 3 COMMITTEE			
<b>b. Mailing Address (include City, State and Zip Code)</b>		<b>d. Date Filed</b>	
P.O. BOX 72 GOLDSBORO, NC 27533		09/27/2023	
		<b>e. Phone Number</b>	
		(919) 273-1908	
<b>2. Report Year</b>			
2023			
<b>3. Period Start Date (mm/dd/yy)</b>		<b>4. Period End Date (mm/dd/yy)</b>	
07/01/2023		09/26/2023	
<b>5. Treasurer Full Name</b>			
WILLIAM C PEARSON			
<b>6. Type of Committee (Check One)</b>		<b>9. Type of Report (check only one type of report from one category)</b>	
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund		<b>Municipal</b> <input type="checkbox"/> Organizational <input checked="" type="checkbox"/> Thirty-five day <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	
		<b>State/County</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <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	
<b>7. Type of Fund (if applicable, check one)</b>		<b>10. Special Report Name</b>	
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:			
<b>8. Number of Fundraisers this Report</b>			
0			
<b>3. Account Information</b>		<b>3. Account Information</b>	
<b>a. Financial Institution Full Name</b>		<b>a. Financial Institution Full Name</b>	
FIRST NATIONAL BANK			
<b>b. Purpose</b>	<b>c. Account Code</b>	<b>b. Purpose</b>	<b>c. Account Code</b>
CAMPAIGN	1		
	<b>d. Period Begin Balance</b>		<b>d. Period Begin Balance</b>
	\$ 265.53		\$
<b>CERTIFICATION</b>			
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			
<u>WILLIAM C PEARSON</u> Printed Name of Signer		<u>[Signature]</u> Signature of Appointed Treasurer	
		09/27/2023 Date	
<b>FOR OFFICE USE ONLY</b>			
Date Received:	<u>9/28/23</u>	Employee:	<u>RBH</u>
Date Postmarked:	_____	Employee:	_____
Date Scanned:	_____	Employee:	_____
Date Data Entered:	_____	Employee:	_____
<b>Delivery Method</b> <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training			
<b>Please Note:</b> 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>	
JAMIE TAYLOR FOR DISTRICT 3 COMMITTEE		2023 Thirty-five-day			
<b>Start of Election Cycle: January 1, 2023</b>		<b>Total this Reporting Period</b>		<b>Total this Election Cycle</b>	
4) Cash on Hand at Start		\$ 265.53		\$ 0.00	
<b>RECEIPTS</b>					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 0.00		\$ 0.00	
6) Contributions from Individuals (CRO-1210)		\$ 2,800.00		\$ 3,313.16	
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00		\$ 0.00	
8) Contributions from Other Political Committees (CRO-1230)		\$ 0.00		\$ 0.00	
9) Loan Proceeds (CRO-1410)		\$ 4,900.00		\$ 6,900.00	
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)		\$ 7,700.00		\$ 10,213.16	
<b>EXPENDITURES</b>					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 6,541.56		\$ 8,326.03	
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		\$ 450.00	
17) In-Kind Contributions (CRO-1510)		\$ 0.00		\$ 13.16	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 6,541.56		\$ 8,789.19	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 1,423.97		\$ 1,423.97	
<b>ADDITIONAL INFORMATION</b>					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0.00			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 6,900.00			
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	

# 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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
JAMIE TAYLOR FOR DISTRICT 3 COMMITTEE							
<b>3. Contributor 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>	
DONALD BEST BARNES II 619 PARK AVENUE GOLDSBORO, NC 27530				FOOD MANUFACTURER			
				<b>c. Employer's Name/Specific Field</b>			
				ALTA FOODS		<b>e. Election Sum to Date</b>	
						\$ 1,000.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	1	Check		09/15/2023	\$ 1,000.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor 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>	
MUNROE BEST JR 809 MILL ROAD GOLDSBORO, NC 27534				DEVELOPER			
				<b>c. Employer's Name/Specific Field</b>			
				M BEST & SONS, LCC		<b>e. Election Sum to Date</b>	
						\$ 500.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	1	Check		09/01/2023	\$ 500.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor 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>	
JUDITH MCMILLEN 201 N GEORGE ST GOLDSBORO, NC 27530				REALTOR			
				<b>c. Employer's Name/Specific Field</b>			
				BERKSHIRE HATHAWAY HOME SERVICES		<b>e. Election Sum to Date</b>	
						\$ 500.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	1	Check		07/17/2023	\$ 500.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$ 2,000.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 4 of Detailed Summary Page CRO-1100)						\$ 2,800.00	

