

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 ELET STEVE TAYLOR DISTRICT 6 GOLDSBORO GT/LOCAL		c. ID Number	
b. Mailing Address (include City, State and Zip Code) P.O. Box 10305 GOLDSBORO NC 27534		d. Date Filed 10/30/2023	
e. Phone Number			
2. Report Year 2023	3. Period Start Date (mm/dd/yy) 09/27/2023	4. Period End Date (mm/dd/yy) 10/23/2023	5. Treasurer Full Name STEVEN DWIGHT TAYLOR
6. Type of Committee (Check One) <input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> Legal Expense Fund		9. Type of Report (check only one type of report from one category) Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input checked="" 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 State/County <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 Referendum <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <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) <input type="checkbox"/> Booster Fund <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:		10. Special Report Name	
8. Number of Fundraisers this Report			
11. Account Information		11. Account Information	
a. Financial Institution Full Name SOUTHERN BANK		a. Financial Institution Full Name RECEIVED WCBOE	
b. Purpose GENERAL OPERATING ACCOUNT	c. Account Code 7083	b. Purpose OCT 30 2023	c. Account Code
d. Period Begin Balance \$ 1895.14		d. Period Begin Balance 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.			
STEVEN D. TAYLOR Printed Name of Signer		Steven D. Taylor Signature of Appointed Treasurer	
		10/30/2023 Date	
FOR OFFICE USE ONLY			
Date Received: 10/30/23	Employee: AC	Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed	
Date Postmarked:	Employee:	<input type="checkbox"/> Signer has not received mandatory training	
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

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	
ELECT STEVE TAYLOR DISTRICT 6 (6th)		PRE-ELECTION			
Start of Election Cycle: January 1, 2023		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 1895.14		\$ 0.00	
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 50.00	\$ 100.00		
6) Contributions from Individuals	(CRO-1210)	\$ 1400.00	\$ 6550.00		
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)	\$ -0-	\$ -0-		
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-		
11e) 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)		\$ 1450.00	\$ 6650.00		
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$ 2695.47	\$ 6000.33		
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)		\$ 2695.47	\$ 6000.33		
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 649.67	\$ 649.67		
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ -0-			
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ -0-			
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-		

Contributions from Individuals

Pg 1 of 2

Amendment
☒ Yes ☐ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

Contributor Information					
ELECT STEVE TAYLOR DISTRICT 6 Goldsboro City (am: 1)					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
STEVEN D. TAYLOR, JR. 241 Hardingwood DRIVE Goldsboro NC 27534		Attorney State of North Carolina		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
<input type="checkbox"/>	7083	CHECK		10/02/2023	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
Contributor Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Natalie A. Taylor 3724 KENZIE COURT Morehead City NC 28557		Pharmacist CVS Pharmacy		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
<input type="checkbox"/>	7083	CHECK		10/07/2023	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
Contributor Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
J. Marshall Smith PO Box 1057 Goldsboro NC 27530		No Job Title or Profession Not Employed		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
<input type="checkbox"/>	7083	CHECK		10/08/2023	\$ 300.00
<input type="checkbox"/>	7083	CHECK		10/16/2023	\$ 200.00
<input type="checkbox"/>					\$
Total on this Page					\$ 1000.00
Total on all CRO 1205 Pages					\$ 1000.00

Contributions from Individuals

Pg 2 of 2

Amendment
☒ Yes ☐ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

Contributor Information						Total	
Elect Steve Taylor District 6 Goldsboro City Council							
a. Full Name, Mailing Address & Phone (include city, state, & zip) Danny Hood 604 W. Berkeley Blvd. Goldsboro NC 27534			b. Job Title/Profession Realtor		d. Comments		
			c. Employer's Name/Specific Field Danny Hood Realty, LLC				
					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		
<input type="checkbox"/>	7083	CHECK		10/19/2023	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
Steven D. Taylor							
a. Full Name, Mailing Address & Phone (include city, state, & zip) STEVEN D. TAYLOR 241 Hardingwood Drive Goldsboro NC 27534			b. Job Title/Profession No Job Title or Profession		d. Comments		
			c. Employer's Name/Specific Field Not Employed				
					e. Election Sum to Date \$ 300.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	7083	CHECK		10/20/2023	\$ 300.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
Contributor Information							
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments		
			c. Employer's Name/Specific Field				
					e. Election Sum to Date \$		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
For Only this Page					\$ 400.00		
For All CRO 1210 Pages					\$ 1400.00		

Aggregated Contributions from Individuals

Page 1 of 1

Amendment

☒ Yes☐ No

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

[illegible]

Disbursements

Pg 1 of 2

Amendment
☒ Yes ☐ No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

Committee Full Name and Mailing Address (include city, state, & zip)						Committee Number	
ELECT STEVE TAYLOR DISTRICT 6 Goldsboro City (ame:1)							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments		
Clifton Broadhurst 101 Rosemary Court Dudley NC 28333							
			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:				
					\$ 1500.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
7083	CHEQUE		10/02/2023	\$ 1500.00	CONSULTANT FOR GET OUT THE VOTE		
				\$			
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments		
United States Postal Service 3100 Cashwell Drive Goldsboro NC 27534							
			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:				
					\$ 714.78		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
7083	DEBIT CARD		10/12/2023	\$714.78	Campaign Mailer Postcards		
				\$			
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments		
Carolyn Ellis 243 Barris Chapel Road La Grange NC 28551							
			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:				
					\$ 80.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
7083	CHEQUE		10/19/2023	\$ 80.00	Bill W/Car		
				\$			
Total Operating Expenses					\$ 2294.78		
Total Contributions to Candidates/Political Committees							
Total Coordinated Party Expenditures							
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)					\$ 2294.78		
(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)							
Codes require detailed explanation in required remarks field (k) 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							

Disbursements

Pg 2 of 2

Amendment

☒ Yes ☐ No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

ELECT STEVE TAYLOR DISTRICT 6 Goldsboro City Council

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Cynthia Robinson 508 King Drive 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	
						\$ 62.50	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
7083	CHECK		10/19/2023	\$ 62.50	POL W/16		
				\$			

a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACCU COPY 222 N. John Street 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	
						\$ 248.19	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
7083	DEBIT CARD		10/19/2023	\$ 248.19	Political Goods		
				\$			

a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Wayne County Board of Elections 309 East Chestnut Street 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	
						\$ 90.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
7083	CHECK		07/14/2023	\$ 90.00	Filing Fee		
				\$			

Total of all disbursements reported on this page						\$ 400.69
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)						\$ 2695.47
(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)						

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