

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 <i>DANNY Keel For Mt. Olive Commissioner At-Large</i>		c. ID Number 	
b. Mailing Address (include City, State and Zip Code) <i>109 Cook Lane Mt. Olive N.C 28365</i>		d. Date Filed <i>10-24-23</i>	
		e. Phone Number <i>919-223-1499</i>	
2. Report Year <i>2023</i>	3. Period Start Date (mm/dd/yy) <i>9-27-23</i>	4. Period End Date (mm/dd/yy) <i>10-23-23</i>	5. Treasurer Full Name <i>DANNY Earl Keel</i>
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"/> Municipal <input checked="" type="checkbox"/> Organizational <input 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	
7. Type of Fund (If applicable, check one)		<input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser	
<input type="checkbox"/> Booster Fund <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:		<input type="checkbox"/> State/County <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	
8. Number of Fundraisers this Report		10. Special Report Name <i>RECEIVED WDBQE OCT 25 2023 BY</i>	
11. Account Information			
a. Financial Institution Full Name		b. Purpose c. Account Code d. Period Begin Balance <i>\$</i>	
a. Financial Institution Full Name <i>RECEIVED WDBQE</i>		b. Purpose c. Account Code d. Period Begin Balance <i>\$</i>	
CERTIFICATION <p>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.</p>			
<i>DANNY Keel</i> <small>Printed Name of Signer</small>		<i>Danny Keel</i> <small>Signature of Appointed Treasurer</small>	
<small>Date</small>			
FOR OFFICE USE ONLY			
Date Received: _____	Employee: _____	Delivery Method	
Date Postmarked: _____	Employee: _____	<input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed	
Date Scanned: _____	Employee: _____	<input type="checkbox"/> Signer has not received mandatory training	
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	
DANNY Keel for Mt. Olive Commissioner At-Large	CAMPAGN Finance		
Start of Election Cycle: January 1, _____	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start	\$ 0	\$ 0	
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ _____	
6) Contributions from Individuals	(CRO-1210)	\$ 0	\$ 1362.59
7) Contributions from Political Party Committees	(CRO-1220)	\$ _____	\$ _____
8) Contributions from Other Political Committees	(CRO-1230)	\$ _____	\$ _____
9) Loan Proceeds	(CRO-1410)	\$ _____	\$ _____
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)	\$ 0	\$ 1362.59	
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ _____	\$ _____
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)	\$ 0	\$ 1362.59
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 0	\$ 0	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 0	\$ 0	
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ _____	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ _____	
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)	\$ _____	