# 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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>
JAMIE TAYLOR FOR DISTRICT 3 COMMITTEE						
<b>3. Contributor 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>	
NANCY NORWOOD 216 RIDGEWOOD DRIVE GOLDSBORO, NC 27534				RETIRED		
				<b>c. Employer's Name/Specific Field</b>		
				N/A	<b>e. Election Sum to Date</b>	
					\$ 250.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Check		07/24/2023	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor 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>	
DAVID M. PERRY 1906 E. WALNUT STREET GOLDSBORO, NC 27530				OWNER		
				<b>c. Employer's Name/Specific Field</b>		
				GOLDSBORO BUILDERS SUPPLY	<b>e. Election Sum to Date</b>	
					\$ 500.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Check		09/06/2023	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor 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>	
ALBERT VAN KLEEK 318 S LESLIE STREET GOLDSBORO, NC 27530				RETIRED		
				<b>c. Employer's Name/Specific Field</b>		
				N/A	<b>e. Election Sum to Date</b>	
					\$ 50.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Check		07/05/2023	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 800.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 2,800.00	

# Loan Proceeds

Pg 1 of 4

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>	
JAMIE TAYLOR FOR DISTRICT 3 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)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
JAMIE TAYLOR P.O. BOX 72 GOLDSBORO, NC 27533 (919) 273-1908		BAIL BONDSMAN / PRIVATE INVESTIGATOR		<b>e. Start Date (mm/dd/yyyy)</b>	
		<b>c. Employer's Name/Specific Field</b>		07/06/2023	
		SELF EMPLOYED		<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>	
%		1	Check	\$ 300.00	
<b>l. Full Name of Lending Institution</b>				<b>m. Loan Number</b>	
<b>4. Endorsers/Makers (The people who guarantee the loan)</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> (This line must be on line 5 of Detailed Summary Page CRO-1190)				\$ 4,900.00	

CRO-1410

NC State Board of Elections

April 2007

# Loan Proceeds

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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>	
JAMIE TAYLOR FOR DISTRICT 3 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)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
JAMIE TAYLOR P.O. BOX 72 GOLDSBORO, NC 27533 (919) 273-1908		BAIL BONDSMAN / PRIVATE INVESTIGATOR			
		<b>c. Employer's Name/Specific Field</b>		<b>e. Start Date (mm/dd/yyyy)</b>	
		SELF EMPLOYED		07/24/2023	
				<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>	
%		1	Check	\$ 2,000.00	
<b>l. Full Name of Lending Institution</b>				<b>m. Loan Number</b>	
<b>4. Endorsers/Makers (The people who guarantee the loan.)</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> (This line must be on line 9 of Detailed Summary Page CRO-1100)				\$ 4,900.00	

CRO-1410

NC State Board of Elections

April 2007

# Loan Proceeds

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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>	
JAMIE TAYLOR FOR DISTRICT 3 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)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
JAMIE TAYLOR P.O. BOX 72 GOLDSBORO, NC 27533 (919) 273-1908		BAIL BONDSMAN / PRIVATE INVESTIGATOR			
		<b>c. Employer's Name/Specific Field</b>		<b>e. Start Date (mm/dd/yyyy)</b>	
		SELF EMPLOYED		07/25/2023	
				<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>	
%		1	Check	\$ 600.00	
<b>l. Full Name of Lending Institution</b>				<b>m. Loan Number</b>	
<b>4. Endorsers/Makers (The people who guarantee the loan)</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> (This line must be on line 9 of Detailed Summary Page CRO-1100)				\$ 4,900.00	

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NC State Board of Elections

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# Loan Proceeds

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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>	
JAMIE TAYLOR FOR DISTRICT 3 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)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
JAMIE TAYLOR P.O. BOX 72 GOLDSBORO, NC 27533 (919) 273-1908		BAIL BONDSMAN / PRIVATE INVESTIGATOR			
		<b>c. Employer's Name/Specific Field</b>		<b>e. Start Date (mm/dd/yyyy)</b>	
		SELF EMPLOYED		07/26/2023	
				<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>	
%		1	Check	\$ 2,000.00	
<b>l. Full Name of Lending Institution</b>				<b>m. Loan Number</b>	
<b>4. Endorsers/Makers (The people who guarantee the loan.)</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> (This line must be on line 1 of Detailed Summary Page CRO-1100)				\$ 4,900.00	

