

# 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.

<b>1. Committee Information</b>							
a. Full Name <b>TAYLOR FOR COUNCIL</b>		c. ID Number					
b. Mailing Address (include City, State and Zip Code) <b>185 CHEROKEE RD PINELANDS, NC 28374</b>		d. Date Filed <b>9/29/2023</b>					
e. Phone Number <b>917 684 0349</b>							
2. Report Year <b>2023</b>	3. Period Start Date (mm/dd/yy) <b>01/01/2023</b>	4. Period End Date (mm/dd/yy) <b>09/26/2023</b>	5. Treasurer Full Name <b>JOHN H. TAYLOR</b>				
<b>6. Type of Committee (Check One)</b>		<b>9. Type of Report (check only one type of report from one category)</b>					
<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		<b>Municipal</b> <input type="checkbox"/> Organizational <input checked="" type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input 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		<b>State/County</b> <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		<b>Referendum</b> <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	
<b>7. Type of Fund (if applicable, check one)</b>							
<input type="checkbox"/> Booster Fund <input type="checkbox"/> Building Fund  <input type="checkbox"/> Other:							
<b>8. Number of Fundraisers this Report</b> <b>6</b>							
<b>11. Account Information</b>				<b>11. Account Information</b>			
a. Financial Institution Full Name <b>FURST BANK</b>		a. Financial Institution Full Name <b>RECEIVED</b>					
b. Purpose <b>CAMPAGEN CHECKING ACCT</b>	c. Account Code <b>C98B</b>	b. Purpose <b>SEP 29 2023</b>	c. Account Code				
d. Period Begin Balance <b>\$ 20</b>		d. Period Begin Balance <b>\$</b>					
<b>CERTIFICATION</b>				<b>MOORE BOE</b>			
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.							
<u>JOHN H. TAYLOR</u> Printed Name of Signer		<u>John H. Taylor</u> Signature of Appointed Treasurer				<u>9/29/2023</u> Date	
<b>FOR OFFICE USE ONLY</b>							
Date Received: <b>9/29/2023</b>	Employee: <b>APB</b>			<b>Delivery Method</b> <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed			
Date Postmarked: _____	Employee: _____						
Date Scanned: _____	Employee: _____						
Date Data Entered: _____	Employee: _____					<input type="checkbox"/> Signer has not received mandatory training	
<b>Please Note:</b> 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.

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number	
Taylor for Council	35 Day	TayTay1	
<b>Start of Election Cycle:</b> January 1, 2023		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 20	\$ 20
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 0	\$ 0
6) Contributions from Individuals	(CRO-1210)	\$ 7500	\$ 7520
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)		\$ 7500	\$ 7520
<b>EXPENDITURES</b>			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 6355.77	\$ 6355.77
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)		\$ 6355.77	\$ 6355.77
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 1164.23	\$ 1164.23
<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

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Amendment  
 Yes  No

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

1. Committee Full Name (and Fund if applicable)		2. ID Number			
Taylor for Council		TayTayl			
3. Contributor Information		<input type="checkbox"/> Add	<input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
John H Taylor 185 Cherokee Rd Pinehurst, NC 28374		Retired - Financial Services	I am the candidate		
		c. Employer's Name/Specific Field			
			e. Election Sum to Date		
			\$ 6770		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	C988	Check		8/17/2023	\$ 750
<input type="checkbox"/>	C988	Check		8/24/2023	\$ 5000
<input type="checkbox"/>	C988	Check		9/12/2023	\$ 1000
3. Contributor Information		<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Gary L Vine 596 Twin Cove Lane Ophelia, VA 22530		Retired Nuclear Power Consult	My brother-in-law		
		c. Employer's Name/Specific Field			
			e. Election Sum to Date		
			\$ 250		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	C988	Check		9/07/2023	\$ 250
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information		<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
John E Farrell PO Box 820 Pinehurst, NC 28370		Retired			
		c. Employer's Name/Specific Field			
		Biomed Computer Research Inst	e. Election Sum to Date		
			\$ 250		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	C988	Check		9/21/2023	\$ 250
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page				\$	7250
5. Total of ALL CRO-1210 Pages				\$	7500
(This line must be on line 6 of Detailed Summary Page CRO-1100)					

