<b>Disclosure Report Cove</b>	r
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Amendn	ent		
☐ Yes		No	· WD-ware

		A LOCAL CONTRACTOR OF THE PARTY
Use this form for general report and committee information, must	be signed and submitted along w	ith other detailed forms.
Do not use this form to update information.	·	
1. Committee Information		

Do not use this form to update information.			
1. Committee Information	PORTO DA		THE PROPERTY OF THE PARTY OF TH
a. Full Name			c, ID Number
JOHN P. PAISLEY, JR.			
b. Mailing Address (include City, State and Zip Code)			d. Date Filed
1104 E. WILLOWBROOK DR.			01-12-2021
BURLINGTON, NC 27215	•		e, Phone Number
			336.227.1649
2 Report Year 3 Period Start Date (min/dd/yy)	4. Period E	nd Date (mm/dd/yy) 5.	Freasurer Full Name
2020 10/18/2020	12131	12020	Thomas Jones
6. Type of Committee (Check One) 9:	Type of Repo	rt (check only one typ	e of report from one category)
	micipal	State/County	Referendum
PAC Referendum	Organizational	Organizationa	l Organizational
☐ Independent Expenditure ☐ Joint Fundraiser ☐	Thirty-five day	Quarterly	Pre-referendum
Legal Expense Fund	Pre-primary	First	Final
	Pre-election	Second	Supplemental Final
7. Type of Fund : **(if applicable, check one)	Pre-runoff	Third	Annual
Booster Fund	Semi-annual	Fourth	Special
Building Fund	Mid Year	Semi-annual	
L	Year End	Mid Year End	And the second s
Other:  8. Number of Fundraisers this Report	Final Special	Final	
	Special	Special	
	SZS-SSSSELVENT NOSA BESSEL		
11. Account Information	Andreas Comment of the Comment of th	1: Account Informat Financial Institution Ful	
a. Financial Institution Full Name		TO BE TO CAUSE OF THE REAL PROPERTY OF THE PRO	entropy (A. 1922). In the control of
CARTER BANK & TRUST		AMERICAN NATI	JNAL BANK
b. Purpose c. Account Code		). Purpose	c, Account Code
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CAMPAIGN			TO NEW YORK IN MICE year on the State of the Control of the
d. Period Begin B	alance		d. Period Begin Balance
<b>  \$</b> 0			\$ 173.80
I certify that the Committee or Fund is in compliance of the NC General Statutes and that no funds are con report is complete, true and correct and that I have be	nmingled with I	prohibited or other non-di	sclosed funds. I further certify that this
Thumas / James	10	1	01-12-2021
Printed Name of Signer	Signa	iture of Appointed Treasure	Date
FOR OFFICE USE ONLY	THE MARKET Y	$\sim$ $\sim$ $\sim$	
1/19/31		144-	Delivery Method
Date Received:	Employe		☐ Normal Mail
Date Postmarked:	Employe		Registered Mail
			Hand Delivered
Date Scanned: 101121	Employe	e: <u>) (</u>	Electronically Filed
Date Data Entered:	Employe	<b>6:</b>	☐ Signer has not received mandatory training
Please Note: This form cannot be used to a assistant treasurer, custod You must amend the Statement of	dian of books	information, or accoun	information,

CRO-1000

NC State Board of Elections

PECEIVED

JAN 12 2021 DV.

Amendment

Yes □ No

Detailed Summary Use this form to summarize all disclosure reporting forms and			Yes No
1: Committee Full Name (and Fund if applicable)  JOHN PAISLEY CAMPAIGN	QUARTE	RLY 4th	
Start of Election Cycle: January 1, 2020	•	Total this Reporting Perio	Total this d Election Cycle
4) Cash on Hand at Start		\$	\$
<u>RECEIPTS</u>			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$ 100	\$ 1,650,00
7) Contributions from Political Party Committees	(CRO-1220)	\$ 700	\$ 1,300.00
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$ 0	\$ 1050.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	\$
11) Other Receipt Sources	·		
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	\$
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,	1d and 11e)	\$ 800.00	\$ 4,000.00
<u>EXPENDITURES</u>			aud contons of
13) Disbursements		Marian de la companya	
13a) Operating Expenditures	(CRO-1310)	\$ 100.00	\$ 3126.30
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	\$
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$
15) Loan Repayments	(CRO-1420)	\$	\$
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$	\$
17) In-Kind Contributions	(CRO-1510)	\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15	, 16 and 17)	\$ 100.00	\$ 3,126.30
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18)	\$	\$ 973.80
ADDITIONAL INFORMATION	i day	Managara (a. 1884)	
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$	
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$	
24) Account Transfers Within the Committee	(CRO-1720)	\$	
25) Administrative Support	(CRO-1710)	\$	\$
26) Forgiven Loans	(CRO-1440)	\$	\$
27) 48-Hour Notice Reports Sum	CRO-2220)	\$	\$
28) Contributions to be Refunded (	CRO-1215)	\$	\$ Anguet 2008

		rom Individua		Pg			☐ Yes	∐ No
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	le city, state, & zip)			DENTIST	•			
DAV	VID S. PATT	ERSON, DDS		c. Employer's Na	me/Specific Field	1		
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f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yy	yy)	k. Amount	11 (11 11 11 11 11 11 11 11 11 11 11 11
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(includ	le city, state, & zip)							
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Amendment

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	failing Address & Ph	ione	<b>b.</b>	Coordinate	ed Comm	ittee Name	e d	l. Comments	
(include city, state			National State					٠	•
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Amendment

Ose uns form	to report contributions from a politi	cal party	
1. Committee 1	ull Name (and Fund if applicable)	2.	D Number
JOHN P	AISLEY SR.		
O 12 Phone P. Latvord Co. Co. S. V. Charles Property	Information	Add Remove	
a. Full Name, Mai (include city, sta	ling Address & Phone (te, & zip)	b. C	Comments
6343 BE	FOR NC HOUSE ALE RD.		
SNOW CA	MP, NC 27349	c.E	lection Sum to Date
		\$	200.00
d. Account Code	e. Form of Payment f. In-Kind Desc	ription g: Date (mm/dd/yyyy)	h, Amount
	СНЕСК	10/15/2020	\$ 200.00
			\$
			\$
3: Contributor	Intogration	Add Remove	
a. Full Name, Mail	ing Address & Phone	b.C	omments
(include city, sta			
	E COUNTY OF REPLUBLICAN P. O'KELLY AVE.	ARTY	
ELON, N		c I	lection Sum to Date
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3. Contributor		 	
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