	Amen	ıdment	
Disclosure Report Cover	$\boxtimes$	Yes	N
In this fame for any and any and any are the fame of a second to the fame of t	- 41 1	-4-'1-1 C	

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	info	rmation

5 V 50 T 50 S C 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	to update information					
1. Committee Inform	mation	<u> </u>	<u> </u>			
a. Full Name						c. ID Number
Citizens For Anthon	y Pierce		RECE		n	537979
b. Mailing Address (inclu	d. Date Filed					
PO Box 122 Haw River, NC 2725	58		MAR 1	6 2020	7	3-16-2022
****** **** *** = .	76		ALAMANCE	E COUN	ITY	e. Phone Number
			BOARD OF E	ELECTIC	)NS 	919-275-2554
2. Report Year	3. Period Start Date (mm/d	101/1/1/1	Period End D m/dd/yy)	ate	5. Treasurer Full	Name
2021	07/01/2021		12/31/2021	1	Anthony Pierce	
6. Type of Committe	ee (Check One)	9. Type of	Report (	check or	nly one type of report	from one category)
Candidate Campai		Municipal	- Average	State/C		Referendum
PAC	Referendum		anizational		Organizational	Organizational
Independent Expenditure	Joint Fundraiser		rty-five day		Quarterly	Pre-referendum
Legal Expense Fu		Dro Dro	,		ent ,	F-1 - 2.
7. Type of Fund  "Booster Fund"	(if applicable, check one)	1 = -	primary election		First	Final Supplemental Final
	•		election runoff		Second Third	Supplemental Final
Building Fund	1		runoff ii-annual		Third Fourth	Annual Special
	J	l <del></del> -	ıı-annuar Mid Year		Fourth Semi-annual	Special
Other:	J	H	Year End		Mid Year	10. Special Report Name
Onivi.	J				Year End	10. Special insport trans-
8. Number of Fundr	Same this Donnet	Spec			Final	
d. Numberver und.	alsers this Acpuir	L Spee	жа			
	O STREET IN HERE COMES CONTRACT OF STREET OF STREET	<u> </u>	**************************************	<u> </u>	Special	
11. Account Informa	145H4 X.3 · G. 1.73 - A				Information	
a. Financial Institution F			a. Fins	ancial Inst	titution Full Name	
Select Bank & Trust						
b. Purpose	c. Account Code		b. Pur	'pose	***************************************	c. Account Code
Financial Needs for	AP20	)20				
the campaign	d. Period Begin Balance	;				d. Period Begin Balance
	\$ 558.04					\$
CERTIFICATION						
I certify that the Com						& 22D-22M of Chapter 163 of I further certify that this report
is complete, true and	correct and that I have been					- 11 a a a
Anthony Pier			-tit	< 7/2	· _	5-16-2022
	Printed Name of Signer		Signature	of Appoin	nted Treasurer	Date
FOR OFFICE USE ON	NLY					
Date Received:	3-14-2022	Emj	ployee:	<u>Cr</u>	<u> </u>	<u>Delivery Method</u> ☐ Normal Mail
Date Postmarked	E	Emp	ployee:		d	Registered Mail Hand Delivered
Date Scanned:	<u> </u>	Emŗ	ployee:			☐ Electronically Filed ☐ Signer has not received
Date Data Entere	;d:	Emj	ployee:			mandatory training
Please Note: This						ess, treasurer, assistant treasurer,
	avato di c	n of books	information, or	account	information	

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Amendment

Yes

No

**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
Citizens For Anthony Pierce	2021 year-end ser	nia	537979
Start of Election Cycle: January 1,	2021	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 558.04	\$ 558.04
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$ 350	\$ 350
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$	\$
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 Organization	ons (CRO-1250)	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$	\$
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11	c, 11d and 11e)	\$ 350	\$ 350
TEXPENDITURES			and the state of t
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 431.83	\$ 431.83
13b) Contributions to Candidates/Political Commit	tees (CRO-1310)	\$	\$
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 2.01	\$ 2.01
15) Loan Repayments	(CRO-1420)	\$	\$
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	\$
17) In-Kind Contributions	(CRO-1510)	\$ 100	\$ 100
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1	5, 16 and 17)	\$ 533.84	\$ 533.84
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18)	\$ 374.20	\$ 374.20
ADDITIONALINEORMATION	to an experience of the second		
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaign	ns) (CRO-1430)	\$	The state of the
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)	\$	\$
CDO 1100 NC State Board of Ele		<u>-</u>	August 2008

