

MOORE COUNTY
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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.

1. Committee Information

a. Full Name	RECEIVED SEP 27 2021 MOORE COUNTY		
Taylor Clement for Town Council	c. ID Number		
b. Mailing Address (include City, State and Zip Code)	d. Date Filed	9/27/2021	
115 NE Broad Street Southern Pines, NC 28387	e. Phone Number	910-603-6003	

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2021	08/25/2021	09/20/2021	Robert C. Carpenter

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 <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> Legal Expense Fund	Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input checked="" type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	State/County <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth Semi-annual <input checked="" type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	Referendum <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special
7. Type of Fund (if applicable, check one)	10. Special Report Name		
<input type="checkbox"/> Booster Fund <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:			
8. Number of Fundraisers this Report 0			

11. Account Information	11. Account Information
a. Financial Institution Full Name First Bank of North Carolina	a. Financial Institution Full Name
b. Purpose Campaign Account for Receipts and Expenditures	c. Account Code 1
d. Period Begin Balance \$ 500	b. Purpose
	c. Account Code
	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 of Elections.

Robert Carpenter

Printed Name of Signer

Signature of Appointed Treasurer

Date

9/27/21

FOR OFFICE USE ONLY

Date Received: <u>9-27-21</u>	Employee: <u>RC</u>	Delivery Method
Date Postmarked:	Employee:	<input type="checkbox"/> Normal Mail
Date Scanned:	Employee:	<input type="checkbox"/> Registered Mail
Date Data Entered:	Employee:	<input checked="" type="checkbox"/> Hand Delivered
		<input type="checkbox"/> Electronically Filed
		<input type="checkbox"/> 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.

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 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
Taylor Clement for Town Council	Pre-Primary	
Start of Election Cycle: January 1, 2021		Total this Reporting Period
4) Cash on Hand at Start	\$ 500	\$ 0
RECEIPTS		
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 75	\$ 75
6) Contributions from Individuals (CRO-1210)	\$ 2248	\$ 2811.85
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 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,11d and 11e)	\$ 2323	\$ 2886.85
EXPENDITURES		
13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$ 891.95	\$ 891.95
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$ 0	\$ 0
13c) Coordinated Party Expenditures (CRO-1310)	\$ 0	\$ 0
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)	\$ 48	\$ 111.85
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 939.95	\$ 1003.80
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 1883.05	\$ 1883.05
ADDITIONAL INFORMATION		
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)	\$	\$

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Aggregated Contributions from Individuals

Page

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Amendment

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

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Pg. 1 of 2

 Amendment
 Yes No

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			
Taylor Clement for Town Council					
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 Owner		d. Comments	
Virginia Gallagher 10 Carmelia Way Southern Pines, NC 28397		c. Employer's Name/Specific Field Hot Asana Yoga Studio		e. Election Sum to Date \$	
f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount					
<input type="checkbox"/>		Transfer		08/28/2021 \$ 500	
<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 Owner		d. Comments Candidate	
Taylor Clement 115 NE Broad Street Southern Pines, NC 28387 910-603-6003		c. Employer's Name/Specific Field Casino Guitars		e. Election Sum to Date \$ 106.85	
f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount					
<input type="checkbox"/>		In-Kind		Website Hosting 09/01/2021 \$ 48	
<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 Automotive		d. Comments	
Tom Holderfield 55 Walnut Creek Rd Pinehurst, NC 28374 910-692-2424		c. Employer's Name/Specific Field Pinehurst Toyota		e. Election Sum to Date \$	
f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount					
<input type="checkbox"/>		Check		08/26/2021 \$ 250	
<input type="checkbox"/>				\$	
<input type="checkbox"/>				\$	
4. Total only this Page \$ 798					
5. Total of ALL CRO-1210 Pages \$ 2248 <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>					

MOORE COUNTY

PURIFICATION

Pg. 2 of 2
 Amendment
 Yes No

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		
Taylor Clement for Town Council						
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 Insurance	d. Comments		
Jim Leach 115 Westgate Drive Pinehurst, NC 28374			c. Employer's Name/Specific Field State Farm	e. Election Sum to Date \$		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		Check		08/26/2021	\$ 250	
<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 Finance	d. Comments		
Christopher Hunt 460 S. Ashe Street Southern Pines, NC 28387			c. Employer's Name/Specific Field BBT Bank	e. Election Sum to Date \$		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Credit Card		09/20/2021	\$ 200	
<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 General Mgr	d. Comments		
Catherine J. Hadwin 460 Posada Dr Myrtle Beach, SC 29572			c. Employer's Name/Specific Field Hadwin-White GMC	e. Election Sum to Date \$		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		09/20/2021	\$ 1000	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page						\$ 1450
5. Total of ALL CRO-1210 Pages						\$ 2248
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

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Amendment
 Yes No

Disbursements

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					
Taylor Clement for Town Council							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<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			
PayPal							
		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:		\$			
f. Account Code		g. Form of Payment		h. Purpose Code			
1		Transfer		C			
				i. Date (mm/dd/yyyy)			
				09/20/2021			
				j. Amount			
				\$ 24.04			
				k. Required Remarks			
				Aggregate			
				Contribution Fees			
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			
www.signsonthecheap.com							
		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:		\$			
f. Account Code		g. Form of Payment		h. Purpose Code			
1		Credit		O			
				i. Date (mm/dd/yyyy)			
				09/18/2021			
				j. Amount			
				\$ 867.91			
				k. Required Remarks			
				Yard Signs			
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			
		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:		\$			
f. Account Code		g. Form of Payment		h. Purpose Code			
				i. Date (mm/dd/yyyy)			
				\$			
				\$			
5. Total only this Page		\$ 891.95					
6. Total of ALL CRO-1310 Pages		\$ 891.95					
(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)							
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)							

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Amendment

Yes

No

In-Kind Contributions

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	
Taylor Clement for Town Council			
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 <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
Taylor Clement 115 NE Broad Street Southern Pines, NC 28387		c. Comments d. Election Sum to Date \$ 106.85	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Website		09/01/2021	\$ 48
			\$
			\$
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 <input 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	
		c. Comments d. Election Sum to Date \$	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
			\$
			\$
			\$
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 <input 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	
		c. Comments d. Election Sum to Date \$	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
			\$
			\$
			\$
4. Total only this Page		\$	48
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed/Summary Page CRO-1100)		\$	48