

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 Craig Uzzell District 6 County Commissioner

c. ID Number

b. Mailing Address (include City, State and Zip Code)

506 Mill Rd.
GOLDSBORO NC 27534

d. Date Filed

1.13.25

e. Phone Number

(919) 738-5295

2. Report Year

2024

3. Period Start Date (mm/dd/yy)

7.1.24

4. Period End Date (mm/dd/yy)

1.13.25

5. Treasurer Full Name

EARL CRAYNOR UZZELL JR (CRAIG)

6. Type of Committee (Check One)

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

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

- ☐ "Booster Fund"
☐ Building Fund

☐ Other:

8. Number of Fundraising Events this Report

11. Account Information

a. Financial Institution Full Name

SOUTHERN BANK

b. Purpose

GENERAL
OPERATING
ACCOUNT

c. Account Code

1234

d. Period Begin Balance

\$ 26.65

11. Account Information

a. Financial Institution Full Name

b. Purpose

c. Account Code

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 of Elections.

Earl Craynor Uzzell Jr
Printed Name of SignerEarl Craynor Uzzell Jr
Signature of Appointed Treasurer1-13-26
Date

FOR OFFICE USE ONLY

Date Received: _____

Employee: _____

Date Postmarked: _____

Employee: _____

Date Scanned: _____

Employee: _____

Date Data Entered: _____

Employee: _____

Delivery Method

- ☐ Normal Mail
☐ Registered Mail
☐ Hand Delivered
☐ Electronically Filed
☐ 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
Elect Craig Uzzell District 6 County Commissioner		Second Quarter	
Start of Election Cycle: January 1, 2024		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 26.65	\$ 0
5) Aggregated Contributions from Individuals (CRO-1205)		\$	\$
6) Contributions from Individuals (CRO-1210)		\$ 0	\$ 10,700.55
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
11 e) 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)		\$ 0	\$ 10,700.55
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$ 0	\$ 848.35
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)		\$ 26.65	\$ 26.65
17) In-Kind Contributions (CRO-1510)		\$ 0	\$ 9,925.55
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 74.72	\$ 10,700.55
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 0	\$ 0
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

Refunds/Reimbursements From the Committee

Pg 1 of 1 Amendment Yes ☒ No ☐

Use this form to report refunds/reimbursements, including contributions returned to the contributor.

1. Committee Full Name (and Fund if applicable)			2. ID Number	
Elect Craig Uzzell District 6 County Commissioner				
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date
Earl Craynor Uzzell Jr. 506 Mill Rd Goldsboro NC 27534		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party		12-8-25
		e. Level Registered (Specify)		i. Original Receipt Amount
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 2000 100.00
		f. Purpose Code		j. Election Sum to Date
				\$
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code
Director of Operations	Wayne County Public Schools	Office Supplies		1234
l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)		o. Amount
Money Order	Closed out account	1.13.25		\$ 26.65
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date
		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party		2
		e. Level Registered (Specify)		i. Original Receipt Amount
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$
		f. Purpose Code		j. Election Sum to Date
				\$
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code
l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)		o. Amount
				\$
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date
		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		e. Level Registered (Specify)		i. Original Receipt Amount
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$
		f. Purpose Code		j. Election Sum to Date
				\$
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code
l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)		o. Amount
				\$
4. Total only this Page				\$
5. Total of ALL CRO-1320 Pages (This line must be on Page 18 of Detailed Summary Page CRO-1100)				\$
L - Returned to Contributor M - Overpayment for Service N - Exceeded Contribution Limit P* - Reimbursement of In-Kind O* Other				
*Codes require detailed explanation in required remarks field (m)				