

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			c. ID Number	
ZACH LILLY FOR GOLDSBORO				
b. Mailing Address (include City, State and Zip Code)			d. Date Filed	
PO BOX 291 GOLDSBORO, NC 27533			10/25/2023	
			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	08/29/2023	09/25/2023	ZACHARY LILLY	
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"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund		Municipal State/County Referendum <input type="checkbox"/> Organizational <input type="checkbox"/> Organizational <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Quarterly <input type="checkbox"/> Pre-referendum <input checked="" type="checkbox"/> Pre-primary <input type="checkbox"/> First <input type="checkbox"/> Final <input type="checkbox"/> Pre-election <input type="checkbox"/> Second <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Third <input type="checkbox"/> Annual <input type="checkbox"/> Semi-annual <input type="checkbox"/> Fourth <input type="checkbox"/> Special <input type="checkbox"/> Mid Year <input type="checkbox"/> Semi-annual <input type="checkbox"/> Year End <input type="checkbox"/> Mid Year <input type="checkbox"/> Final <input type="checkbox"/> Year End <input type="checkbox"/> Special <input type="checkbox"/> Final <input type="checkbox"/> <input type="checkbox"/> Special		
7. Type of Fund (if applicable, check one)		10. Special Report Name		
<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:				
8. Number of Fundraisers this Report				
0				
3. Account Information		3. Account Information		
a. Financial Institution Full Name		a. Financial Institution Full Name		
TRUIST		<div style="text-align: center;"> RECEIVED WCBOE NOV 06 2023 BY </div>		
b. Purpose	c. Account Code	b. Purpose	c. Account Code	
ORGANIZATION	1			
	d. Period Begin Balance		d. Period Begin Balance	
	\$		\$	
CERTIFICATION				
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board				
<u>Zachary E. Lilly</u> Printed Name of Signer		<u>Zachary E. Lilly</u> Signature of Appointed Treasurer		<u>10/25/2023</u> Date
FOR OFFICE USE ONLY				
Date Received:	<u>11/6/23</u>	Employee:	<u>AC</u>	
Date Postmarked:	_____	Employee:	_____	
Date Scanned:	_____	Employee:	_____	
Date Data Entered:	_____	Employee:	_____	
		Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> 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

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	
ZACH LILLY FOR GOLDSBORO		2023 Pre-Primary			
Start of Election Cycle: January 1, 2023		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 0.00		\$ 0.00	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 0.00		\$ 0.00	
6) Contributions from Individuals (CRO-1210)		\$ 0.00		\$ 0.00	
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00		\$ 0.00	
8) Contributions from Other Political Committees (CRO-1230)		\$ 2,000.00		\$ 2,000.00	
9) Loan Proceeds (CRO-1410)		\$ 0.00		\$ 114.00	
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)		\$ 2,000.00		\$ 2,114.00	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 1,021.26		\$ 1,135.26	
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)		\$ 55.26		\$ 55.26	
15) Loan Repayments (CRO-1420)		\$ 114.00		\$ 114.00	
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$ 0.00		\$ 0.00	
17) In-Kind Contributions (CRO-1510)		\$ 0.00		\$ 0.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 1,190.52		\$ 1,304.52	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 809.48		\$ 809.48	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0.00			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 0.00			
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 Other Political Committees

Pg 1 of 1

Amendment

☐ Yes ☒ No

Use this form to report contributions from other candidate, referendum or PAC committees

1. Committee Full Name (and Fund if applicable)			2. ID Number	
ZACH LILLY FOR GOLDSBORO				
3. Contributor Information			<input type="checkbox"/> Add <input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee		d. Comments
NC REALTORS PAC NC		<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC		
		<input type="checkbox"/> Referendum		
		c. Level Registered (Specify)		
		<input type="checkbox"/> Federal <input type="checkbox"/> County:		e. Election Sum to Date
		<input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		
				\$ 2,000.00
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
1	Check		09/06/2023	\$ 2,000.00
				\$
				\$
4. Total only this Page				\$ 2,000.00
5. Total of ALL CRO-1230 Pages (This line must be on line 8 of Detailed Summary Page CRO-1100)				\$ 2,000.00

CRO-1230

NC State Board of Elections

April 2007

Disbursements

Amendment
Pg 1 of 1 ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
ZACH LILLY FOR GOLDSBORO							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) CrazyCheapPoliticalSigns NC				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify)			
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				e. Election Sum to Date			
						\$ 796.57	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Electric Funds Tran	B	09/11/2023	\$ 796.57	YARD SIGNS		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) DOLLAR GENERAL NC				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify)			
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				e. Election Sum to Date			
						\$ 150.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Electric Funds Tran	FK	09/15/2023	\$ 150.00	OFFICE SUPPLIES		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) TARGET NC				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify)			
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				e. Election Sum to Date			
						\$ 74.69	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Debit Card	O	09/25/2023	\$ 74.69	OFFICE SUPPLIES		
				\$			
5. Total only this Page						\$ 1,021.26	
6. Total of ALL CRO-1310 Pages							
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>						\$ 1,021.26	
7. Purpose Codes (List detailed expenditure code in (h.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							

Aggregated Non-Media ExpendituresPage 1 of 1**Amendment**☐ Yes ☒ No

Optional form used to report NC Non-Media Expenditures of \$50 or less.

1. Candidate Full Name (and Firm if applicable) ZACH LILLY FOR GOLDSBORO					2. ID Number	
3. Payee Information						
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Debit Card	K	09/12/2023	\$ 13.50	OFFICE SUPPLIES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Debit Card	O	09/22/2023	\$ 41.76	NETWORKING EVENT
4. Total only this Page					\$	55.26
5. Total of ALL CRO-1315 Pages (This line must be on line 14 of Detailed Summary Page CRO-1100)					\$	55.26
6. Expense Codes (List detailed expenditure code in (g) above)						
E - Salaries		B* - Printing		C* - Fundraising		D - To Another Candidate
I - Postage		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses
O* - Other		J - Penalties		K* - Office Expenses		Q* - Donations to Legal Expense Fund
* Codes require detailed explanation in required remarks field (g)						

CRO-1315

NC State Board of Elections

December 2009

Loan Repayments

Pg 1 of 1 Amendment ☐ Yes ☒ No

Use this form to report payments on an existing loan.

1. Committee Full Name (and Fund if applicable)				2. ID Number	
ZACH LILLY FOR GOLDSBORO					
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
ZACHARY LILLY NC				c. Original Loan Date	
				07/21/2023	
				d. Original Loan Amount	
				\$ 114.00	
e. Remaining Loan Balance	f. Account Code	g. Form of Payment	h. Date (mm/dd/yyyy)	i. Repayment Amount	
\$ 0.00	1	Electric Funds Tran	09/12/2023	\$ 114.00	
\$				\$	
4. Total only this Page				\$ 114.00	
5. Total of ALL CRO-1420 Pages (This line must be on line 15 of Detailed Summary Page CRO-1100)				\$ 114.00	

CRO-1420

NC State Board of Elections

December 2007