

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	c. ID Number
COMMITTEE TO ELECT CHARLES EVANS	
b. Mailing Address (include City, State and Zip Code)	d. Date Filed
6720 - 1 WILLOWBROOK DR UNIT 1 FAYETTEVILLE, NC 28314	02/09/2022
	e. Phone Number

2. Report Year	3. Period Start Date (m m/dd/yy)	4. Period End Date (m m/dd/yy)	5. Treasurer Full Name
2018	10/21/2018	12/31/2018	WILLIE COOPER JR

6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
☒ Candidate Campaign	☐ Party	Municipal	State/County	Referendum
☐ Joint Fundraiser	☐ PAC	☐ Organizational	☐ Organizational	☐ Organizational
☐ Referendum	☐ Legal Expense Fund	☐ Thirty-five day	☐ Quarterly	☐ Pre-referendum
7. Type of Fund (if applicable, check one)		☐ Pre-primary	☐ First	☐ Final
☐ "Booster Fund"		☐ Pre-election	☐ Second	☐ Supplemental Final
☐ Building Fund		☐ Pre-runoff	☐ Third	☐ Annual
☐ Presidential Election Year Candidates Fund		☐ Semi-annual	☐ Fourth	☐ Special
☐ NC Public Campaign Financing Fund		☐ Mid Year	☐ Semi-annual	
☐ Other:		☐ Year End	☐ Mid Year	
		☐ Final	☐ Year End	
		☐ Special	☐ Final	
			☐ Special	
8. Number of Fundraisers this Report		10. Special Report Name		
0				

3. Account Information		3. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
CAPITAL BANK			
b. Purpose	c. Account Code	b. Purpose	c. Account Code
RECEIPTS AND EXPENDITURES	100		
	d. Period Begin Balance		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

Willie Cooper [Signature] 02/09/2022
Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: FEB 09 2022 Employee: [Signature] Delivery Method ☐ Normal Mail

Date Postmarked: _____ Employee: _____ ☐ Registered Mail

Date Scanned: _____ Employee: _____ ☒ Hand Delivered

Date Data Entered: _____ Employee: _____ ☐ 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

Amendment
☒ Yes ☐ 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 CHARLES EVANS		2018 Fourth Quarter			
Start of Election Cycle: January 1, 2015		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 5,672.96		\$ 403.22	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 0.00		\$ 2,920.00	
6) Contributions from Individuals (CRO-1210)		\$ 1,750.00		\$ 42,895.00	
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00		\$ 1,000.00	
8) Contributions from Other Political Committees (CRO-1230)		\$ 500.00		\$ 2,360.00	
9) Loan Proceeds (CRO-1410)		\$ 0.00		\$ 500.00	
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$ 0.00		\$ 0.00	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$ 0.00		\$ 0.00	
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$ 0.00		\$ 0.00	
11c) Outside Sources of Income (CRO-1250)		\$ 0.00		\$ 650.00	
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$ 0.00		\$ 0.00	
11e) Exempt Purchase Price Sales (CRO-1265)		\$ 0.00		\$ 0.00	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 2,250.00		\$ 50,325.00	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 5,380.94		\$ 44,828.79	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$ 0.00		\$ 0.00	
13c) Coordinated Party Expenditures (CRO-1310)		\$ 0.00		\$ 0.00	
14) Aggregated Non-Media Expenditures (CRO-1315)		\$ 191.28		\$ 719.62	
15) Loan Repayments (CRO-1420)		\$ 0.00		\$ 0.00	
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$ 0.00		\$ 2,829.07	
17) In-Kind Contributions (CRO-1510)		\$ 0.00		\$ 0.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 5,572.22		\$ 48,377.48	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 2,350.74		\$ 2,350.74	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0.00			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 500.00			
22) Debts and Obligations owed by the Committee (CRO-1610)		\$ 0.00			
23) Debts and Obligations owed to the Committee (CRO-1620)		\$ 0.00			
24) Account Transfers Within the Committee (CRO-1720)		\$ 0.00			
25) Administrative Support (CRO-1710)		\$ 0.00		\$ 0.00	
26) Forgiven Loans (CRO-1440)		\$ 0.00		\$ 0.00	
27) 48-Hour Notice Reports Sum (CRO-2220)		\$ 0.00		\$ 0.00	
28) Contributions to be Refunded (CRO-1215)		\$ 0.00		\$ 1,993.54	

