

# 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

ELECT STEVE TAYLOR DISTRICT 6 GOLDSBORO CITY/ANNUAL

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 | 3. Period Start Date (mm/dd/yy) | 4. Period End Date (mm/dd/yy) | 5. Treasurer Full Name |
|----------------|---------------------------------|-------------------------------|------------------------|
| 2023           | 09/27/2023                      | 10/23/2023                    | STEVEN DWIGHT TAYLOR   |

## 6. Type of Committee (Check One)

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

## 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

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

- Booster Fund  
 Building Fund  
 Other:

## 8. Number of Fundraisers this Report

## 10. Special Report Name

## 11. Account Information

a. Financial Institution Full Name

SOUTHERN BANK

## 11. Account Information

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

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



Signature of Appointed Treasurer

10/30/2023

Date

## FOR OFFICE USE ONLY

Date Received:

10/30/23

Employee:

AC

### Delivery Method

- Normal Mail  
 Registered Mail  
 Hand Delivered  
 Electronically Filed

Date Postmarked:

\_\_\_\_\_

Employee:

\_\_\_\_\_

Date Scanned:

\_\_\_\_\_

Employee:

\_\_\_\_\_

Date Data Entered:

\_\_\_\_\_

Employee:

\_\_\_\_\_

- 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

Use this form to summarize all disclosure reporting forms and to total monetary information

Amendment  
 Yes  No

|  |                             |                           |            |
|--|-----------------------------|---------------------------|------------|
| 1. Committee Full Name (and Fund if applicable)                              | 2. Type of Report           | 3. ID Number              |            |
| <b>ELECT STEVE TAYLOR DISTRICT 6 (C-7)</b>                                   |                             | 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                   |            |
| <b>RECEIPTS</b>  |                             |                           |            |
| 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 |
| <b>EXPENDITURES</b>  |                             |                           |            |
| 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  |
| <b>ADDITIONAL INFORMATION</b>  |                             |                           |            |
| 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  Yes  No

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

ELECT STEVE TAYLOR DISTRICT 6 Goldsboro City (cont.)

|   |                 |                                   |                         |                      |           |
|---|-----------------|-----------------------------------|-------------------------|----------------------|-----------|
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip) |                 | b. Job Title/Profession           | d. Comments             |                      |           |
| STEVEN D. TAYLOR, JR.<br>241 Hardinwood DRIVE<br>Goldsboro NC 27554   |                 | Attorney                          |                         |                      |           |
|   |                 | c. Employer's Name/Specific Field |                         |                      |           |
|   |                 | State Of<br>NC (cont.)            | 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                             |                         | 10/02/2003           | \$ 250.00 |
| <input type="checkbox"/>  |                 |                                   |                         |                      | \$        |
| <input type="checkbox"/>  |                 |                                   |                         |                      | \$        |

|   |                 |                                   |                         |                      |           |
|---|-----------------|-----------------------------------|-------------------------|----------------------|-----------|
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip) |                 | b. Job Title/Profession           | d. Comments             |                      |           |
| Natalie A. Taylor<br>3724 KENZIE COURT<br>Morehead City NC 28557      |                 | Pharmacist                        |                         |                      |           |
|   |                 | c. Employer's Name/Specific Field |                         |                      |           |
|   |                 | 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                             |                         | 10/07/2003           | \$ 250.00 |
| <input type="checkbox"/>  |                 |                                   |                         |                      | \$        |
| <input type="checkbox"/>  |                 |                                   |                         |                      | \$        |

|   |                 |                                   |                         |                      |           |
|---|-----------------|-----------------------------------|-------------------------|----------------------|-----------|
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip) |                 | b. Job Title/Profession           | d. Comments             |                      |           |
| J. Marshall Smith<br>PO Box 1057<br>Goldsboro NC 27530                |                 | No Job Title OR<br>Position       |                         |                      |           |
|   |                 | c. Employer's Name/Specific Field |                         |                      |           |
|   |                 | 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                             |                         | 10/08/2003           | \$ 300.00 |
| <input type="checkbox"/>  | 7083            | CHECK                             |                         | 10/16/2003           | \$ 200.00 |
| <input type="checkbox"/>  |                 |                                   |                         |                      | \$        |
|   |                 |                                   | \$ 1000.00              |                      |           |
|   |                 |                                   | \$ 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

