

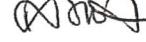
**MOORE COUNTY**  
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Amendment  
 Yes  No

**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			c. ID Number						
Taylor Clement for Town Council										
b. Mailing Address (include City, State and Zip Code)	JAN 11 2022			d. Date Filed						
115 NE Broad Street Southern Pines, NC 28387				01/05/2022						
				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	10/19/2021	12/31/2021	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		<table border="0" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">Municipal</td> <td style="width: 33%;">State/County</td> <td style="width: 33%;">Referendum</td> </tr> <tr> <td> <input type="checkbox"/> Organizational  <input type="checkbox"/> Thirty-five day  <input type="checkbox"/> Pre-primary  <input type="checkbox"/> Pre-election  <input type="checkbox"/> Pre-runoff  <input type="checkbox"/> Semi-annual  <input type="checkbox"/> Mid Year  <input checked="" type="checkbox"/> Year End  <input type="checkbox"/> Final  <input type="checkbox"/> Special         </td> <td> <input type="checkbox"/> Organizational  <input type="checkbox"/> Quarterly  <input type="checkbox"/> First  <input type="checkbox"/> Second  <input type="checkbox"/> Third  <input type="checkbox"/> Fourth  <input type="checkbox"/> Semi-annual  <input type="checkbox"/> Mid Year  <input checked="" type="checkbox"/> Year End  <input type="checkbox"/> Final  <input type="checkbox"/> Special         </td> <td> <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         </td> </tr> </table>			Municipal	State/County	Referendum	<input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input checked="" type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input checked="" type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<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
Municipal	State/County	Referendum								
<input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input checked="" type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input checked="" type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<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)										
<input type="checkbox"/> Booster Fund <input type="checkbox"/> Building Fund  <input type="checkbox"/> Other:										
8. Number of Fundraisers this Report										
1										
11. Account Information		11. Account Information								
a. Financial Institution Full Name		a. Financial Institution Full Name								
First Bank of North Carolina										
b. Purpose	c. Account Code	b. Purpose	c. Account Code							
Campaign Account for Receipts and Expenditures	1									
	d. Period Begin Balance									
	\$ 4277.80			\$						
<b>CERTIFICATION</b>										
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		<i>R.C. Carpenter</i>		12/31/21						
Printed Name of Signer		Signature of Appointed Treasurer		Date						
<b>FOR OFFICE USE ONLY</b>										
Date Received:	1-11-22	Employee:	 <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed							
Date Postmarked:		Employee:								
Date Scanned:		Employee:								
Date Data Entered:		Employee:	<input type="checkbox"/> Signer has not received mandatory training							
<b>Please Note:</b> 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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Amendment

Yes

No

**Detailed Summary**

Use this form to summarize all disclosure reporting forms and to total monetary information

<b>1. Committee Full Name (and Fund if applicable)</b>	<b>2. Type of Report</b>	<b>3. ID Number</b>
Taylor Clement for Town Council	Semi-Annual Yr End	
<b>Start of Election Cycle: January 1, 2021</b>		<b>Total this Reporting Period</b>
4) Cash on Hand at Start		\$ 4277.80
<b>RECEIPTS</b>		
5) Aggregated Contributions from Individuals <i>(CRO-I205)</i>	\$ 0	\$ 364
6) Contributions from Individuals <i>(CRO-I210)</i>	\$ 650	\$ 7352.07
7) Contributions from Political Party Committees <i>(CRO-I220)</i>	\$	\$
8) Contributions from Other Political Committees <i>(CRO-I230)</i>	\$ 0	\$ 500
9) Loan Proceeds <i>(CRO-I410)</i>	\$	\$
10) Refunds/Reimbursements to the Committee <i>(CRO-I240)</i>	\$	\$
11) Other Receipt Sources		
11a) Interest on Bank Accounts <i>(CRO-I250)</i>	\$	\$
11b) Contributions from Not-For-Profit Organizations <i>(CRO-I250)</i>	\$	\$
11c) Outside Sources of Income <i>(CRO-I250)</i>	\$	\$
11d) Legal Expense Fund - Other Sources <i>(CRO-I270)</i>	\$	\$
11e) Exempt Purchase Price Sales <i>(CRO-I265)</i>	\$	\$
12) <b>TOTAL RECEIPTS</b> (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)	\$ 650	\$ 7566.07
<b>EXPENDITURES</b>		
13) Disbursements		
13a) Operating Expenditures <i>(CRO-I310)</i>	\$ 2280.31	\$ 4352.51
13b) Contributions to Candidates/Political Committees <i>(CRO-I310)</i>	\$ 0	\$ 0
13c) Coordinated Party Expenditures <i>(CRO-I310)</i>	\$ 0	\$ 0
14) Aggregated Non-Media Expenditures <i>(CRO-I315)</i>	\$	\$
15) Loan Repayments <i>(CRO-I420)</i>	\$	\$
16) Refunds/Reimbursements from the Committee <i>(CRO-I320)</i>	\$	\$
17) In-Kind Contributions <i>(CRO-I510)</i>	\$ 0	\$ 1216.07
18) <b>TOTAL EXPENDITURES</b> (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 2280.31	\$ 5568.58
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 2647.49	\$ 2647.49
<b>ADDITIONAL INFORMATION</b>		
20) Non-Monetary Gifts Given to Other Committees <i>(CRO-I330)</i>	\$	
21) Outstanding Loans (incl. ones from other campaigns) <i>(CRO-I430)</i>	\$	
22) Debts and Obligations owed by the Committee <i>(CRO-I610)</i>	\$	
23) Debts and Obligations owed to the Committee <i>(CRO-I620)</i>	\$	
24) Account Transfers Within the Committee <i>(CRO-I720)</i>	\$	
25) Administrative Support <i>(CRO-I710)</i>	\$	\$
26) Forgiven Loans <i>(CRO-I440)</i>	\$	\$
27) 48-Hour Notice Reports Sum <i>(CRO-2220)</i>	\$	\$
28) Contributions to be Refunded <i>(CRO-I215)</i>	\$	\$

