

# 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

<b>1. Committee Information</b>	
a. Full Name Committee to elect Kevin S. Gordon	c. ID Number
b. Mailing Address (include City, State and Zip Code) Post Office Box 340 Waco, NC 28169-0340	d. Date Filed 07/10/2024
	e. Phone Number (704) 470-5378

2. Report Year 2024	3. Period Start Date (mm/dd/yy) 02/18/2024	4. Period End Date (mm/dd/yy) 06/30/2024	5. Treasurer Full Name Kevin (Alex) Gordon
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<b>6. Type of Committee (Check One)</b>		<b>9. Type of Report (check only one type of report from one category)</b>		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<b>Municipal</b>	<b>State/County</b>	<b>Referendum</b>
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-election	<input checked="" type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
<input type="checkbox"/> Other:		<input 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	

<b>11. Account Information</b>		<b>11. Account Information</b>	
a. Financial Institution Full Name Fidelity Bank	b. Purpose campaign exp	a. Financial Institution Full Name	b. Purpose
c. Account Code KSG-1	d. Period Begin Balance \$ 8441.27	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 S. Gordon Printed Name of Signer      [Signature] Signature of Appointed Treasurer      10/29/24 Date

**FOR OFFICE USE ONLY**

Date Received: <u>11/05/24</u>	Employee: <u>calysesates</u>	<b>Delivery Method</b> <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training
Date Postmarked: _____	Employee: _____	
Date Scanned: _____	Employee: _____	
Date Data Entered: _____	Employee: _____	

**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		
<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/> 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	
Committee to elect Kevin S. Gordon		2024 Second Qtr.		
<b>Start of Election Cycle: January 1, 2024</b>		<b>Total this Reporting Period</b>	<b>Total this Election Cycle</b>	
4) Cash on Hand at Start		\$ 8441.27	\$ 8441.27	
5) Aggregated Contributions from Individuals (CRO-1205)		\$	\$	
6) Contributions from Individuals (CRO-1210)		\$ 9200.00	\$ 20580.69	
7) Contributions from Political Party Committees (CRO-1220)		\$	\$	
8) Contributions from Other Political Committees (CRO-1230)		\$	\$	
9) Loan Proceeds (CRO-1410)		\$ 12000.00	\$ 12000.00	
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)		\$	\$	
11 e) Exempt Purchase Price Sales (CRO-1265)		\$	\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 21200.00	\$ 32580.69	
13) Disbursements				
13a) Operating Expenditures (CRO-1310)		\$ 28335.26	\$ 29034.96	
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)		\$ 0.00	\$ 10680.99	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 28335.26	\$ 39715.95	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 1306.01	\$ 1306.01	
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)		\$	\$	

# 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	
Committee to elect Kevin S. Gordon					KSG-1	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Stuart LeGrand 615 Grace Street Shelby NC 28150			Self			
			c. Employer's Name/Specific Field			
			Retired			
					e. Election Sum to Date	
					\$ 1000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	KSG-1	Check		02/27/2024	\$ 1000.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Mike Philbeck 1805 Arbor Way Drive Shelby, NC 28150			Self			
			c. Employer's Name/Specific Field			
			Real Estate			
					e. Election Sum to Date	
					\$ 450.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	KSG-1	Check		02/15/2024	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Kevin Gordon PO Box 340 Waco NC 28169			Self			
			c. Employer's Name/Specific Field			
			Retired			
					e. Election Sum to Date	
					\$ 3000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	KSG-1	CC		03/08/2024	\$ 3000.00	
<input type="checkbox"/>	KSG-1	CC		03/08/2024	\$ 2000.00	
<input type="checkbox"/>					\$	
					\$ 6200.00	
					\$ 9200.00	

# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

Committee to elect Kevin S. Gordon					KSG-1
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> <small>(include city, state, &amp; zip)</small> Sherry Gordon PO Box 340 Waco NC 28169		<b>b. Job Title/Profession</b> School Teacher	<b>d. Comments</b>		
		<b>c. Employer's Name/Specific Field</b> Cleveland County Schools	<b>e. Election Sum to Date</b> \$ 3000.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	KSG-1	CC		03/08/2024	\$ 3000.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> <small>(include city, state, &amp; zip)</small>		<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> \$		
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"/>					\$
<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> <small>(include city, state, &amp; zip)</small>		<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> \$		
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"/>					\$
<b>Total</b> \$ 3000.00					
<b>Total</b> \$ 9200.00					

# Loan Proceeds

Amendment	
<input type="checkbox"/> Yes	<input type="checkbox"/> No

Use this form to report proceeds from a loan and loan endorser's information  
 A loan proceeds statement must accompany each loan that is from an individual

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
Committee to elect Kevin S. Gordon					
<b>3. Lender Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Kevin S. Gordon PO Box 340 Waco NC 28169		Self			
		<b>c. Employer's Name/Specific Field</b>		<b>e. Start Date (mm/dd/yyyy)</b>	
		Retired		03/08/2024	
				<b>f. End Date (mm/dd/yyyy)</b>	
<b>g. Rate</b>	<b>h. Security Pledged</b>	<b>i. Account Code</b>	<b>j. Form of Payment</b>	<b>k. Amount</b>	
0 %		KSG-1	Debit	\$ 12000.00	
<b>l. Full Name of Lending Institution</b>				<b>m. Loan Number</b>	
Kevin S. Gordon				02	
<b>4. CO-SIGNERS (The people who guarantee the loan)</b>					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
		<b>d. Percentage</b>		<b>e. Amount</b>	
		%		\$	
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
		<b>d. Percentage</b>		<b>e. Amount</b>	
		%		\$	
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
		<b>d. Percentage</b>		<b>e. Amount</b>	
		%		\$	
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
		<b>d. Percentage</b>		<b>e. Amount</b>	
		%		\$	
				<b>\$ 10000.00</b>	

# Disbursements

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

Committee to elect Kevin S. Gordon

Operating Expenses  Contributions to Candidates/Political Committees  Coordinated Party Expenditures

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Facebook 1 Hacker Way Memlo Park, CA 94025		<b>b. Coordinated Committee Name</b> _____	<b>d. Comments</b> _____
<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b> \$ 785.00	

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
KSG-1	CC	A	02/21/2024	\$10.49	Advertisements
KSG-1	CC	A	02/21/2024	\$208.07	Advertisements

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Facebook 1 Hacker Way Memlo Park, CA 94025		<b>b. Coordinated Committee Name</b> _____	<b>d. Comments</b> _____
<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b> \$ 785.00	

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
KSG-1	CC	A	02/21/2024	\$225.90	Advertisements
KSG	CC	A	02/28/2024	\$169.51	

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Constant Contact 5001 Celebration Pointe Avenue Gainesville, FL 32601		<b>b. Coordinated Committee Name</b> _____	<b>d. Comments</b> _____
<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b> \$ 1740.00	

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
KSG-1	CC	O	03/07/2024	\$145.00	Email Service
KSG-1	CC	O	04/08/2024	\$145.00	Email Service

**\$ 903.97**

*(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)*

**\$ 28335.26**

- |                      |                             |  |
|----------------------|-----------------------------|--|
| <b>B* - Printing</b> | <b>C* - Fundraising</b>     | <b>D - To Another Candidate</b>            |
| <b>E - Salaries</b>  | <b>G - Political Party</b>  | <b>H* - Holding Public Office</b>          |
| <b>J - Penalties</b> | <b>K* - Office Expenses</b> | <b>Q* - Donation to Legal Expense Fund</b> |