CRO-1410

NC State Board of Elections

April 2007



# Disbursements

Amendment  
Pg 1 of 5 ☐ 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>	
JAMIE TAYLOR FOR DISTRICT 3 COMMITTEE							
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 form 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 type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  ACCU COPY 322 JOHN ST GOLDSBORO, NC 27530-3602				<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>	
						\$ 1,878.79	
<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>		
1	Debit Card	B	07/26/2023	\$ 272.21	15. PRINT MEDIA		
1	Debit Card	B	07/26/2023	\$ 587.12	15. PRINT MEDIA		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  ACCU COPY 322 JOHN ST GOLDSBORO, NC 27530-3602				<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>	
						\$ 1,878.79	
<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>		
1	Debit Card	B	07/31/2023	\$ 384.30	15. PRINT MEDIA		
				\$			
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  BAKER PIPE & PARTS P.O. BOX 1824 GOLDSBORO, NC 27533 (919) 736-2727				<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>	
						\$ 117.61	
<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>		
1	Debit Card	B	07/12/2023	\$ 46.51	15. PRINT MEDIA		
1	Debit Card	B	08/04/2023	\$ 71.10	15. PRINT MEDIA		
<b>5. Total only this Page</b>						\$ 1,361.24	
<b>6. Total of ALL CRO-1310 Pages</b>							
<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>						\$ 6,541.56	
<b>7. Purpose Codes</b> <i>(List detailed expenditure code in (k.) above)</i>							
<b>A* - Media</b>		<b>B* - Printing</b>		<b>C* - Fundraising</b>		<b>D - To Another Candidate</b>	
<b>E - Salaries</b>		<b>F* - Equipment</b>		<b>G - Political Party</b>		<b>H* - Holding Public Office Expenses</b>	
<b>I - Postage</b>		<b>J - Penalties</b>		<b>K* - Office Expenses</b>		<b>Q* - Donation to Legal Expense Fund</b>	
<b>O* Other</b>							
<b>* Codes require detailed explanation in required remarks field (k.)</b>							

# Disbursements

Amendment

Pg 2 of 5 ☐ 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>
JAMIE TAYLOR FOR DISTRICT 3 COMMITTEE						
<b>3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)</b>						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
<b>4. Payer 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. Coordinated Committee Name</b>	<b>d. Comments</b>	
CLIFTON BROADHURST 101 ROSEMARY CT DUDLEY, NC 28333						
				<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>	
					\$ 2,000.00	
<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>	
1	Check	O	07/24/2023	\$ 2,000.00	36. CONSULTANT-GOTV	
				\$		
<b>4. Payer 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. Coordinated Committee Name</b>	<b>d. Comments</b>	
DOLLAR GENERAL 301 N GEORGE STREET GOLDSBORO, NC 27530 (984) 207-6260						
				<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>	
					\$ 7.47	
<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>	
1	Debit Card	B	07/31/2023	\$ 7.47	15. PRINT MEDIA	
				\$		
<b>4. Payer 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. Coordinated Committee Name</b>	<b>d. Comments</b>	
HARBOR FREIGHT 105 N BERKLEY BLVD GOLDSBORO, NC 27534 (919) 750-0300						
				<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>	
					\$ 8.91	
<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>	
1	Debit Card	B	07/31/2023	\$ 8.91	15. PRINT MEDIA	
				\$		
<b>5. Total only this Page</b>					\$ 2,016.38	
<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) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)					\$ 6,541.56	
<b>7. Purpose Codes (List detailed expenditure code in (h.) above)</b>						
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

Amendment

Pg 3 of 5 ☐ 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>	
JAMIE TAYLOR FOR DISTRICT 3 COMMITTEE							
<b>3. Type of Disbursement (Please use separate CRO-1310 form for each type of Disbursement.)</b>							
<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 type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
LOWE'S HOME CENTERS, LLC 1202 N BERKLEY BLVD GOLDSBORO, NC 27534 (919) 778-9969							
				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	
						\$ 99.55	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Debit Card	A	07/30/2023	\$ 56.94	15. PRINT MEDIA		
1	Debit Card	B	09/25/2023	\$ 42.61	15. PRINT MEDIA		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
NADINE MCEACHERN 206 GERALD LN GOLDSBORO, NC 27530							
				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	
						\$ 2,000.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Check	O	07/26/2023	\$ 2,000.00	21.		
				\$	GOTV-DOOR-TO-DOOR		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
META PLATFORMS, INC. 1601 WILLOW RD MENLO PARK, CA 94025 (650) 543-4800							
				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	
						\$ 89.39	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Debit Card	A	07/10/2023	\$ 27.00	16. INTERNET ADS		
1	Debit Card	A	07/12/2023	\$ 27.00	16. INTERNET ADS		
<b>5. Total only this Page</b>						\$ 2,153.55	
<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) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						\$ 6,541.56	
<b>7. Purpose Codes (List detailed expenditure code in (h.) above)</b>							
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

