

# Disclosure Report Cover

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

<b>2. Report Year</b> 2024	<b>3. Report Start Date (mm/dd/yyyy)</b> 02/18/2024	<b>4. Report End Date (mm/dd/yyyy)</b> 06/30/2024	<b>5. Treasurer Full Name</b> Kevin (Alex) Gordon
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<b>6. Type of Committee (Check One)</b>		<b>7. Type of Election</b>		<b>8. Type of Fund</b>	
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<input type="checkbox"/> Municipal	<input type="checkbox"/> State/County	<input type="checkbox"/> "Booster Fund"	<input type="checkbox"/> Other:
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Building Fund	
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> "Other"	
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First		
		<input type="checkbox"/> Pre-election	<input checked="" type="checkbox"/> Second		
		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third		
		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth		
		<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		

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<b>9. Account Information</b>		<b>10. Account Information</b>	
<b>a. Financial Institution Full Name</b> Fidelity Bank		<b>a. Financial Institution Full Name</b>	
<b>b. Purpose</b> campaign exp	<b>c. Account Code</b> KSG-1	<b>b. Purpose</b>	<b>c. Account Code</b>
	<b>d. Period Begin Balance</b> \$ 8441.27		<b>d. Period Begin Balance</b> \$

**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 Alexander Gordon Printed Name of Signer  
[Signature] Signature of Appointed Treasurer  
07/10/24 Date

<b>FOR OFFICE USE ONLY</b>			
Date Received:	<u>7-22-24</u>	Employee:	<u>AG</u>
Date Postmarked:	_____	Employee:	_____
Date Scanned:	_____	Employee:	_____
Date Data Entered:	_____	Employee:	_____

**Delivery Method**

Normal Mail

Registered Mail

Hand Delivered

Electronically Filed

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.

# 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. Reporting Period	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)		\$ 29641.27	\$ 41021.96	
13) Disbursements				
13a) Operating Expenditures (CRO-1310)		\$ 28335.26	\$ 31646.98	
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	\$ 42327.97	
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)		\$	\$	

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# 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"/>					\$	
4. Total only this Page						\$ 6200.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Drawn Summary Page CRO-1210)</i>						\$ 9200.00

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# 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						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Sherry Gordon PO Box 340 Waco NC 28169			School Teacher			
			c. Employer's Name/Specific Field			
			Cleveland County Schools			
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"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information						
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						
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						\$ 3000.00
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 6 of Detailed Statement Page CRO-1210)</small>						\$ 9200.00

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# 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>			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Kevin S. Gordon PO Box 340 Waco NC 28169	<b>b. Job Title/Profession</b> Self		<b>d. Comments</b>
	<b>c. Employer's Name/Specific Field</b> Retired		<b>e. Start Date (mm/dd/yyyy)</b> 03/08/2024
			<b>f. End Date (mm/dd/yyyy)</b>
<b>g. Rate</b> 0 %	<b>h. Security Pledged</b>	<b>i. Account Code</b> KSG-1	<b>j. Form of Payment</b> Debit
			<b>k. Amount</b> \$ 12000.00
<b>l. Full Name of Lending Institution</b> Kevin S. Gordon			<b>m. Loan Number</b> 02
<b>4. Endorsers/Makers</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>5. Total of ALL CRO-1410 Pages</b>			<b>\$ 10000.00</b>

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**Disbursements**

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

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 (Please use separate CRO-1100 for each type of disbursement)					
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures	
4. Payee Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Facebook 1 Hacker Way Memlo Park, CA 94025					
		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:		\$ 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
4. Payee Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Facebook 1 Hacker Way Memlo Park, CA 94025					
		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:		\$ 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	
4. Payee Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Constant Contact 5001 Celebration Pointe Avenue Gainesville, FL 32601					
		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:		\$ 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
5. Total only this Page					\$ 903.97
6. Total of ALL CRO-1100 Pages					\$ 28335.26
(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 (c) also)					
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					

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**Disbursements**

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

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 (Please use separate CRO-1100 for each type of Disbursement)					
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures	
4. Payee Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Headrick Outdoor Media One Freedom Square Laurel, Mississippi 39440		b. Coordinated Committee Name		d. Comments	
		c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				e. Election Sum to Date \$ 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					
a. Full Name, Mailing Address & Phone (include city, state, & zip) KTC Broadcasting PO Box 415 Cherryville NC 28021		b. Coordinated Committee Name		d. Comments	
		c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				e. Election Sum to Date \$ 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					
a. Full Name, Mailing Address & Phone (include city, state, & zip) KTC Broadcasting PO Box 415 Cherryville NC 28021		b. Coordinated Committee Name		d. Comments	
		c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				e. Election Sum to Date \$ 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	
				\$	
5. Total only this Page					\$ 1515.00
6. Total of ALL CRO-1100 Pages					\$ 28335.26
(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					
8. Codes require detailed explanation in required remarks					

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# Disbursements

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

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 (Please use separate CRO-1310 for each type of disbursement)					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
4. Payee Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Majority Strategies LLC PO Box 679219 Dallas Tx 75267-9219		b. Coordinated Committee Name		d. Comments	
		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:		\$ 17435.04	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
KSG-1	Check	A	03/13/2024	\$17435.04	Advertisements
				\$	
4. Payee Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Capitol Communications PO Box 12107 Raleigh NC 27605		b. Coordinated Committee Name		d. Comments	
		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:		\$ 2636.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
KSG-1	Check	O	02/28/2024	\$2636.00	Consulting
				\$	
4. Payee Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Constant Contact 5001 Celebration Pointe Avenue Gainesville, FL 32601		b. Coordinated Committee Name		d. Comments	
				CLEVELAND COUNTY BOE JUL 22 '24 AM 10:51	
		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:		\$ 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	05/07/2024	\$145.00	Email Service
KSG-1	CC	O	06/07/2024	\$145.00	Email Service
5. Total only this Page					\$ 20361.04
6. Total of ALL CRO-1310 Pages					\$ 28335.26
(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 (incl) box)					
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

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

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 (Please use Summary CRO-1100 forms for all multiple disbursements)					
<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"/> Re-add					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Westmoreland Printers 220 E Dixon Blvd Shelby NC 28150					
		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:		\$ 2029.48	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
KSG-1	Check	A	02/13/2024	\$1590.00	Advertisements
KSG-1	Check	A	02/23/2024	\$439.48	Advertisements
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Re-add					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
FLS Connect LLC 7300 Hudson Blvd, Suite 270 Saint Paul					
		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:		\$ 3195.77	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
KSG-1	CC	A	02/29/2024	\$1634.64	Advertisements
KSG-1	CC	A	03/05/2024	\$1561.13	Advertisements
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Re-add					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Strategy Performance PO Box 8950 Rocky Mount NC 27804				CLEVELAND COUNTY BOE JUL 22 '24 AM 10:51	
		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:		\$ 330.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
KSG-1	Check	O	02/26/2024	\$330.00	Email Service
				\$	
5. Total only this Page					\$ 5555.25
6. Total of ALL CRO-1100 Pages					\$ 28335.26
(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 (Use is defined expenditure code in (6) 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					