|   |                 |                    |   |   |           |
|---|-----------------|--------------------|---|---|-----------|
| <p><i>Elect Steve Taylor District 6 Goldsboro City Council</i></p>                    |                 |                    |   |   |           |
| <p>a. Full Name, Mailing Address &amp; Phone<br/>(include city, state, &amp; zip)</p> |                 |                    | <p>b. Job Title/Profession</p> <p><i>REACTOR</i></p>                              | <p>d. Comments</p>                              |           |
| <p><i>Danny Hood<br/>604 N. Berkeley Blvd.<br/>Goldsboro NC 27534</i></p>             |                 |                    | <p>c. Employer's Name/Specific Field</p> <p><i>Danny Hood<br/>Realty, LLC</i></p> | <p>e. Election Sum to Date</p> <p>\$ 100.00</p> |           |
| 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"/>  |                 |                    |   |   | \$        |
| <p>a. Full Name, Mailing Address &amp; Phone<br/>(include city, state, &amp; zip)</p> |                 |                    | <p>b. Job Title/Profession</p> <p><i>No Job Title OR<br/>Profession</i></p>       | <p>d. Comments</p>                              |           |
| <p><i>STEVEN D. TAYLOR<br/>241 Hardingwood DRIVE<br/>Goldsboro NC 27534</i></p>       |                 |                    | <p>c. Employer's Name/Specific Field</p> <p><i>Not EMPLOYED</i></p>               | <p>e. Election Sum to Date</p> <p>\$ 300.00</p> |           |
| 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"/>  |                 |                    |   |   | \$        |
| <p>Additional Information</p>   |                 |                    |   |   |           |
| <p>a. Full Name, Mailing Address &amp; Phone<br/>(include city, state, &amp; zip)</p> |                 |                    | <p>b. Job Title/Profession</p>  | <p>d. Comments</p>                              |           |
|   |                 |                    |   |   |           |
|   |                 |                    |   |   |           |
|   |                 |                    |   |   |           |
|   |                 |                    |   |   |           |
| <p>e. Election Sum to Date</p> <p>\$</p>  |                 |                    |   |   |           |
| 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"/>  |                 |                    |   |   | \$        |
| <p>Total for this Page</p> <p>\$ 400.00</p>   |                 |                    |   |   |           |
| <p>Amendment CRO-1210 Page 2</p> <p>\$ 1400.00</p>                                    |                 |                    |   |   |           |

## Aggregated Contributions from Individuals

Page 1 of 1

**Amendment**

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

ELECT STEVE TAYLOR DISTRICT 6 Goldsboro City (cont.)

**4. Total only this Page**

\$ 50.00

5. Total of ALL CRO-1205 Pages

\$ 50.00

(This line must be on line 5 of Detailed Summary Page CRO-1100)