In-Kind Contributions Use this form to report non-monetary contributions, donations, go		servi		1 of vided to th	<u>1</u> e comi	Amendme  Ye mittee or fund.	_
Use CRO-1215 if In-Kind Contributions were or will be refunded I. Committee Full Name (and Fund if applicable)	i Witnin	ı / da	ys.		2 10	Number	
Citizens For Anthony Pierce	<u> </u>	2.073		<u> </u>	2.11	53797	9
	Remov		~				
a. Full Name, Mailing Address & Phone	b. Ty		Contribu	tor	c. Cor	mments	<u> </u>
(include city, state, & zip)	<b>│</b>		ividual		0		
Anthony Pierce 2009 Atlas Drive		Part	ıdidate			rating cost	
Haw River, NC 27258		PAC	•		uona	ation	
Haw River, NC 27236			erendum		d Ele	ction Sum to Dat	- 1 N/2 4.
			er Receip	ot Source	\$	100	<u>*                                    </u>
e. Description			f. Date	e (mm/dd/yy	yy)	g. Fair Market	Amount
Operating Cost donation				11-20-202	1	\$ 100	
						\$	
						\$	
	Remov						
a. Full Name, Mailing Address & Phone	b. Ty		Contribu	tor	c. Cor	nments	
(include city, state, & zip)	<b>↓</b>		vidual				
	╽╠		didate				
	$\parallel$	Party	-				
		PAC	erendum		d Flo	ction Sum to Date	
			er Receip	t Source	\$	chon Sum to Date	
e. Description			f. Date	mm/dd/yy	/y)	g. Fair Market	Amount
						\$	-
						\$	
						\$	
3. Contributor Information Add	Remov	е					
a. Full Name, Mailing Address & Phone	b. Ty	pe of C	Contribut	tor	c. Con	nments	
(include city, state, & zip)	J□		vidual				
	IЦ		didate				
		Party	-				
		PAC			2 E1-	ction Sum to Date	1 1915 - 142
			erendum er Receip	t Source	u. Eie	CHOR SUM TO DAY	<u> </u>
		Ollic	a Receip	it Source	\$		
e. Description			f. Date	(mm/dd/yy	yy)	g. Fair Market	Amount
						\$	
··· · · · · · · · · · · · · · · ·						\$	

4. Total only this Page
5. Total of ALL CRO-1510 Pages

(This line must be on line 17 of Detailed Summary Page CRO-1100)

\$

100

100

\$

\$

				: Amend	ment	
Disbursements	Pg	1	of <u>1</u>		Yes	No
TT die Committee de la la la Committee de la			1 4 !	1-4-61141-	_ 1	

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

1. Committee F Citizens For An	ull Name (and Fun	d if applicable)						<b>2. ID Number</b> 537979		
			D/I	1210 Carrie Car as			LELS AVE			
	ursement <i>(Plea</i>									
Operating E	Contractor of the contractor of			ates/Political Committee	s		orginate	l Party Expenditures		
4. Payee Inform	ation	X	_	dd		Remove				
a. Full Name, Maii	ing Address & Phone	•	b.	. Coordinated Commit	tee Na	ime	d. Co	mments		
(include city, state,	& zip)									
North State Ass			1				Can	p Consultant		
5629 Mount Ha	rmony Church Rd		c.	Level Registered (Spe	cify)		1	•		
Rougemont, NC	-		Г	Tederal .	Ť	County:	İ			
704-438-1192	21372		-	State	=	Municipality:	e Fle	ction Sum to Date		
704-430-1192			۲		┛	irramorpanty.	C. E.I.	ction dani to Date		
							\$ 3	00		
	I	h Duynasa Cada	Щ				1 5			
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)		j. Amount		juired Remarks		
AP2020	Debit Card	E		12/6/2021		\$300	Mthl	y payment		
711 2020	Don oura			12/0/2021		Ψ300				
						\$				
						Φ				
4. Payee Inform	ation	X	A	dd	ي. د د	Remove				
and the second second	ng Address & Phone		<del> </del>	Coordinated Commit	ee Na		d. Co	nments		
								Box renewal		
(include city, state,	& zap)						10,	JOA TOHOWAI		
USPS	•			T 170	10.		-			
105 Roxboro Ro			c.	Level Registered (Spec	eny)					
Haw River, NC	27258		l L	Federal	┙	County:		44.5		
				State		Municipality:	e. Ele	ction Sum to Date		
							\$ 1	18		
							1 A I	10		
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)		j. Amount	k. Rec	juired Remarks		
The state of the s				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		<u> </u>	PO box renewal			
AP2020	debit Card	K		12/01/2021		\$118.00	1 0 0	311 1 3113 IV 311		
			$\dashv$							
						\$				
		<b>6</b> 3					W 2 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7			
4. Payee Inform		X	<del>,</del>	dd		Remove	hydrigen)			
a. Full Name, Maili	ng Address & Phone		b.	Coordinated Committ	ee Na	me	d. Co	nments		
(include city, state,	& zip)									
Digital News Pa	iper/ Times News							es News		
707 S. Main St	•		c. Level Registered (Specify)					1		
Burlington, NC	27215		Federal County:							
Durlington, 140	27213			State	╡	Municipality:	a Fla	ction Sum to Date		
		;	┝	_ State [		ividincipality.	C. EAC	tion Sum to Date		
							\$ 1	3.83		
	Γ		L.,							
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)		j. Amount		juired Remarks		
4 D2020	ADOUGH-LA			10/0/0001		¢12 02	Digit	al News		
AP2020	ARCH debt	<b>A</b> .		12/8/2021		\$1383				
		+								
						\$				
5. Total only th	lo Dogo				٠		\$	431.83		
			٠		<u> </u>		Ψ	451.05		
Print Control of the	CRO-1310 Pages	CDO 110	n . c .	(	*		į			
	line 13a of Detailed Sun						\$	431.83		
		Contrib to Candidates/I								
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)										
72 Purpose Codes (List detailed expenditure code in (h.) above)										
A* - Media	B* - Printing	C* - Fund				D - To Anothe				
E - Salaries	F* - Equipment							Office Expenses		
I - Postage	J - Penalties	K* - Offic	e E	xpenses		Q* - Donation	n to Le	gal Expense Fund		
O* - Other	nn Biwasawa a mala a na a					No. of the second section	erroret eta terr			
*Codes requir	e detailed explanat	on in required re	m	irks field (k)	3145					

