

# 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 PINEHURST, NC 28371</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> <input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser		<b>9. Type of Report (check only one type of report from one category)</b> <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>10. Special Report Name</b>	
<b>8. Number of Fundraisers this Report</b> <b>0</b>			
<b>11. Account Information</b>		<b>11. Account Information</b>	
a. Financial Institution Full Name <b>FIRST BANK</b>		a. Financial Institution Full Name <b>RECEIVED</b>	
b. Purpose <b>CAMPAIGN CHECKING ACCT</b>		b. Purpose <b>SEP 29 2023</b>	
c. Account Code <b>C988</b>		c. Account Code	
d. Period Begin Balance <b>\$ 20</b>		d. Period Begin Balance <b>\$</b>	
<b>CERTIFICATION</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.			
<b>JOHN H. TAYLOR</b> Printed Name of Signer		<b>John H. Taylor</b> Signature of Appointed Treasurer	
		<b>9/29/2023</b> Date	
<b>FOR OFFICE USE ONLY</b>			
Date Received: <b>9/29/2023</b>		Employee: <b>APB</b>	
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	
<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

Amendment

☐ Yes ☒ No

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

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. Type of Report</b>		<b>3. ID Number</b>	
Taylor for Council		35 Day		TayTayl	
<b>Start of Election Cycle:</b>		<b>January 1,</b>		<b>2023</b>	
		<b>Total this Reporting Period</b>		<b>Total this Election Cycle</b>	
4) Cash on Hand at Start		\$ 20		\$ 20	
<b>RECEIPTS</b>					
5) Aggregated Contributions from Individuals		(CRO-1205)		\$ 0	
6) Contributions from Individuals		(CRO-1210)		\$ 7500	
7) Contributions from Political Party Committees		(CRO-1220)		\$ 0	
8) Contributions from Other Political Committees		(CRO-1230)		\$ 0	
9) Loan Proceeds		(CRO-1410)		\$ 0	
10) Refunds/Reimbursements To the Committee		(CRO-1240)		\$ 0	
11) Other Receipt Sources					
11a) Interest on Bank Accounts		(CRO-1250)		\$ 0	
11b) Contributions from Not-for-Profit Organizations		(CRO-1250)		\$ 0	
11c) Outside Sources of Income		(CRO-1250)		\$ 0	
11d) Legal Expense Fund – Other Sources		(CRO-1270)		\$ 0	
11 e) Exempt Purchase Price Sales		(CRO-1265)		\$ 0	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)				\$ 7500	
<b>EXPENDITURES</b>					
13) Disbursements					
13a) Operating Expenditures		(CRO-1310)		\$ 6355.77	
13b) Contributions to Candidates/Political Committees		(CRO-1310)		\$ 0	
13c) Coordinated Party Expenditures		(CRO-1310)		\$ 0	
14) Aggregated Non-Media Expenditures		(CRO-1315)		\$ 0	
15) Loan Repayments		(CRO-1420)		\$ 0	
16) Refunds/Reimbursements From the Committee		(CRO-1320)		\$ 0	
17) In-Kind Contributions		(CRO-1510)		\$ 0	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)				\$ 6355.77	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)				\$ 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	
26) Forgiven Loans		(CRO-1440)		\$ 0	
27) 48-Hour Notice Reports Sum		(CRO-2220)		\$ 0	
28) Contributions to be Refunded		(CRO-1215)		\$ 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

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

# 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)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
Sandhills Signs 336 Fields Drive Aberdeen, NC 28315					Yard/road signs	
			<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$ 3745				
<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>d. Comments</b>	
Kaufman 26 Pinecrest Plaza, #278 Southern Pines, NC 28387					Website setup Initial video	
			<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$ 350				
<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>d. Comments</b>	
The Pilot Pennsylvania Ave Southern Pines, NC 28387					Print & online ads, Sept & Oct	
			<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$ 1506				
<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> (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)						



# 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> Taylor for Council					<b>2. ID Number</b> 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> C988	<b>g. Form of Payment</b> Debit	<b>h. Purpose Code</b> O	<b>i. Date (mm/dd/yyyy)</b> 9/13/2023	<b>j. Amount</b> \$44.53	<b>k. Required Remarks</b> 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> C988	<b>g. Form of Payment</b> Debit	<b>h. Purpose Code</b> B	<b>i. Date (mm/dd/yyyy)</b> 9/20/2023	<b>j. Amount</b> \$513.56	<b>k. Required Remarks</b> 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> C988	<b>g. Form of Payment</b> Debit	<b>h. Purpose Code</b> O	<b>i. Date (mm/dd/yyyy)</b> 9/25/2023	<b>j. Amount</b> \$196.68	<b>k. Required Remarks</b> Cocktail Napkin	
				\$		
<b>5. Total only this Page</b>					\$ 754.77	
<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> (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)						