Contributions from Individuals

Pg 1 of 3

Amendment

☒ Yes ☐ No

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) COMMITTEE TO ELECT CHARLES EVANS					2. ID Number	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
ADAM BEYAH 5441 ARCHER ROAD HOPEMILLS, NC 28348			ACCOUNTANT			
			c. Employer's Name/Specific Field			
			BEYAH ACCOUNTING			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	100	Money Order		11/05/2018	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
GREGORY BRYANT PO BOX 1359 PEMBROKE, NC 28372			BUSINESS DEVELOPEMENT			
			c. Employer's Name/Specific Field			
			METCON			
					e. Election Sum to Date	
					\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	100	Check		10/31/2018	\$ 500.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
R.JONATHAN CHARLESTON 132 GREAT OAKS FAYETTEVILLE, NC 28303			ATTORNEY			
			c. Employer's Name/Specific Field			
			CHARLESTON GROUP			
					e. Election Sum to Date	
					\$ 1,500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	100	Check		10/30/2018	\$ 250.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 850.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 1,750.00	

Contributions from Individuals

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Amendment

☒ Yes ☐ No

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 CHARLES EVANS						
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
MITCH COLVIN 3405 GABLES DR. FAYETTEVILLE, NC 28311			DIRECTOR			
			c. Employer's Name/Specific Field			
			COLVIN FUNERAL HOME INC.			
					e. Election Sum to Date	
					\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	100	Check		11/04/2018	\$ 200.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
RANDY S GREGORY 121 ELLERSLIE DRIVE FAYETTEVILLE, NC 28303						
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	100	Check		11/01/2018	\$ 200.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
AARON JOHNSON 1915 ERNEST ST FAYETTEVILLE, NC 28301			OWNER			
			c. Employer's Name/Specific Field			
			BUSINESS			
					e. Election Sum to Date	
					\$ 75.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☒	100	Check		07/14/2018	\$ 25.00	
☐	100	Check		11/07/2018	\$ 50.00	
☐					\$	
4. Total only this Page					\$ 450.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 1,750.00	

Contributions from Individuals

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Amendment

☒ Yes ☐ No

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 CHARLES EVANS						
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
TOM J KEITH 121 S COOL SPRING ST FAYETTEVILLE, NC 28301						
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	100	Check		10/31/2018	\$ 250.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
CARMELA MCKELLER 6840 THAMES DR FAYETTEVILLE, NC 28306			HOMEMAKER			
			c. Employer's Name/Specific Field			
			SELF			
					e. Election Sum to Date	
					\$ 300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	100	Check		11/06/2018	\$ 200.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 450.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 1,750.00	

Contributions from Other Political Committees Pg 1 of 1

Amendment
☒ Yes ☐ No

Use this form to report contributions from other candidate, referendum or PAC committees

1. Committee Full Name (and Fund if applicable)				2. ID Number	
COMMITTEE TO ELECT CHARLES EVANS					
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee		d. Comments	
CCHTA PO BOX 35812 FAYETTEVILLE, NC 28303		☐ Candidate ☒ PAC			
		☐ Referendum			
		c. Level Registered (Specify)			
		☐ Federal ☒ County:		e. Election Sum to Date	
		☐ State ☐ Municipality:			
				\$ 500.00	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
100	Check		11/09/2018	\$ 500.00	
				\$	
				\$	
4. Total only this Page				\$ 500.00	
5. Total of ALL CRO-1230 Pages (This line must be on line 8 of Detailed Summary Page CRO-1100)				\$ 500.00	