# Disbursements

Pg 1 of 2  Yes  No

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

| <p><b>ELECT STEVE TAYLOR DISTRICT 6 Goldsboro City (am:1)</b></p>   |                    |                      |                                      |            |   |                 |                    |                  |                          |              |                     |                     |                                     |             |               |                      |                                     |          |  |  |  |    |  |
|---|--------------------|----------------------|--------------------------------------|------------|---|-----------------|--------------------|------------------|--------------------------|--------------|---------------------|---------------------|-------------------------------------|-------------|---------------|----------------------|-------------------------------------|----------|--|--|--|----|--|
| <input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures  |                    |                      |                                      |            |   |                 |                    |                  |                          |              |                     |                     |                                     |             |               |                      |                                     |          |  |  |  |    |  |
| <p>a. Full Name, Mailing Address &amp; Phone<br/>(include city, state, &amp; zip)</p> <p>Clifton Broadhurst<br/>101 Rosemary Court<br/>Dudley NC 28333</p>  |                    |                      | <p>b. Coordinated Committee Name</p> |            | <p>c. Level Registered (Specify)</p> <p><input type="checkbox"/> Federal <input type="checkbox"/> County:<br/><input type="checkbox"/> State <input type="checkbox"/> Municipality:</p> |                 |                    |                  |                          |              |                     |                     |                                     |             |               |                      |                                     |          |  |  |  |    |  |
|   |                    |                      |                                      |            | <p>e. Election Sum to Date</p>  |                 |                    |                  |                          |              |                     |                     |                                     |             |               |                      |                                     |          |  |  |  |    |  |
|   |                    |                      |                                      |            | <p>\$ 1500.00</p>   |                 |                    |                  |                          |              |                     |                     |                                     |             |               |                      |                                     |          |  |  |  |    |  |
| <table border="1"> <thead> <tr> <th>f. Account Code</th> <th>g. Form of Payment</th> <th>h. Purpose Code</th> <th>i. Date (mm/dd/yyyy)</th> <th>j. Amount</th> <th>k. Required Remarks</th> </tr> </thead> <tbody> <tr> <td>7083</td> <td>CHE4L</td> <td></td> <td>10/02/2023</td> <td>\$ 1500.00</td> <td>CONSULTANT FOR 6ET<br/>OUT THE VOTE</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>\$</td> <td></td> </tr> </tbody> </table>  |                    |                      |                                      |            |   | f. Account Code | g. Form of Payment | h. Purpose Code  | i. Date (mm/dd/yyyy)     | j. Amount    | k. Required Remarks | 7083                | CHE4L                               |             | 10/02/2023    | \$ 1500.00           | CONSULTANT FOR 6ET<br>OUT THE VOTE  |          |  |  |  | \$ |  |
| f. Account Code   | g. Form of Payment | h. Purpose Code      | i. Date (mm/dd/yyyy)                 | j. Amount  | k. Required Remarks   |                 |                    |                  |                          |              |                     |                     |                                     |             |               |                      |                                     |          |  |  |  |    |  |
| 7083  | CHE4L              |                      | 10/02/2023                           | \$ 1500.00 | CONSULTANT FOR 6ET<br>OUT THE VOTE  |                 |                    |                  |                          |              |                     |                     |                                     |             |               |                      |                                     |          |  |  |  |    |  |
|   |                    |                      |                                      | \$         |   |                 |                    |                  |                          |              |                     |                     |                                     |             |               |                      |                                     |          |  |  |  |    |  |
| <p>a. Full Name, Mailing Address &amp; Phone<br/>(include city, state, &amp; zip)</p> <p>United States Postal Service<br/>3100 Cashwell Drive<br/>Goldsboro NC 27534</p>  |                    |                      | <p>b. Coordinated Committee Name</p> |            | <p>c. Level Registered (Specify)</p> <p><input type="checkbox"/> Federal <input type="checkbox"/> County:<br/><input type="checkbox"/> State <input type="checkbox"/> Municipality:</p> |                 |                    |                  |                          |              |                     |                     |                                     |             |               |                      |                                     |          |  |  |  |    |  |
|   |                    |                      |                                      |            | <p>e. Election Sum to Date</p>  |                 |                    |                  |                          |              |                     |                     |                                     |             |               |                      |                                     |          |  |  |  |    |  |
|   |                    |                      |                                      |            | <p>\$ 714.78</p>  |                 |                    |                  |                          |              |                     |                     |                                     |             |               |                      |                                     |          |  |  |  |    |  |
| <table border="1"> <thead> <tr> <th>f. Account Code</th> <th>g. Form of Payment</th> <th>h. Purpose Code</th> <th>i. Date (mm/dd/yyyy)</th> <th>j. Amount</th> <th>k. Required Remarks</th> </tr> </thead> <tbody> <tr> <td>7083</td> <td>DEBIT (ARD)</td> <td></td> <td>10/12/2023</td> <td>\$ 714.78</td> <td>Campaign Mailer<br/>Postcards</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>\$</td> <td></td> </tr> </tbody> </table>   |                    |                      |                                      |            |   | f. Account Code | g. Form of Payment | h. Purpose Code  | i. Date (mm/dd/yyyy)     | j. Amount    | k. Required Remarks | 7083                | DEBIT (ARD)                         |             | 10/12/2023    | \$ 714.78            | Campaign Mailer<br>Postcards        |          |  |  |  | \$ |  |
| f. Account Code   | g. Form of Payment | h. Purpose Code      | i. Date (mm/dd/yyyy)                 | j. Amount  | k. Required Remarks   |                 |                    |                  |                          |              |                     |                     |                                     |             |               |                      |                                     |          |  |  |  |    |  |
| 7083  | DEBIT (ARD)        |                      | 10/12/2023                           | \$ 714.78  | Campaign Mailer<br>Postcards  |                 |                    |                  |                          |              |                     |                     |                                     |             |               |                      |                                     |          |  |  |  |    |  |
|   |                    |                      |                                      | \$         |   |                 |                    |                  |                          |              |                     |                     |                                     |             |               |                      |                                     |          |  |  |  |    |  |