**Disbursements**

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

<b>1. Committee Full Name (and Fund if applicable)</b>			<b>2. ID Number</b>						
Taylor for Council			TayTayl						
<b>3. Type of Disbursement</b> <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					
<b>4. Payee Information</b>			<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>  <b>c. Level Registered (Specify)</b> <table border="0"> <tr> <td><input type="checkbox"/> Federal</td> <td><input type="checkbox"/> County:</td> </tr> <tr> <td><input type="checkbox"/> State</td> <td><input checked="" type="checkbox"/> Municipality:</td> </tr> </table>		<input type="checkbox"/> Federal	<input type="checkbox"/> County:	<input type="checkbox"/> State	<input checked="" type="checkbox"/> Municipality:	<b>d. Comments</b>  Yard/road signs
<input type="checkbox"/> Federal	<input type="checkbox"/> County:								
<input type="checkbox"/> State	<input checked="" type="checkbox"/> Municipality:								
Sandhills Signs 336 Fields Drive Aberdeen, NC 28315					\$ 3745				
					<b>e. Election Sum to Date</b>				
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>				
C988	Check	B	8/24/2023	\$1850	Deposit - print yard signs				
C988	Debit	B	9/08/2023	\$1895	Balance of printing				
<b>4. Payee Information</b>			<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>  <b>c. Level Registered (Specify)</b> <table border="0"> <tr> <td><input type="checkbox"/> Federal</td> <td><input type="checkbox"/> County:</td> </tr> <tr> <td><input type="checkbox"/> State</td> <td><input checked="" type="checkbox"/> Municipality:</td> </tr> </table>		<input type="checkbox"/> Federal	<input type="checkbox"/> County:	<input type="checkbox"/> State	<input checked="" type="checkbox"/> Municipality:	<b>d. Comments</b>  Website setup Initial video
<input type="checkbox"/> Federal	<input type="checkbox"/> County:								
<input type="checkbox"/> State	<input checked="" type="checkbox"/> Municipality:								
Kaufman 26 Pinecrest Plaza, #278 Southern Pines, NC 28387					\$ 350				
					<b>e. Election Sum to Date</b>				
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>				
C988	Debit	A	9/11/2023	\$350	Website setup, film&edit video				
				\$					
<b>4. Payee Information</b>			<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>  <b>c. Level Registered (Specify)</b> <table border="0"> <tr> <td><input type="checkbox"/> Federal</td> <td><input type="checkbox"/> County:</td> </tr> <tr> <td><input type="checkbox"/> State</td> <td><input checked="" type="checkbox"/> Municipality:</td> </tr> </table>		<input type="checkbox"/> Federal	<input type="checkbox"/> County:	<input type="checkbox"/> State	<input checked="" type="checkbox"/> Municipality:	<b>d. Comments</b>  Print & online ads, Sept & Oct
<input type="checkbox"/> Federal	<input type="checkbox"/> County:								
<input type="checkbox"/> State	<input checked="" type="checkbox"/> Municipality:								
The Pilot Pennsylvania Ave Southern Pines, NC 28387					\$ 1506				
					<b>e. Election Sum to Date</b>				
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>				
C988	Debit	A	9/12/2023	\$836	Pinestraw Oct Pilot Oct				
C988	DEb	A	9/13/2023	\$670	Pilot - Sept & online				
<b>5. Total only this Page</b>					\$ 5601				
<b>6. Total of ALL CRO-1310 Pages</b>									
<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>					\$ 6355.77				
<b>7. Purpose Codes</b> <i>(List detailed expenditure code in (h.) above)</i>									
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)									

# Disbursements

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Amendment

Yes

No

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

<b>1. Committee Full Name (and Fund if applicable)</b>			<b>2. ID Number</b>																		
Taylor for Council			TayTayl																		
<b>3. Type of Disbursement</b> <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																	
<b>4. Payee Information</b>			<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Remove																	
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  Holly Inn Tavern 155 Cherokee Rd Pinehurst, NC 28374			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>																
					Lunch - Tim Lea																
			<b>c. Level Registered (Specify)</b>																		
			<input type="checkbox"/> Federal	<input type="checkbox"/> County:																	
<input type="checkbox"/> State	<input checked="" type="checkbox"/> Municipality:																				
			<b>e. Election Sum to Date</b>																		
			\$ 44.53																		
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>																
C988	Debit	O	9/13/2023	\$44.53	Lunch - Tim Lea discussed MCBOC																
				\$																	
<b>4. Payee Information</b>			<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Remove																	
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  Staples 290 Turner St Aberdeen, NC 28315			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>																
					Print Handout flyers																
			<b>c. Level Registered (Specify)</b>																		
			<input type="checkbox"/> Federal	<input type="checkbox"/> County:																	
<input type="checkbox"/> State	<input checked="" type="checkbox"/> Municipality:																				
			<b>e. Election Sum to Date</b>																		
			\$ 513.56																		
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>																
C988	Debit	B	9/20/2023	\$513.56	Print handouts																
				\$																	
<b>4. Payee Information</b>			<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Remove																	
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  FPM, Inc PO Box 1313 Winter Park, FL 32790			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>																
					Cocktail napkin & Oct																
			<b>c. Level Registered (Specify)</b>																		
			<input type="checkbox"/> Federal	<input type="checkbox"/> County:																	
<input type="checkbox"/> State	<input checked="" type="checkbox"/> Municipality:																				
			<b>e. Election Sum to Date</b>																		
			\$ 196.68																		
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>																
C988	Debit	O	9/25/2023	\$196.68	Cocktail Napkin																
				\$																	
<b>5. Total only this Page</b>																					
<b>6. Total of ALL CRO-1310 Pages</b>																					
(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)																					
<b>7. Purpose Codes</b> (List detailed expenditure code in (h.) above) <table border="0"> <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			
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