CRO-1230

NC State Board of Elections

April 2007

Disbursements

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Amendment

☒ Yes ☐ 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 CHARLES EVANS							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures							
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
LAQUESHA ANDERSON NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 100.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
100	Check	O	11/12/2018	\$ 100.00	POLL WORK		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
BENTON CARD CO. 105 WALL ST. BENSON, NC 27504							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 120.63	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
100	Check	B	11/19/2018	\$ 120.63	PALM CARDS		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
BIZ CARD EXPRESS 2702 RAEFORD RD FAY, NC 28303							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 1,929.92	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
100	Check	B	11/02/2018	\$ 637.58	PALM CARDS		
100	Check	B	11/03/2018	\$ 96.25	STICKERS		
5. Total only this Page						\$ 954.46	
6. Total of ALL CRO-1310 Pages							
(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)						\$ 5,380.94	
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							
* Codes require detailed explanation in required remarks field (k)							

Disbursements

Pg 2 of 6

Amendment

☒ Yes ☐ 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 CHARLES EVANS							
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures							
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
CHARLES EVANS NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 157.40	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
100	Cash	O	12/31/2018	\$ 157.40	POLL WORKER		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
FAYETTEVILLE PRESS 3635 SYCAMORE DAIRY RD. FAYETTEVILLE, NC 28311							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 200.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
100	Check	A	11/23/2018	\$ 200.00	RADIO AD		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ADAMA GRIER NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 100.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
100	Check	O	11/06/2018	\$ 100.00	POLL WORKER		
				\$			
5. Total only this Page						\$ 457.40	
6. Total of ALL CRO-1310 Pages							
(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)						\$ 5,380.94	
(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							
* Codes require detailed explanation in required remarks field (k)							

Disbursements

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Amendment

☒ Yes ☐ 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 CHARLES EVANS							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures							
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
CELMA MARSHALL 679 BARTONS LANDING FAYETTEVILLE, NC 28314							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 900.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
100	Check	O	11/03/2018	\$ 600.00	POLL WORK		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
RAYMOND A MCDUGAL 5413 CHESAPEAK RD FAYETTEVILLE, NC 28344							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 100.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
100	Check	O	10/26/2018	\$ 100.00	CONTRIBUTION/TICKETS		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
FEBRA MILES NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 200.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
100	Check	O	11/06/2018	\$ 200.00	CAMPAIGN WORK		
				\$			
5. Total only this Page						\$ 900.00	
6. Total of ALL CRO-1310 Pages							
<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>						\$ 5,380.94	
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							
* Codes require detailed explanation in required remarks field (k)							

Disbursements

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Amendment

☒ Yes ☐ 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) COMMITTEE TO ELECT CHARLES EVANS	2. ID Number
--	---------------------

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) PHILIP MOSLEY NC	b. Coordinated Committee Name c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality: e. Election Sum to Date \$ 625.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
100	Check	O	10/31/2018	\$ 300.00	POLLWORK
100	Check	O	11/03/2018	\$ 300.00	POLL WORKER

4. Payee Information ☐ Add ☐ Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) SPEEDI PRINT 201 FRANKLIN ST. FAYETTEVILLE, NC 28301	b. Coordinated Committee Name c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality: e. Election Sum to Date \$ 1,705.97

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
100	Check	B	12/01/2018	\$ 169.08	SIGNS
				\$	

4. Payee Information ☐ Add ☐ Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) FREDRICKA SUTHERLAND NC	b. Coordinated Committee Name c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality: e. Election Sum to Date \$ 400.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
100	Check	O	11/07/2018	\$ 400.00	CAMPAIGN WORK
				\$	

5. Total only this Page \$ 1,169.08

6. Total of ALL CRO-1310 Pages
(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)
 \$ 5,380.94

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

* Codes require detailed explanation in required remarks field (k)