| <p>a. Full Name, Mailing Address &amp; Phone<br/>(include city, state, &amp; zip)</p> <p>Carolyn Ellis<br/>243 Garris Chapel Road<br/>La Grange NC 28551</p>  |                    |                      | <p>b. Coordinated Committee Name</p> |            | <p>c. Level Registered (Specify)</p> <p><input type="checkbox"/> Federal <input type="checkbox"/> County:<br/><input type="checkbox"/> State <input type="checkbox"/> Municipality:</p> |                 |                    |                  |                          |              |                     |                     |                                     |             |               |                      |                                     |          |  |  |  |    |  |
|   |                    |                      |                                      |            | <p>e. Election Sum to Date</p>  |                 |                    |                  |                          |              |                     |                     |                                     |             |               |                      |                                     |          |  |  |  |    |  |
|   |                    |                      |                                      |            | <p>\$ 80.00</p>   |                 |                    |                  |                          |              |                     |                     |                                     |             |               |                      |                                     |          |  |  |  |    |  |
| <table border="1"> <thead> <tr> <th>f. Account Code</th> <th>g. Form of Payment</th> <th>h. Purpose Code</th> <th>i. Date (mm/dd/yyyy)</th> <th>j. Amount</th> <th>k. Required Remarks</th> </tr> </thead> <tbody> <tr> <td>7083</td> <td>CHE4L</td> <td></td> <td>10/19/2023</td> <td>\$ 80.00</td> <td>Poll Worker</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>\$</td> <td></td> </tr> </tbody> </table>  |                    |                      |                                      |            |   | f. Account Code | g. Form of Payment | h. Purpose Code  | i. Date (mm/dd/yyyy)     | j. Amount    | k. Required Remarks | 7083                | CHE4L                               |             | 10/19/2023    | \$ 80.00             | Poll Worker                         |          |  |  |  | \$ |  |
| f. Account Code   | g. Form of Payment | h. Purpose Code      | i. Date (mm/dd/yyyy)                 | j. Amount  | k. Required Remarks   |                 |                    |                  |                          |              |                     |                     |                                     |             |               |                      |                                     |          |  |  |  |    |  |
| 7083  | CHE4L              |                      | 10/19/2023                           | \$ 80.00   | Poll Worker   |                 |                    |                  |                          |              |                     |                     |                                     |             |               |                      |                                     |          |  |  |  |    |  |
|   |                    |                      |                                      | \$         |   |                 |                    |                  |                          |              |                     |                     |                                     |             |               |                      |                                     |          |  |  |  |    |  |
| <p>\$ 2294.78</p>   |                    |                      |                                      |            |   |                 |                    |                  |                          |              |                     |                     |                                     |             |               |                      |                                     |          |  |  |  |    |  |
| <p>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</p>   |                    |                      |                                      |            |   |                 |                    |                  |                          |              |                     |                     |                                     |             |               |                      |                                     |          |  |  |  |    |  |
| <p>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</p>   |                    |                      |                                      |            |   |                 |                    |                  |                          |              |                     |                     |                                     |             |               |                      |                                     |          |  |  |  |    |  |
| <p>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</p>   |                    |                      |                                      |            |   |                 |                    |                  |                          |              |                     |                     |                                     |             |               |                      |                                     |          |  |  |  |    |  |
| <p><b>Category Codes</b></p> <table> <tr> <td>A* - Media</td> <td>B* - Printing</td> <td>C* - Fundraising</td> <td>D - To Another Candidate</td> </tr> <tr> <td>E - Salaries</td> <td>F* - Equipment</td> <td>G - Political Party</td> <td>H* - Holding Public Office Expenses</td> </tr> <tr> <td>I - Postage</td> <td>J - Penalties</td> <td>K* - Office Expenses</td> <td>Q* - Donation to Legal Expense Fund</td> </tr> <tr> <td>O* Other</td> <td></td> <td></td> <td></td> </tr> </table> |                    |                      |                                      |            |   | 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 |  |  |  |    |  |
| 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  |                    |                      |                                      |            |   |                 |                    |                  |                          |              |                     |                     |                                     |             |               |                      |                                     |          |  |  |  |    |  |
| <p>* - Codes require detailed explanation in comments on CRO-1100</p>   |                    |                      |                                      |            |   |                 |                    |                  |                          |              |                     |                     |                                     |             |               |                      |                                     |          |  |  |  |    |  |

## 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 TAYOR DETRINT 6 Goldsboro City Council*

Operating Expenses  Contributions to Candidates/Political Committees  Coordinated Party Expenditures

|   |                               |             |
|---|-------------------------------|-------------|
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip) | b. Coordinated Committee Name | d. Comments |
|---|-------------------------------|-------------|

*Lynthia 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. Work*

|   |                               |             |
|---|-------------------------------|-------------|
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip) | b. Coordinated Committee Name | d. Comments |
|---|-------------------------------|-------------|

*ACCU (copy)  
222 N. Main 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 Pol. travel cards*

|   |                               |             |
|---|-------------------------------|-------------|
| a. Full Name, Mailing Address & Phone<br>(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*

*\$ 400.69*

(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)

*\$ 2695.47*

|              |                |                      |                                     |
|--------------|----------------|----------------------|-------------------------------------|
| 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     |                |                      |                                     |

[www.ncsbe.gov](http://www.ncsbe.gov) for detailed explanation of categories and items