

RECEIVED

Amendment
 Yes No

Disclosure Report Cover

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.

FEB 22 2024

1. Committee Information		ALAMANCE COUNTY BOARD OF ELECTIONS	
a. Full Name		c. ID Number	
CITIZENS FOR ANTHONY PIERCE		-537979--	
b. Mailing Address (include City, State and Zip Code)		d. Date Filed	
P.O. BOX 122 HAW RIVER, NC 27258		02/19/2024	
		e. Phone Number	
		(919) 656-5363	

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2024	01/01/2024	02/17/2024	KATHERINE LANDES

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 checked="" 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 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		10. Special Report Name		
0				

3. Account Information		3. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
FIRST BANK			
b. Purpose	c. Account Code	b. Purpose	c. Account Code
CAMPAIGN FUNDS	AP2020		
	d. Period Begin Balance		d. Period Begin Balance
	\$ 881.85		\$

CERTIFICATION

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

Katherine Landes Printed Name of Signer Katherine Landes Signature of Appointed Treasurer 02/19/2024 Date

FOR OFFICE USE ONLY

Date Received: 2-22-24 Employee: Jessica **Delivery Method**

Date Postmarked: _____ Employee: _____ Normal Mail

Date Scanned: _____ Employee: _____ Registered Mail

Date Data Entered: _____ Employee: _____ Hand Delivered

_____ _____ Electronically Filed

_____ _____ Signer has not received mandatory training

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	
CITIZENS FOR ANTHONY PIERCE		2024 First Quarter			
Start of Election Cycle: January 1, 2023			Total this Reporting Period		Total this Election Cycle
4) Cash on Hand at Start			\$ 881.85		\$ 2,228.23
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 260.00		\$ 360.00	
6) Contributions from Individuals (CRO-1210)		\$ 3,350.00		\$ 3,700.00	
7) Contributions from Political Party Committees (CRO-1220)		\$ 788.00		\$ 788.00	
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)		\$ 4,398.00		\$ 4,848.00	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 500.00		\$ 1,224.00	
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)		\$ 131.35		\$ 203.73	
15) Loan Repayments (CRO-1420)		\$ 0.00		\$ 1,000.00	
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$ 0.00		\$ 0.00	
17) In-Kind Contributions (CRO-1510)		\$ 823.00		\$ 823.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 1,454.35		\$ 3,250.73	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 3,825.50		\$ 3,825.50	
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 Contributions from Individuals

Page 1 of 1

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

Optional form used to report NC Contributions From Individuals of \$50 or less

1. Committee Full Name (and Fund if applicable)				2. ID Number	
CITIZENS FOR ANTHONY PIERCE					
3. Contributor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/> Add <input type="checkbox"/> Remove	AP2020	Credit Card		01/03/2024	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	AP2020	Cash		02/04/2024	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	AP2020	Credit Card		01/18/2024	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	AP2020	Credit Card		02/08/2024	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	AP2020	Credit Card		01/02/2024	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	AP2020	Credit Card		02/04/2024	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	AP2020	Credit Card		01/08/2024	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	AP2020	In-Kind	SUBSCRIPTION FEE FOR CONSTANT	01/18/2024	\$ 35.00
4. Total only this Page					\$ \$260.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$ \$260.00

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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	
CITIZENS FOR ANTHONY PIERCE						
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	
IAN BALTUTIS 702 WEST DAVIS STREET BURLINGTON, NC 27215			Entrepreneur			
			c. Employer's Name/Specific Field The Vibration Solution LLC			
					e. Election Sum to Date	
					\$ 2,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	AP2020	Credit Card		01/01/2024	\$ 2,000.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
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	
DIANE HEATH 3027 Maple Ave. E1 BURLINGTON, NC 27215			NO JOB TITLE OR PROFESSION			
			c. Employer's Name/Specific Field NOT EMPLOYED			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input checked="" type="checkbox"/>	AP2020	Credit Card		12/16/2023	\$ 50.00	
<input type="checkbox"/>	AP2020	Credit Card		01/20/2024	\$ 50.00	
<input type="checkbox"/>					\$	
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	
DAVID MASSEY 1629 S. Church Street BURLINGTON, NC 27215			REAL ESTATE			
			c. Employer's Name/Specific Field DS Massey, Inc.			
					e. Election Sum to Date	
					\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	AP2020	Credit Card		01/18/2024	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 2,300.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 3,350.00	