# 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
Committee to elect Kevin S. Gordon					
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 checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, &amp; zip)</i>			b. Coordinated Committee Name		d. Comments
Headrick Outdoor Media One Freedom Square Laurel, Mississippi 39440					
			c. Level Registered (Specify)		e. Election Sum to Date
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 1100.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
KSG-1	CC	A	03/11/2024	\$550.00	Advertisements
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, &amp; zip)</i>			b. Coordinated Committee Name		d. Comments
KTC Broadcasting PO Box 415 Cherryville NC 28021					
			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:		\$ 965.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
KSG-1	Check	A	03/04/2024	\$165.00	Advertisements
KSG-1	Check	A	03/12/2024	\$400.00	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, &amp; zip)</i>			b. Coordinated Committee Name		d. Comments
KTC Broadcasting PO Box 415 Cherryville NC 28021					
			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:		\$ 965.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
KSG-1	Check	A	04/17/2024	\$400.00	
				\$	
					\$ 1515.00
(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)					\$ 28335.26
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					

# 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>
Committee to elect Kevin S. Gordon					
<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 checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
Majority Strategies LLC PO Box 679219 Dallas Tx 75267-9219					
			<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 17435.04
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>
KSG-1	Check	A	03/13/2024	\$17435.04	Advertisements
				\$	
<b>5. Payee Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
Capitol Communications PO Box 12107 Raleigh NC 27605					
			<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 2636.00
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>
KSG-1	Check	O	02/28/2024	\$2636.00	Consulting
				\$	
<b>6. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
Constant Contact 5001 Celebration Pointe Avenue Gainesville, FL 32601					
			<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 1740.00
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>
KSG-1	CC	O	05/07/2024	\$145.00	Email Service
KSG-1	CC	O	06/07/2024	\$145.00	Email Service
					\$ 20361.04
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>					\$ 28335.26
<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. Disbursement Code</b> (Use the following codes to describe the expenditure made in (f) above)					
<b>A</b> - Media	<b>B*</b> - Printing	<b>C*</b> - Fundraising		<b>D</b> - To Another Candidate	
<b>E</b> - Salaries	<b>F*</b> - Equipment	<b>G</b> - Political Party		<b>H*</b> - Holding Public Office Expenses	
<b>F</b> - Travel	<b>J</b> - Penalties	<b>K*</b> - Office Expenses		<b>Q*</b> - Donation to Legal Expense Fund	
<b>O*</b> - Other					



# 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>
Committee to elect Kevin S. Gordon					
<b>3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)</b>					
<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 checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
Westmoreland Printers 220 E Dixon Blvd Shelby NC 28150					
			<b>c. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					<b>e. Election Sum to Date</b>
					\$ 2029.48
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>
KSG-1	Check	A	02/13/2024	\$1590.00	Advertisements
KSG-1	Check	A	02/23/2024	\$439.48	Advertisements
<b>5. Payee Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
FLS Connect LLC 7300 Hudson Blvd, Suite 270 Saint Paul					
			<b>c. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					<b>e. Election Sum to Date</b>
					\$ 3195.77
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>
KSG-1	CC	A	02/29/2024	\$1634.64	Advertisements
KSG-1	CC	A	03/05/2024	\$1561.13	Advertisements
<b>6. Payee Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
Strategy Performance PO Box 8950 Rocky Mount NC 27804					
			<b>c. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					<b>e. Election Sum to Date</b>
					\$ 330.00
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>
KSG-1	Check	O	02/26/2024	\$330.00	Email Service
				\$	
					\$ 5555.25
<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>					\$ 28335.26
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					
<b>A - Media</b>	<b>B* - Printing</b>	<b>C* - Fundraising</b>		<b>D - To Another Candidate</b>	
<b>E - Salaries</b>	<b>F* - Equipment</b>	<b>G - Political Party</b>		<b>H* - Holding Public Office Expenses</b>	
<b>F - Postage</b>	<b>J - Penalties</b>	<b>K* - Office Expenses</b>		<b>Q* - Donation to Legal Expense Fund</b>	
<b>O - Other</b>					