

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 COMMITTEE TO ELECT BOB BYRD	c. ID Number
b. Mailing Address (include City, State and Zip Code) 2826 CHARLOTTE LANE BURLINGTON, NC 27215	d. Date Filed 07/28/2021
	e. Phone Number (336) 584-7302

2. Report Year 2021	3. Period Start Date (mm/dd/yy) 01/01/2021	4. Period End Date (mm/dd/yy) 06/30/2021	5. Treasurer Full Name CAROLINE KING
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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	Municipal	State/County	Referendum
<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> PAC	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Referendum	<input type="checkbox"/> Legal Expense Fund	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> NC Public Campaign Financing Fund		<input checked="" type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
<input type="checkbox"/> Other:		<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"/> Special	
8. Number of Fundraisers this Report 0		10. Special Report Name		

3. Account Information		3. Account Information	
a. Financial Institution Full Name CAPITAL BANK, NA		a. Financial Institution Full Name	
b. Purpose CHECKING	c. Account Code 1	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 3,036.32	RECEIVED JUL 29 2021 ALAMANCE COUNTY	
		d. Period Begin Balance \$	

CERTIFICATION BOARD OF ELECTIONS

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

Caroline King Printed Name of Signer Caroline King Signature of Appointed Treasurer 07/28/2021 Date

FOR OFFICE USE ONLY

Date Received: 6/29/2021 Employee: JG Delivery Method: Normal Mail Registered Mail Hand Delivered Electronically Filed

Date Postmarked: _____ Employee: _____ Signer has not received mandatory training

Date Scanned: 8/5/2021 Employee: JG

Date Data Entered: _____ Employee: _____

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	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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	
COMMITTEE TO ELECT BOB BYRD	2021 Mid Year Semi-Annual		
Start of Election Cycle: January 1, <u>2020</u>		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 3,036.32	\$ 3,036.32
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)		\$ 0.00	\$ 0.00
9) Loan Proceeds (CRO-1410)		\$ 0.00	\$ 0.00
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)		\$ 0.00	\$ 0.00
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$ 0.00	\$ 0.00
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)		\$ 60.50	\$ 60.50
15) Loan Repayments (CRO-1420)		\$ 0.00	\$ 0.00
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)		\$ 60.50	\$ 60.50
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 2,975.82	\$ 2,975.82
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

Aggregated Non-Media Expenditures

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
COMMITTEE TO ELECT BOB BYRD						
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	Draft	K	01/04/2021	\$ 5.00	BANK FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Draft	C	01/29/2021	\$ 5.00	BANK FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Draft	C	02/01/2021	\$ 5.00	BANK FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Draft	C	02/26/2021	\$ 5.00	BANK FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Draft	C	03/01/2021	\$ 5.00	BANK FEES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Draft	C	03/31/2021	\$ 5.00	BANK FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Draft	C	04/01/2021	\$ 5.00	BANK FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Draft	C	04/30/2021	\$ 5.00	BANK FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Draft	C	05/03/2021	\$ 5.00	BANK FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Draft	C	05/28/2021	\$ 5.00	BANK FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Draft	C	06/01/2021	\$ 5.00	BANK FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Draft	C	06/30/2021	\$ 5.00	BANK FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Electric Funds Tran	C	01/11/2021	\$ 0.50	DONATION PROCESSING FEE
4. Total only this Page					\$	60.50
5. Total of ALL CRO-1315 Pages <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>					\$	60.50
6. Purpose Codes (List detailed expenditure code in (d) above)						
B* - Printing		C* - Fundraising		D - To Another Candidate		
E - Salaries		F* - Equipment		H* - Holding Public Office Expenses		
I - Postage		J - Penalties		K* - Office Expenses		
O* - Other		Q* - Donations to Legal Expense Fund				
* Codes require detailed explanation in required remarks field (g)						