Contributions from Individuals

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	
CITIZENS FOR ANTHONY PIERCE						
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	
JAMES MCCLURE 622 Johnson Ave. GRAHAM, NC 27253			BUSINESS OWNER			
			c. Employer's Name/Specific Field Green & McClure Furniture			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	AP2020	Credit Card		01/18/2024	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
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	
KIRK MONTGOMERY 1096 Falkirk Drive BURLINGTON, NC 27215			IT DIRECTOR			
			c. Employer's Name/Specific Field CITY OF MEBANE			
					e. Election Sum to Date	
					\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	AP2020	Credit Card		01/18/2024	\$ 100.00	
<input type="checkbox"/>	AP2020	Credit Card		02/05/2024	\$ 100.00	
<input type="checkbox"/>					\$	
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	
LINDA PAULING 725 Luther Drive GOLDSBORO, NC 27534			NO JOB TITLE OR PROFESSION			
			c. Employer's Name/Specific Field NOT EMPLOYED			
					e. Election Sum to Date	
					\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	AP2020	Credit Card		01/13/2024	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 500.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 3,350.00	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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	
CITIZENS FOR ANTHONY PIERCE						
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	
MICHAEL REAVES 1810 Broadway Dr GRAHAM, NC 27253			REAL ESTATE			
			c. Employer's Name/Specific Field			
			REAVES REAL ESTATE			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	AP2020	Credit Card		01/18/2024	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
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	
SHELBY SCALES 5918 Woodfield Estates Dr ALEXANDRIA, VA 22310			HOSPITALITY			
			c. Employer's Name/Specific Field			
			HMSHOST			
					e. Election Sum to Date	
					\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	AP2020	Credit Card		01/19/2024	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
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	
ARLENE THOMAS 624 Huntingdon St ELON, NC 27244			NO JOB TITLE OR PROFESSION			
			c. Employer's Name/Specific Field			
			NOT EMPLOYED			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	AP2020	Check		01/20/2024	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 450.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 3,350.00	

Contributions from Individuals

Pg 4 of 4

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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	
CITIZENS FOR ANTHONY PIERCE					
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
OMEGA WILSON PO BOX 461 MEBANE, NC 27243			NO JOB TITLE OR PROFESSION		
			c. Employer's Name/Specific Field		
			NOT EMPLOYED		
					e. Election Sum to Date
					\$ 100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	AP2020	Credit Card		01/30/2024	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 100.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 3,350.00

Contributions from Political Party Committees Pg 1 of 1

Amendment
 Yes No

Use this form to report contributions from a political party

1. Committee Full Name (and Fund if applicable)			2. ID Number	
CITIZENS FOR ANTHONY PIERCE				
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Comments	
NORTH CAROLINA DEMOCRATIC PARTY PO BOX 1926 RALEIGH, NC 27602				
			c. Election Sum to Date	
			\$ 788.00	
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount
AP2020	In-Kind	NC DEMOCRATIC PARTY MUNICIPAL VOTEBUILDER	01/11/2024	\$ 788.00
				\$
				\$
4. Total only this Page			\$ 788.00	
5. Total of ALL CRO-1220 Pages <i>(This line must be on line 7 of Detailed Summary Page CRO-1100)</i>			\$ 788.00	

Disbursements

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

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
CITIZENS FOR ANTHONY PIERCE					
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)					
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
JEAN-MYCHAL THORPE 1010 Lorraine Dr GRAHAM, NC 27253					
			c. Level Registered (Specify)		e. Election Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$ 500.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
AP2020	Check	E	02/04/2024	\$ 500.00	
				\$	
5. Total only this Page					\$ 500.00
6. Total of ALL CRO-1310 Pages <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>					\$ 500.00
7. Purpose Codes (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)					

