

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 ZACH LILLY FOR GOLDSBORO		c. ID Number	
b. Mailing Address (include City, State and Zip Code) PO BOX 291 GOLDSBORO, NC 27533		d. Date Filed 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		<input type="checkbox"/> Municipal <input type="checkbox"/> State/County <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> Thirty-five day <input type="checkbox"/> First <input type="checkbox"/> Pre-primary <input type="checkbox"/> Second <input type="checkbox"/> Pre-election <input type="checkbox"/> Third <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Final <input type="checkbox"/> Special <input type="checkbox"/> Special	<input type="checkbox"/> 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)		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 TRUIST		a. Financial Institution Full Name RECEIVED WCBOE	
b. Purpose	c. Account Code	b. Purpose	c. Account Code
ORGANIZATION	1	NOV 06 2023	
	d. Period Begin Balance		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			
<u>Zachary E. Lilly</u> Printed Name of Signer		<u>Zachary E. Lilly</u> Signature of Appointed Treasurer	
		10/25/2023 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.			

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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) ZACH LILLY FOR GOLDSBORO	2. Type of Report 2023 Pre-Primary	3. ID Number	
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) ZACH LILLY FOR GOLDSBORO		2. ID Number						
3. Contributor Information <div style="display: flex; justify-content: space-around; font-size: small;"> <input type="checkbox"/> Add <input type="checkbox"/> Remove </div> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td rowspan="2">a. Full Name, Mailing Address & Phone (include city, state, & zip) NC REALTORS PAC NC</td> <td>b. Type of Committee</td> <td>d. Comments</td> </tr> <tr> <td> <input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum </td> <td rowspan="2"> e. Election Sum to Date \$ 2,000.00 </td> </tr> <tr> <td> c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality: </td> </tr> </table>			a. Full Name, Mailing Address & Phone (include city, state, & zip) NC REALTORS PAC NC	b. Type of Committee	d. Comments	<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum	e. Election Sum to Date \$ 2,000.00	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:
a. Full Name, Mailing Address & Phone (include city, state, & zip) NC REALTORS PAC NC	b. Type of Committee	d. Comments						
	<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum	e. Election Sum to Date \$ 2,000.00						
c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:								
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 <i>(This line must be on line 8 of Detailed Summary Page CRO-1100)</i>				\$ 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) ZACH LILLY FOR GOLDSBORO		2. ID Number													
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 <table border="1"> <tr> <td rowspan="2">a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Coordinated Committee Name</td> <td>d. Comments</td> </tr> <tr> <td colspan="2">c. Level Registered (Specify)</td> </tr> <tr> <td rowspan="2">CrazyCheapPoliticalSigns NC</td> <td><input type="checkbox"/> Federal</td> <td><input type="checkbox"/> County:</td> </tr> <tr> <td><input type="checkbox"/> State</td> <td><input type="checkbox"/> Municipality:</td> </tr> <tr> <td colspan="2"></td> <td>e. Election Sum to Date \$ 796.57</td> </tr> </table>			a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments	c. Level Registered (Specify)		CrazyCheapPoliticalSigns NC	<input type="checkbox"/> Federal	<input type="checkbox"/> County:	<input type="checkbox"/> State	<input type="checkbox"/> Municipality:			e. Election Sum to Date \$ 796.57
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments													
	c. Level Registered (Specify)														
CrazyCheapPoliticalSigns NC	<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)		b. Coordinated Committee Name	d. Comments												
DOLLAR GENERAL NC		c. Level Registered (Specify)		e. Election Sum to Date											
		<input type="checkbox"/> Federal	<input type="checkbox"/> County:	\$ 150.00											
		<input type="checkbox"/> State	<input type="checkbox"/> Municipality:												
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)		b. Coordinated Committee Name	d. Comments												
TARGET NC		c. Level Registered (Specify)		e. Election Sum to Date											
		<input type="checkbox"/> Federal	<input type="checkbox"/> County:	\$ 74.69											
		<input type="checkbox"/> State	<input type="checkbox"/> Municipality:												
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 Expenditures

Amendment 1 Page 1 of 1 Yes No

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

ZACH LILLY FOR GOLDSBORO																					
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 <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>						\$ 55.26															
<table><tr><td>B* - Printing</td><td>C* - Advertising</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* - Donations to Legal Expense Fund</td></tr><tr><td>O* - Other</td><td></td><td></td><td></td></tr></table>							B* - Printing	C* - Advertising	D - To Another Candidate	E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses	I - Postage	J - Penalties	K* - Office Expenses	Q* - Donations to Legal Expense Fund	O* - Other			
B* - Printing	C* - Advertising	D - To Another Candidate																			
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses																		
I - Postage	J - Penalties	K* - Office Expenses	Q* - Donations to Legal Expense Fund																		
O* - Other																					
* Codes require detailed explanation in required remarks field (g)																					

Loan Repayments

Amendment
Pg 1 of 1 Yes No

Use this form to report payments on an existing loan.

1. Committee Full Name (and Fund if applicable) ZACH LILLY FOR GOLDSBORO		2. ID Number		
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip) ZACHARY LILLY NC		b. Comments c. Original Loan Date 07/21/2023		
		d. Original Loan Amount \$ 114.00		
e. Remaining Loan Balance \$ 0.00	f. Account Code 1	g. Form of Payment Electric Funds Tran	h. Date (mm/dd/yyyy) 09/12/2023	i. Repayment Amount \$ 114.00
4. Total only this Page 5. Total of ALL CRO-1420 Pages <i>(This line must be on line 15 of Detailed Summary Page CRO-1100)</i>				
<i>CRO-1420</i>		NC State Board of Elections		December 2007