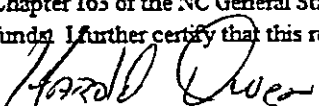
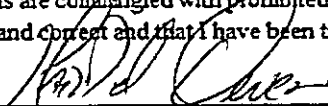
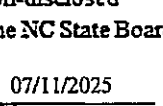


Disclosure Report Cover

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 HAROLD OWEN FOR BURLINGTON CITY COUNCIL			c. ID Number	
b. Mailing Address (include City, State and Zip Code) 223 ENGLEMAN AVENUE BURLINGTON, NC 27215			d. Date Filed 07/10/2025	
			e. Phone Number	
NC STATE BOARD OF ELECTIONS				
2. Report Year 2025	3. Period Start Date (mm/dd/yy) 12/31/2024	4. Period End Date (mm/dd/yy) 06/30/2025	5. Treasurer Full Name HAROLD OWEN	
6. Type of Committee (Check One) ☒ Candidate Campaign ☐ Party ☐ Joint Fundraiser ☐ PAC ☐ Referendum ☐ Legal Expense Fund		9. Type of Report (check only one type of report from one category)		
7. Type of Fund (if applicable, check one) ☐ "Booster Fund" ☐ Building Fund ☐ Presidential Election Year Candidates Fund ☐ NC Public Campaign Financing Fund ☐ Other:		Municipal ☐ Organizational ☐ Thirty-five day ☐ Pre-primary ☐ Pre-election ☐ Pre-runoff ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special	State/County ☐ Organizational ☐ Quarterly ☐ First ☐ Second ☐ Third ☐ Fourth ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special	Referendum ☐ Organizational ☐ Pre-referendum ☐ Final ☐ Supplemental Final ☐ Annual ☐ Special
8. Number of Fundraisers this Report 0		10. Special Report Name		
3. Account Information				
a. Financial Institution Full Name ATLANTIC UNION BANK		a. Financial Institution Full Name		
b. Purpose FOR CAMPAIGN RELATED ACTIVITY	c. Account Code 65532021	b. Purpose	c. Account Code	
	d. Period Begin Balance \$ 11,208.11		d. Period Begin Balance \$	
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				
 Printed Name of Signer		 Signature of Appointed Treasurer		 Date
FOR OFFICE USE ONLY				
Date Received:	07/15/2025	Employee	KJ	Delivery Method
Date Postmarked:	07/11/2025	Employee	KJ	☒ Normal Mail
Date Scanned:	07/18/2025	Employee	KJ	☐ 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
☐ Yes ☒ 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	
HAROLD OWEN FOR BURLINGTON CITY COUNCIL		2025 Mid Year Semi-Annual			
Start of Election Cycle: January 1, 2024		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 11,208.11		\$ 11,218.11	
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)		\$ 25.00		\$ 25.00	
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)		\$ 25.00		\$ 25.00	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 12.00		\$ 12.00	
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)		\$ 0.00		\$ 10.00	
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)		\$ 12.00		\$ 22.00	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 11,221.11		\$ 11,221.11	
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	

Contributions from Other Political Committees Pg 1 of 1

Amendment
☐ Yes ☒ No

Use this form to report contributions from other candidate, referendum or PAC committees

1. Committee Full Name (and Fund if applicable)			2. ID Number	
HAROLD OWEN FOR BURLINGTON CITY COUNCIL				
3. Contributor Information ☐ Add ☐ Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee		d. Comments
HAROLD OWEN FOR BURLINGTON CITY COUNCIL 223 ENGLEMAN AVENUE BURLINGTON, NC 27215		☒ Candidate ☐ PAC		
		☐ Referendum		
		c. Level Registered (Specify)		
		☐ Federal ☒ County		e. Election Sum to Date
		☐ State ☐ Municipality		
		Alamance		\$ 25.00
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
65532021	Check		06/24/2025	\$ 25.00
				\$
				\$
4. Total only this Page				\$ 25.00
5. Total of ALL CRO-1230 Pages (This line must be on line 8 of Detailed Summary Page CRO-1100)				\$ 25.00

CRO-1230

NC State Board of Elections

April 2007

Disbursements

Page 1 of 1

Amendment
☐ Yes ☒ No

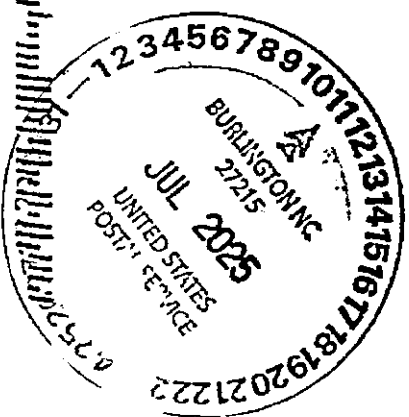
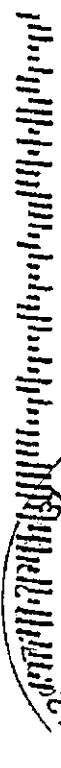
Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable) HAROLD OWEN FOR BURLINGTON CITY COUNCIL						2. ID Number	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.) ☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures							
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) ATLANTIC UNION BANK 3101 SOUTH CHURCH STREET BURLINGTON, NC 27215 (336) 538-1600				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 12.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
65532021	Draft	O	01/31/2025	\$ 2.00	BANK FEE		
65532021	Draft	O	02/28/2025	\$ 2.00	BANK FEE		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) ATLANTIC UNION BANK 3101 SOUTH CHURCH STREET BURLINGTON, NC 27215 (336) 538-1600				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 12.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
65532021	Draft	O	03/31/2025	\$ 2.00	BANK FEE		
65532021	Draft	O	04/30/2025	\$ 2.00	BANK FEE		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) ATLANTIC UNION BANK 3101 SOUTH CHURCH STREET BURLINGTON, NC 27215 (336) 538-1600				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 12.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
65532021	Draft	O	05/30/2025	\$ 2.00	BANK FEE		
65532021	Draft	O	06/30/2025	\$ 2.00	BANK FEE		
5. Total only this Page						\$ 12.00	
6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						\$ 12.00	
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(s)							

Harold Owen
223 Engleman Ave
Burlington, NC 27215

North Carolina State Board of Elections
PO Box 27255
Raleigh, NC 27611-7255

27611-627676



GREENSBORO
PIEDMONT TRIANGLE
11 JUL 2025