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Amendment

Pg 1 of 2  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

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
Taylor Clement for Town Council					
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  Adam P. Kiker 140 Aquashed Cr Aberdeen, NC 28315			<b>b. Job Title/Profession</b>  Engineer	<b>d. Comments</b>  LKC Engineering	
			<b>c. Employer's Name/Specific Field</b>  LKC Engineering	<b>e. Election Sum to Date</b>  \$ 200	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	1	Check		10/22/2021	\$ 200
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  Lacy Wright Jr. 1620 E. Hedgelawn Way Southern Pines, NC 28387			<b>b. Job Title/Profession</b>  Unemployed	<b>d. Comments</b>  Politics	
			<b>c. Employer's Name/Specific Field</b>  Politics	<b>e. Election Sum to Date</b>  \$ 100	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	1	Check		11/01/2021	\$ 100
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  Kathy Virtue PO Box 2147 Southern Pines, NC 28388			<b>b. Job Title/Profession</b>  Self Employed	<b>d. Comments</b>  Marketing	
			<b>c. Employer's Name/Specific Field</b>  Marketing	<b>e. Election Sum to Date</b>  \$ 100	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	1	Check		10/24/2021	\$ 100
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>4. Total only this Page</b> \$ 400					
<b>5. Total of ALL CRO-1210 Pages</b> \$ 650 <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>					

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Amendment  
Pg 2 of 2  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

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
Taylor Clement for Town Council					
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>		<b>b. Job Title/Profession</b> Head of School		<b>d. Comments</b>	
Katherine Rucker 236 N. Ridge Street Southern Pines, NC 28387		<b>c. Employer's Name/Specific Field</b> Moore Montessori Community School		<b>e. Election Sum to Date</b> \$ 250	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	1	Check		10/28/2021	\$ 250
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>		<b>b. Job Title/Profession</b> 		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> 		<b>e. Election Sum to Date</b> \$	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>		<b>b. Job Title/Profession</b> 		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> 		<b>e. Election Sum to Date</b> \$	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>4. Total only this Page</b>					\$ 250
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 650

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Pg

1

of

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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

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
Taylor Clement for Town Council			
<b>3. Type of Disbursement</b> <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			
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	
Print Place www.PrintPlace.com		d. Comments e. Election Sum to Date \$ 1145.78	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)
1	Check	B	10/24/2021
			\$ 1145.78
			Mailed Post Cards and Election Day Palm Cards
<b>4. Payee Information</b> In-Kind <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	
Talk Radio 990 WEEB PO Box 1855 Southern Pines, NC 28387		d. Comments e. Election Sum to Date \$ 402	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)
1	Check	A	10/25/2021
			\$ 402
			Radio Advertising
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	
The Pilot 145 W. Pennsylvania Ave Southern Pines, NC 28387		d. Comments e. Election Sum to Date \$ 1320	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)
1	Check	A	10/28/2021
			\$ 280
			Newspaper Ad
<b>5. Total only this Page</b>			
\$ 1827.78			
<b>6. Total of ALL CRO-1310 Pages</b>			
\$ 2280.31			
<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>			
<b>7. Purpose Codes</b> (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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Pg 2 of 2

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

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>				
Taylor Clement for Town Council						
<b>3. Type of Disbursement</b> <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						
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)  So Pies Pizzeria 130 W. New Hampshire Ave Southern Pines, NC 28387		b. Coordinated Committee Name  c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		d. Comments		
				\$ 77.27		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Check	O	11/02/2021	\$ 77.27	Election Night Food for Volunteers	
				\$		
<b>4. Payee Information</b> In-Kind <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)  Hobby Lobby 160 Brucewood Rd Southern Pines, NC 28387		b. Coordinated Committee Name  c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		d. Comments		
				\$ 125.26		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Check	O	10/25/2021	\$ 125.26	Election Day Shirts	
				\$		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)  Derrick Numbers 120 James Creek Rd Southern Pines, NC 28387		b. Coordinated Committee Name  c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		d. Comments		
				\$ 250		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Transfer	A	10/25/2021	\$ 250	Photos and Video	
				\$		
<b>5. Total only this Page</b>						\$ 452.53
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 2280.31
(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)						
<b>7. Purpose Codes</b> (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)						