

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.

Amendment

☐ Yes

☐ No

1. Committee Information			
a. Full Name Committee to Elect Chris Davis		c. ID Number 7EE X 8K	
b. Mailing Address (include City, State and Zip Code) 3009 Carula Lane Fayetteville NC 28506		d. Date Filled	
		e. Phone Number	
2. Report Year -	3. Period Start Date (mm/dd/yy) 9/24/19	4. Period End Date (mm/dd/yy) 10/21/19	5. Treasurer Full Name Christopher Gerald Davis
6. Type of Committee (Check One)		9. Type of Report (Select only one type of report from one category)	
☐ Candidate Campaign ☐ PAC ☐ Independent Expenditure ☐ Legal Expense Fund ☐ Party ☐ Referendum ☐ Joint Fundraiser		Municipal ☐ Organizational ☐ Thirty-five day ☐ Pre-primary ☐ Pre-election ☐ Pre-runoff ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special State/County ☐ Organizational ☐ Quarterly ☐ First ☐ Second ☐ Third ☐ Fourth ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special Referendum ☐ Organizational ☐ Pre-referendum ☐ Final ☐ Supplemental Final ☐ Annual ☐ Special	
7. Type of Fund (If applicable, check one)		10. Special Report Name	
☐ Booster Fund ☐ Building Fund ☐ Other:			
8. Number of Fundraisers this Report			
14. Account Information		15. Account Information	
a. Financial Institution Full Name First Citizens Bank		a. Financial Institution Full Name	
b. Purpose Campaign Acct. for Receipts and Disbursements	c. Account Code	b. Purpose	c. Account Code
d. Period/Began Balance \$ 687.19		d. Period/Began 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.			
Printed Name of Signer Christopher G Davis		Signature of Appointed Treasurer [Signature]	
		Date 10/31/19	
FOR OFFICE USE ONLY			
Date Received 10/31/19	Employee [Signature]	Delivery Method ☐ Normal Mail ☐ Registered Mail ☒ Hand Delivered ☐ Electronically Filed	
Date Postmarked OCT 31 2019	Employee	☐ Signer has not received mandatory training	
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
☐ 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 Chris Davis		Pre-Election Report	7 CEX 8K
Start of Election Cycle: January 1, _____		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 687.19	\$
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)		\$	\$
6) Contributions from Individuals (CRO-1210)		\$ 1200.00	\$ 4300.00
7) Contributions from Political Party Committees (CRO-1220)		\$	\$
8) Contributions from Other Political Committees (CRO-1230)		\$ 250.00	\$ 250.00
9) Loan Proceeds (CRO-1410)		\$	\$ 170.88
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)		\$ 1020.94	\$ 3604.43
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)		\$	\$
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 1116.25	\$ 1116.25
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)		\$	\$
26) Forgiven Loans (CRO-1440)		\$	\$
27) 48-Hour Notice Reports Sum (CRO-2220)		\$	\$
28) Contributions to be Refunded (CRO-1215)		\$	\$

Contributions from Individuals

Pg ____ of ____

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 Chris Davis						2. ID Number 7CEX8K	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) Archita Graves 5624 Stonefield St. Hope Mills, NC 28348 (910) 644-8893				b. Job Title/Profession Counselor		d. Comments	
				c. Employer's Name/Specific Field Womack Med. Center		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		
☐	01	Money order	IG-043583208	10/09/19	\$ 500		
☐					\$		
☐					\$		
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) Archita Graves 5624 Stonefield St. Hope Mills, NC, 28348 (910) 644-8893				b. Job Title/Profession Counselor		d. Comments	
				c. Employer's Name/Specific Field Womack Medical Center		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		
☐	01	Money order	IG-043583207	10/9/19	\$ 500.00		
☐					\$		
☐					\$		
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) F. Royal 10101 3D 493 WINDWOOD ON SKYE Fayetteville NC 28306 493 (910) 484-4387				b. Job Title/Profession Retired		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		
☐	01	Check		10/6/19	\$ 200.00		
☐					\$		
☐					\$		
4. Total only this Page						\$	
5. Total of ALL CRO 1210 Pages						\$	
(This line must be on line 6 of Detailed Summary Page CRO-1100)							