Amendment  
Pg 4 of 5 ☐ 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>	
JAMIE TAYLOR FOR DISTRICT 3 COMMITTEE							
<b>3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)</b>							
<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 type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
META PLATFORMS, INC. 1601 WILLOW RD MENLO PARK, CA 94025 (650) 543-4800				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 89.39	
<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>		
1	Debit Card	A	09/06/2023	\$ 5.01	16. INTERNET ADS		
1	Debit Card	A	09/06/2023	\$ 9.70	16. INTERNET ADS		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
META PLATFORMS, INC. 1601 WILLOW RD MENLO PARK, CA 94025 (650) 543-4800				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 89.39	
<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>		
1	Debit Card	A	09/07/2023	\$ 20.68	16. INTERNET ADS		
				\$			
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
SUPER CHEAP SIGNS 9200 WATERFORD CENTRE BLVD. SUITE 100 AUSTIN, TX 78758				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 1,383.31	
<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>		
1	Debit Card	B	09/13/2023	\$ 696.00	15. PRINT MEDIA		
				\$			
<b>5. Total only this Page</b>						\$ 731.39	
<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)							
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						\$ 6,541.56	
<b>7. Purpose Codes (List detailed expenditure code in (h.) above)</b>							
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

Amendment  
Pg 5 of 5 ☐ 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>
JAMIE TAYLOR FOR DISTRICT 3 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 type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) UNITED STATES POST OFFICE 200 N WILLIAM STREET GOLDSBORO, NC 27530 (800) 275-8777				<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> \$ 153.00		
<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>	
1	Debit Card	I	09/26/2023	\$ 51.00		
1	Debit Card	I	09/26/2023	\$ 102.00		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) WAYNE COUNTY BOARD OF ELECTIONS 309 East Chestnut Street GOLDSBORO, NC 27530 (919) 731-1411				<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> \$ 90.00		
<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>	
1	Check	O	07/07/2023	\$ 90.00	25. FILING FEE	
				\$		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) WIX.COM LTD 40 NAMAL TEL AVIV				<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> \$ 198.00		
<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>	
1	Debit Card	A	07/10/2023	\$ 36.00	17. WEBSITE EXPENSE	
				\$		
<b>5. Total only this Page</b>					\$ 279.00	
<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) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)					\$ 6,541.56	
<b>7. Purpose Codes</b> <i>(List detailed expenditure code in (h.) above)</i>						
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.)						

# Outstanding Loans

Pg 1 of 2

Amendment  
☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)			2. ID Number	
JAMIE TAYLOR FOR DISTRICT 3 COMMITTEE				
3. Lender 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	
JAMIE TAYLOR P.O. BOX 72 GOLDSBORO, NC 27533 (919) 273-1908		BAIL BONDSMAN / PRIVATE INVESTIGATOR		
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)	
		SELF EMPLOYED	07/06/2023	
			f. End Date (mm/dd/yyyy)	
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance	
%		\$ 300.00	\$ 300.00	
k. Full Name of Lending Institution			l. Loan Number	
3. Lender 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	
JAMIE TAYLOR P.O. BOX 72 GOLDSBORO, NC 27533 (919) 273-1908		BAIL BONDSMAN / PRIVATE INVESTIGATOR		
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)	
		SELF EMPLOYED	07/24/2023	
			f. End Date (mm/dd/yyyy)	
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance	
%		\$ 2,000.00	\$ 2,000.00	
k. Full Name of Lending Institution			l. Loan Number	
3. Lender 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	
JAMIE TAYLOR P.O. BOX 72 GOLDSBORO, NC 27533 (919) 273-1908		BAIL BONDSMAN / PRIVATE INVESTIGATOR		
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)	
		SELF EMPLOYED	07/25/2023	
			f. End Date (mm/dd/yyyy)	
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance	
%		\$ 600.00	\$ 600.00	
k. Full Name of Lending Institution			l. Loan Number	
4. Total only this Page			\$ 2,900.00	
5. Total of ALL CRO-1430 Pages (This line must be on line 21 of Detailed Summary Page CRO-1100)			\$ 6,900.00	