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	
CITIZENS FOR ANTHONY PIERCE							
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	AP2020	Electric Funds Tran	O	01/04/2024	\$ 0.38	PAYMENT PROCESSING FEE	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	AP2020	Electric Funds Tran	O	01/04/2024	\$ 30.00	PAYMENT PROCESSING FEE	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	AP2020	Electric Funds Tran	O	01/05/2024	\$ 0.38	PAYMENT PROCESSING FEE	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	AP2020	Electric Funds Tran	O	01/10/2024	\$ 0.38	PAYMENT PROCESSING FEE	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	AP2020	Electric Funds Tran	O	01/18/2024	\$ 3.00	PAYMENT PROCESSING FEE	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	AP2020	Electric Funds Tran	O	01/22/2024	\$ 9.00	PAYMENT PROCESSING FEE	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	AP2020	Electric Funds Tran	O	01/23/2024	\$ 3.75	PAYMENT PROCESSING FEE	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	AP2020	Electric Funds Tran	O	01/24/2024	\$ 0.75	PAYMENT PROCESSING FEE	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	AP2020	Electric Funds Tran	O	02/01/2024	\$ 1.50	PAYMENT PROCESSING FEE	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	AP2020	Electric Funds Tran	O	02/07/2024	\$ 2.25	PAYMENT PROCESSING FEE	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	AP2020	Electric Funds Tran	O	02/12/2024	\$ 0.38	PAYMENT PROCESSING FEE	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	AP2020	Electric Funds Tran	O	01/04/2024	\$ 0.78	PAYMENT PROCESSING FEE	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	AP2020	Electric Funds Tran	O	01/04/2024	\$ 44.23	PAYMENT PROCESSING FEE	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	AP2020	Electric Funds Tran	O	01/05/2024	\$ 0.78	PAYMENT PROCESSING FEE	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	AP2020	Electric Funds Tran	O	01/10/2024	\$ 0.78	PAYMENT PROCESSING FEE	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	AP2020	Electric Funds Tran	O	01/18/2024	\$ 4.63	PAYMENT PROCESSING FEE	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	AP2020	Electric Funds Tran	O	01/22/2024	\$ 14.35	PAYMENT PROCESSING FEE	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	AP2020	Electric Funds Tran	O	01/23/2024	\$ 5.73	PAYMENT PROCESSING FEE	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	AP2020	Electric Funds Tran	O	01/24/2024	\$ 1.33	PAYMENT PROCESSING FEE	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	AP2020	Electric Funds Tran	O	02/01/2024	\$ 2.43	PAYMENT PROCESSING FEE	
4. Total only this Page					\$	126.81	
5. Total of ALL CRO-1315 Pages					\$	131.35	
<i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>							
6. Purpose Codes (List detailed expenditure code in (d) above)							
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* - Donations to Legal Expense Fund	
O* - Other							
* Codes require detailed explanation in required remarks field (g)							

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	
CITIZENS FOR ANTHONY PIERCE						
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	AP2020	Electric Funds Tran	O	02/07/2024	\$ 3.76	PAYMENT PROCESSING FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	AP2020	Electric Funds Tran	O	02/12/2024	\$ 0.78	PAYMENT PROCESSING FEE
4. Total only this Page					\$ 4.54	
5. Total of ALL CRO-1315 Pages <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>					\$ 131.35	
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)						

In-Kind Contributions

Pg 1 of 1

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

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.

Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
CITIZENS FOR ANTHONY PIERCE			
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
Aggregated Individual Contribution		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		d. Election Sum to Date	
		\$	35.00
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
SUBSCRIPTION FEE FOR CONSTANT CONTACT		01/18/2024	\$ 35.00
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
NORTH CAROLINA DEMOCRATIC PARTY PO BOX 1926 RALEIGH, NC 27602		<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input checked="" type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		d. Election Sum to Date	
		\$	788.00
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
NC DEMOCRATIC PARTY MUNICIPAL VOTEBUILDER		01/11/2024	\$ 788.00
			\$
			\$
4. Total only this Page		\$	823.00
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		\$	823.00