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.

Do not use this form to update information.								
1. Committee Information								
a. Full Name					c. ID Number			
Tasherra Nichols For Mayor								
b. Mailing Address (include City, State	and Zip Code)		0	-UEIVE	d. Date Filed			
547 Conthac				ll n	1/23/21			
Cameron L	1628	326		UL 2 2 2021	e. Phone Number 910 759 32 90			
2. Report Year 3. Period Start			nd Date (mm/de	d/yy) 5. Treasure	THE RESERVE THE PROPERTY OF THE PERSON OF TH			
2021 7-15-21 7-23-21 David mc Duffie								
6. Type of Committee (Check O					rt from one category)			
Candidate Campaign Party		ınicipal	State/Co		Referendum			
	rendum 🗓	Organizational		ganizational	Organizational			
Independent Expenditure 🔲 Joint	Fundraiser	Thirty-five day	Qua	arterly	Pre-referendum			
Legal Expense Fund		Pre-primary		First	Final			
		Pre-election		Second	Supplemental Final			
7. Type of Fund (if applicable,	check one)	Pre-runoff		Third	Annual			
Booster Fund		Semi-annual		Fourth	Special			
Building Fund		Mid Year	Sen	ni-annual				
		Year End		Mid Year	10. Special Report Name			
Other:		Final		Year End				
8. Number of Fundraisers this	Report	Special	Fin	al				
			☐ Spe	ecial	=			
11. Account Information			11. Account I					
a. Financial Institution Full Name								
a. Financial Institution Full Name a. Financial Institution Full Name Name Usedif Union								
b. Purpose	c. Account Code	OTHOR	b. Purpose		c. Account Code			
, Luxpose y								
	1							
	d. Period Begin Balance			d. Period Begin Balance				
	\$ 0				\$			
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.								
Printed Name of Sign	er Unite	Sig	nature of Appointe	ed Treasurer	Date			
FOR OFFICE USE ONLY								
\cap	-32.21		OM	De	livery Method			
Date Received:	0000	Employ	yee:		Normal Mail			
Date Postmarked:	Hand Delivered							
Date Scanned:		Employee:			Electronically Filed			
Date Data Entered:		Emplo	yee:		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.								

Amendment **Detailed Summary** ☐ Yes No 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 askem Total this Total this Start of Election Cycle: January 1. Reporting Period **Election Cycle** 4) Cash on Hand at Start 0 \$ RECEIPTS 5) Aggregated Contributions from Individuals (CRO-1205) 6) Contributions from Individuals DU DO (CRO-1210) \$ 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) 00 **EXPENDITURES** 13) Disbursements 13a) Operating Expenditures (CRO-1310) \$ \$ 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) 5,00 \$ 5,00 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) \$ 5.00 5.00 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) 20.00 \$ 20,00 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) \$

CRO-1100

25) Administrative Support

27) 48-Hour Notice Reports Sum

28) Contributions to be Refunded

26) Forgiven Loans

NC State Board of Elections

\$

\$

\$

(CRO-1710)

(CRO-1440)

(CRO-2220)

(CRO-1215)

\$

\$

\$

\$

Contributions from Individuals Pg of Use this form to report individual contributions over \$50 or contributions under \$50 if form						Amendment Yes No 20 1205 is not used	
SHIP OF THE SHIP O	mittee Full Nam	2. ID Number					
3. Contributor Information				Add Remove			
a. Full Name, Mailing Address & Phone			b. Job Title/Profession		d. Comments		
(include city, state, & zip)			Tech	_	_M1 1		
David McDuffie				c. Employer's Nar	ne/Specific Field		
3	610 5	turbrio	Sex Dr	Unilever		e. Election Sum to Date	
3610 Sturbridge Dr Hope Mills NC			<u> </u>	EVG	\$ 5,00		
	g. Account Code	h. Form of Payment	i. In-Kind Descrip		j. Date (mm/dd/yyy		
			Filing	tee	7-15-3	1 \$ 5,00	
						\$	
				**		\$	
	ributor Informa			Add Ren	nove		
(1) The Balting Co.	ame, Mailing Addre e city, state, & zip)			b. Job Title/Profes	ssion	d. Comments	
D	of MAG	Duffie		Tech		=	
20	13. d	sch - de	o de il	c. Employer's Nar	ne/Specific Field		
36	10 500	11 11 11	0 0, 196	11.1		e. Election Sum to Date	
(include city, state, & zip) David McDuffic 3610 Sturbridge drive Hope mills NC			Ovilever		\$ 20.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy		
	١	Color	Doratio.	J	7.22.	21 \$ 20,00	
						\$	
	1,000	500 Tr g			*)	\$	
	ributor Informa			Add Rei			
A CONTROL OF THE OWNER OWNER OF THE OWNER	ame, Mailing Addro le city, state, & zip)			b. Job Title/Profe	ssion	d. Comments	
						200	
				c. Employer's Nar	ne/Specific Field		
						e. Election Sum to Date	
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f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy	yy) k. Amount	
						\$	
						\$	
						\$	
4. Total only this Page \$						\$ 25.00	
	al of ALL Cl	\$ 25.00					

In-Kind Contributions	P			Amendment Yes 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. I	D Number				
Tasherm Nichola for 1	Vayor							
3. Contributor Information	Add R	emove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Cont	ributor	c. Co	omments				
(metute cny, state, & zip)	Individual Candidate							
David (VIS) who	Party							
3610 Sturbridge Dr	PAC Referendum		4 170	landing G				
Hope M. Dla 18	Other Receipt Source			d. Election Sum to Date				
e. Description		f. Date (mm/dd/yy	1 3	g. Foir Morket Amount				
Tilliam to		1. Date (mindu/yy	7.1	g. Fair Market Amount \$ 500				
TUNG TEE	<u> </u>	1773-6	× 1	* 5.00				
				\$				
			-57	\$				
3. Contributor Information	Add R			THE RESERVE OF THE PARTY OF THE				
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Conti	ributor	c. Co	omments				
	Candidate							
_	Party		-					
	PAC Referendum		d. El	ection Sum to Date				
	Other Recei	pt Source	\$					
e. Description		f. Date (mm/dd/yy)		g. Fair Market Amount				
		i. Date (iiiii/dd/yy)	уу)					
				\$				
				\$				
	100			\$				
3. Contributor Information		emove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contr	ibutor	c. Co	omments				
(and the same)	Candidate							
	Party							
	PAC Referendum		d El	ection Sum to Date				
	Other Recei		\$	central built to Date				
e. Description		f. Date (mm/dd/yy	<u> </u>	g. Fair Market Amount				
		in Dute (initia day);	137	\$				
	<u>.</u>			\$				
	\\							
4 Total cult this D				\$				
4. Total only this Page			\$	5.00				
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)	\$	\$ 5.00						