# Outstanding Loans

Pg 2 of 2

Amendment  
☐ 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>
JAMIE TAYLOR FOR DISTRICT 3 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)	<b>b. Job Title/Profession</b>	<b>d. Comments</b>	
JAMIE TAYLOR P.O. BOX 72 GOLDSBORO, NC 27533 (919) 273-1908	BAIL BONDSMAN / PRIVATE INVESTIGATOR	<b>e. Start Date (mm/dd/yyyy)</b>	
	<b>c. Employer's Name/Specific Field</b>	07/26/2023	
	SELF EMPLOYED	<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>
%		\$ 2,000.00	\$ 2,000.00
<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>	
JAMIE TAYLOR P.O. BOX 72 GOLDSBORO, NC 27533	BAIL BONDSMAN / PRIVATE INVESTIGATOR	<b>e. Start Date (mm/dd/yyyy)</b>	
	<b>c. Employer's Name/Specific Field</b>	04/28/2023	
	SELF EMPLOYED	<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>
0.00%		\$ 1,000.00	\$ 1,000.00
<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>	
JAMIE TAYLOR P.O. BOX 72 GOLDSBORO, NC 27533	BAIL BONDSMAN / PRIVATE INVESTIGATOR	<b>e. Start Date (mm/dd/yyyy)</b>	
	<b>c. Employer's Name/Specific Field</b>	06/12/2023	
	SELF EMPLOYED	<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>
0.00%		\$ 1,000.00	\$ 1,000.00
<b>k. Full Name of Lending Institution</b>			<b>l. Loan Number</b>
<b>4. Total only this Page</b>			\$ 4,000.00
<b>5. Total of ALL CRO-1430 Pages</b> (This line must be on the 31 of Detailed Summary Page CRO-1100)			\$ 6,900.00





# 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: JAMIE TAYLOR FOR DISTRICT 3 COMMITTEE
- Person or committee to make loan: JAMIE TAYLOR
- Date of loan to committee: 07/06/2023
- Name of lending institution (source):  
N/A
- Amount of loan: \$300.00
- Description (if in-kind loan): \_\_\_\_\_
- Names of all parties responsible for payment of loan (guarantors):  
N/A
- Period of loan: N/A
- Rate of interest of loan: 0.0%
- Security pledged for loan: N/A

I, JAMIE TAYLOR, 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.

[Signature]  
Signature of Lender

07/06/2023

Date Signed

[Signature]  
Signature of Treasurer of Committee

07/06/2023

Date Signed





# NORTH CAROLINA

## STATE BOARD OF ELECTIONS

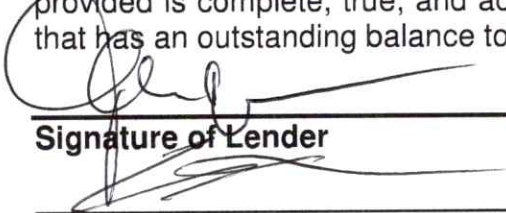
### Loan Proceeds Statement

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: JAMIE TAYLOR FOR DISTRICT 3 COMMITTEE
- Person or committee to make loan: JAMIE TAYLOR
- Date of loan to committee: 07/24/2023
- Name of lending institution (source):  
N/A
- Amount of loan: \$2000.00
- 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: 0.0%
- Security pledged for loan: N/A

I, JAMIE TAYLOR, 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.

  
Signature of Lender

07/24/2023

Date Signed

  
Signature of Treasurer of Committee

07/24/2023

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: JAMIE TAYLOR FOR DISTRICT 3 COMMITTEE
- Person or committee to make loan: JAMIE TAYLOR
- Date of loan to committee: 07/25/2023
- Name of lending institution (source):  
N/A
- Amount of loan: \$600.00
- 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: 0.0%
- Security pledged for loan: N/A

I, JAMIE TAYLOR, 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.

  
Signature of Lender

07/25/2023

Date Signed

  
Signature of Treasurer of Committee

07/25/2023

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:** JAMIE TAYLOR FOR DISTRICT 3 COMMITTEE
- **Person or committee to make loan:** JAMIE TAYLOR
- **Date of loan to committee:** 07/26/2023
- **Name of lending institution (source):**  
N/A
- **Amount of loan:** \$2000.00
- **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:** 0.0%
- **Security pledged for loan:** N/A

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

  
Signature of Lender

07/26/2023

Date Signed

  
Signature of Treasurer of Committee

07/26/2023

Date Signed