Disbursements

Pg 5 of 6

Amendment

☒ Yes ☐ 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 CHARLES EVANS							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures							
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
WIDU 1338 BRAGG BLVD FAYETTEVILLE, NC 28301							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 7,430.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
100	Check	A	11/05/2018	\$ 300.00	RADIO AD		
100	Check	A	11/07/2018	\$ 200.00	RADIO ADD		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
BARBARA WILLIAMS NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 400.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
100	Check	O	11/01/2018	\$ 300.00	POLL WORKER		
100	Check	O	11/07/2018	\$ 100.00	CAMPAIGN WORK		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ROYANNA WOODBURY NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 300.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
100	Check	O	11/06/2018	\$ 300.00	POLL WORK		
				\$			
5. Total only this Page						\$ 1,200.00	
6. Total of ALL CRO-1310 Pages							
(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)						\$ 5,380.94	
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							
* Codes require detailed explanation in required remarks field (k)							

Disbursements

Pg 6 of 6

Amendment

☒ Yes ☐ 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 CHARLES EVANS							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures							
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
IESANTA WRIGHT NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 700.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
100	Check	O	10/27/2018	\$ 100.00	POLL WORKER		
100	Check	O	11/01/2018	\$ 200.00	POLL WORK		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
IESANTA WRIGHT NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 700.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
100	Check	O	11/03/2018	\$ 300.00	POLL WORK		
100	Check	O	11/07/2018	\$ 100.00	POLL WORKER		
5. Total only this Page						\$ 700.00	
6. Total of ALL CRO-1310 Pages							
(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)						\$ 5,380.94	
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							
* Codes require detailed explanation in required remarks field (k)							

Aggregated Non-Media Expenditures

Page 1 of 1

Amendment

☒ Yes ☐ No

Optional form used to report NC Non-Media Expenditures of \$50 or less.

1. Committee Full Name (and Fund if applicable)					2. ID Number	
COMMITTEE TO ELECT CHARLES EVANS						
3. Payee Information						
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
☐ Add ☐ Remove	100	Check	B	11/28/2018	\$ 36.28	SIGNS
☐ Add ☐ Remove	100	Check	O	11/29/2018	\$ 30.00	CONTRIBUTION
☐ Add ☐ Remove	100	Check	O	11/06/2018	\$ 50.00	POLL WORKER
☐ Add ☐ Remove	100	Check	O	11/06/2018	\$ 50.00	POLLWORK
☐ Add ☐ Remove	100	Check	O	11/05/2018	\$ 25.00	PUT OUT SIGNS
4. Total only this Page					\$	191.28
5. Total of ALL CRO-1315 Pages					\$	191.28
<i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>						
6. Purpose Codes (List detailed expenditure code in (d) above)						
B* - Printing		C* - Fundraising		D - To Another Candidate		
E - Salaries		F* - Equipment		G - Political Party		
I - Postage		J - Penalties		H* - Holding Public Office Expenses		
O* - Other				K* - Office Expenses		
Q* - Donations to Legal Expense Fund						
* Codes require detailed explanation in required remarks field (g)						

CRO-1315

NC State Board of Elections

December 2009

Outstanding Loans

Pg 1 of 1

Amendment
☒ Yes ☐ No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
COMMITTEE TO ELECT CHARLES EVANS			
3. Lender Information ☐ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
CHARLES EVANS 6720-1 WILLOWBROOK DR. UNIT 1 FAYETTEVILLE, NC 28314		CIVIL SERVICE	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		CUMBERLAND COUNTY	09/28/2017
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$ 500.00	\$ 500.00
k. Full Name of Lending Institution		l. Loan Number	
4. Total only this Page		\$ 500.00	
5. Total of ALL CRO-1430 Pages (This line must be on line 21 of Detailed Summary Page CRO-1100)		\$ 500.00	

CRO-1430

NC State Board of Elections

December 2007