		m Individuals ividual contributions o	over \$50		eg <u>1</u> of onder \$50 if form CR	<u>1</u> O 1205 is n	Yes ot used	No No
RESIDENCE AND ADMINISTRAÇÃO DE PROPERTO DE		(and Fund if applica				2, ID Nu		15774.2 14.254.2
	For Anthony Piero		•				537979	
	butor Informatio			Add R	temove			
- 1274 May 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ne, Mailing Address			b. Job Title/Profession		d. Commer	ıts	
<ul> <li>(2) 20 (2) (2) (3)</li> </ul>	city, state, & zip)			Clinical Project I		Candidat	e contribution	l
Anthony	Pierce							
2009 Atla				c. Employer's Name	Specific Field	-		
Haw Rive	er, NC 27258			54		e Election	Sum to Date	That wa
		•						
130.30 0 24 2 2 1 2 2		T	1.		1	\$	100	nanga sampa
f. Prior	g. Account Code	h. Form of Payment	-	Kind Description	j. Date (mm/dd/yy		k. Amount	
	AP2020	debit card	Ope	rating funds	11/20/2	021	\$	100
							\$	
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3. Contri	butor Informatio	ón de la companya de		Add R	emove			55.
22 10 30 10 10 WELL STATE OF THE	re, Mailing Address &	<del></del>	F1	b. Job Title/Profession	on	d. Commen	its	
	city, state, & zip)							
Robert By				Not employed				
2826 Cha				c. Employer's Name/				
Burlingto	n, NC 27215			Not employed		e Election	Sum to Date	
								- 24 1 1 1 <u>35</u>
						\$	250	50
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Description	j. Date (mm/dd/yy	уу)	k. Amount	1.11
	AP2020	Debit card			12-8-20	)22	\$	250
							\$	
							\$	
3. Centri	butor Informatio	d On		Add 🔲 R	emove			
a. Full Nam	ne, Mailing Address &	& Phone		b. Job Title/Profession	on	d. Commen	ts	
(include	city, state, & zip)					,		
				c. Employer's Name/	Specific Field			
				c. Employer s Name/	Special Field			
						e. Election	Sum to Date	
						\$		
f. Prior	g. Account Code	h. Form of Payment	i, In-I	Kind Description	j. Date (mm/dd/yy	уу)	k. Amount	
							\$	
							\$	
		<u> </u>					\$	
4. Total	only this Pag					\$		350
THE STATE OF THE S	of ALL CRO	141				•		350

(This line must be on line 6 of Detailed Summary Page CRO-1100)

Amendment

Aggregated Non-M	edia Ex	penditures
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Page \_\_\_\_ of \_\_\_\_ Amendment Yes \_\_\_\_ No

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

	Committee Call Name (and stand if applicable)										
Ci	tizens F	or Anthony Pier	ce			537979					
		iti)viialitone					是于45年的第三章的 2015年,1915年,				
		b, Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks				
	Add Remove	AP2020	Arch draft	0	12/9/2021	\$ 2.01	ActBlue Fees				
	Add Remove					\$					
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4.	Total o	nly this Page				\$2.01					
OW ST.											
5. LOIAI OF ALL CRO-1313 Fages (This line must be on line 14 of Detailed Summary Page CRO-1100)  \$2.01											
6.	Purpos	se Cirles (Lisi	detation expendit Printing	ure code in (d C* - Fundra	above)	Another Candida	te				
	E - Salar Door	ies 📭 🕶 -	Equipment enalties	G - Political K* - Office	Party II*-I	Tolding Public Of Donations to Lega	fice Expenses				
	- Postaj O* - Otl		chalucs	NWHICE	DAPCIBES V - L	romanons to Lega	i emponoc punti				
			d explanation in	required remai	rks field (g)						
- 1	* Codes require detailed explanation in required remarks field (g)										