

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

DRUM FOR MAYOR

c. ID Number

b. Mailing Address (include City, State and Zip Code)

41 SHAW RD SW
PINELAKE, NC 28374

d. Date Filed

7/28/23

e. Phone Number

910-603-0427

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2023	6/6/2023	6/30/2023	KEVIN DRUM

6. Type of Committee (Check One)

Candidate Campaign Party
 PAC Referendum
 Independent Expenditure Joint Fundraiser
 Legal Expense Fund

7. Type of Fund (if applicable, check one)

Booster Fund
 Building Fund
 Other:

8. Number of Fundraisers this Report

0

9. Type of Report (check only one type of report from one category)

Municipal	State/County	Referendum
<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
<input checked="" type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
<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	

10. Special Report Name

11. Account Information

a. Financial Institution Full Name

FIRST CITIZENS BANK

b. Purpose

CONTRIBUTIONS
&
EXPENSES

c. Account Code

1A

d. Period Begin Balance

\$ 0

11. Account Information

a. Financial Institution Full Name

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.

KEVIN DRUM

Printed Name of Signer

KEN DR

Signature of Appointed Treasurer

7/28/23

Date

FOR OFFICE USE ONLY

Date Received:

7/28/2023

Employee:

TD

Delivery Method

Normal Mail
 Registered Mail
 Hand Delivered
 Electronically Filed

Date Postmarked:

Employee:

Signer has not received
mandatory training

Date Scanned:

Employee:

Date Data Entered:

Employee:

RECEIVED

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.

MOOREBOE

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
DRUM FOR MAYOR	2023 MID-YEAR SEMI-ANNUAL	
Start of Election Cycle: January 1, 2023	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	\$	\$
RECEIPTS		
5) Aggregated Contributions from Individuals (CRO-1205)	\$	\$
6) Contributions from Individuals (CRO-1210)	\$ 2500.00	\$
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)	\$	\$
EXPENDITURES		
13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$ 79.30	\$
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$	\$
13c) Coordinated Party Expenditures (CRO-1310)	\$	\$
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)	\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 79.30	\$
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 2420.70	\$
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)	\$ JUL 28 2023	\$
26) Forgiven Loans (CRO-1440)	\$	
27) 48-Hour Notice Reports Sum (CRO-2220)	\$	\$
28) Contributions to be Refunded (CRO-1215)	\$	\$

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	
<i>DRUM FOR MAYOR</i>							
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		
<i>FIRST CITIZENS BANK 40 PAGE CIRCLE PINEHURST, NC 28374</i>							
c. Level Registered (Specify)							
<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:					e. Election Sum to Date		
					\$ <i>79.30</i>		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
IA	DRAFT	K	6/29/23	\$ 79.30	CHECKS		
				\$			
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)	j. Amount	k. Required Remarks		
				\$			
				\$			
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)	j. Amount	k. Required Remarks		
				\$			
				\$			
5. Total only this Page							\$ <i>79.30</i>
6. Total of ALL CRO-1310 Pages							\$ <i>79.30</i>
<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>							
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>							
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)							

Contributions from Individuals

Pg ____ of ____

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	
DRUM FOR MAYOR						
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		
KEVIN DRUM 41 SHAW RD SW PINEHURST, NC 28374			OWNER			
c. Employer's Name/Specific Field			SELF			
				e. Election Sum to Date		
				\$ 2500		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A1	CHECK		6/23/23	\$ 2500	
<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		
c. Employer's Name/Specific Field						
				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"/>					\$	
<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		
c. Employer's Name/Specific Field						
				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"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page						
\$ 2500						
5. Total of ALL CRO-1210 Pages						
(\$ This line must be on line 6 of Detailed Summary Page CRO-1100)						
\$ 2500						