Contributions from Other Political Committees

Pg ____ of ____

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 Chris Davis				7CE01K	
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Type of Committee		d. Comments
Home Builders Assoc. of Fayetteville 243 S Breezewood Ave. Fayetteville NC. (910) 826-0648			☐ Candidate ☐ PAC		
			☐ Referendum		
			c. Level Registered (Specify)		
			☐ Federal ☐ County:		e. Election Sum to Date
			☐ State ☐ Municipality:		\$ 250
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
01	check		9/27/01	\$ 250.00	
				\$	
				\$	
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Type of Committee		d. Comments
			☐ Candidate ☐ PAC		
			☐ Referendum		
			c. Level Registered (Specify)		
			☐ Federal ☐ County:		e. Election Sum to Date
			☐ State ☐ Municipality:		\$
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
				\$	
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Type of Committee		d. Comments
			☐ Candidate ☐ PAC		
			☐ Referendum		
			c. Level Registered (Specify)		
			☐ Federal ☐ County:		e. Election Sum to Date
			☐ State ☐ Municipality:		\$
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
				\$	
4. Total only this Page				\$	
5. Total of ALL CRO-1230 Pages				\$	
(This line must be on line 8 of Detailed Summary Page CRO-1100)					

Disbursements

Pg ____ of ____

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 Chris Davis						7CEX8K	
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	
Dominus Pizza Brass Blvd Fayetteville NC (910) 483-8833							
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☐ Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
01	Debit Card	0	10/2/19	\$ 58.22	Food: volunteers phone banking		
				\$	Canvassing		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
First Watch 2711 Freedom Cafe (Suite 300) (910) 325-4054							
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☐ Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
01	Debit	0	10/16/19	\$ 31.00	Team Meeting for Post Primaries		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Wal-mart 7701 S. Raeford Rd 910-864-6575							
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☐ Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
001	Debit Card	2	10/16/19	\$ 47.42	(Pink Ink/paper/USB)		
				\$			
5. Total only this Page						\$	
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)							
7. Purpose Codes (Last 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 field (k)							

Disbursements

Pg ____ of ____

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 Chris Pans						TCE x8K	
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	
Walnut (Harp Mills) 3030 W. main St. Harp Mills NC 28349							
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☐ Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
01	Debit Card	0*	10/16/19	\$ 32.24	Labels, supplies		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Chill's Grill Bar 635 Cross Creek rd Fayetteville NC							
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☐ Municipality:		\$ 54.17	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
01	Debit	0*	10/17/19	\$ 54.17	Meech Dinner w/ Volunteer Leaders		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
The UPS store 939 Westwood Shopping Center							
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☐ Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
01	Debit	B	10/24/19	\$ 342.40	Print + Banners + Conds		
				\$			
5. Total only this Page						\$	
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)							
7. Purpose Codes (List detailed expenditure code in (b) 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 ____ of ____

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 Chris Doms				7CEX8K	
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
Walmart 1550 Silbo Rd Fayetteville NC (910) 868-6434					
			c. Level Registered (Specify)		e. Election Sum to Date
			☐ Federal ☐ County: ☐ State ☐ Municipality:		\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	Debit Card	0	9/29/19	\$ 54.24	Campaign Meeting Supplies
	Check # 1018			\$	
4. Payee Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (Include city, state, & zip)			b. Coordinated Committee Name		d. Comments
The UPS Store # 2974 439 Westwood Shopping Center Fayetteville NC (910) 860-1220					
			c. Level Registered (Specify)		e. Election Sum to Date
			☐ Federal ☐ County: ☐ State ☐ Municipality:		\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	Debit Card	B	10/14/19	\$ 401.25	Post Cards (2500)
				\$	
4. Payee Information ☐ Add ☐ 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
			☐ Federal ☐ County: ☐ State ☐ 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					\$
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)					
7. Purpose Codes (Last detailed expenditure code in (6) above)					
A* - Media		B* - Printing		C* - Fundraising	
E - Salaries		F* - Equipment		D - To Another Candidate	
I - Postage		J - Penalties		G - Political Party	
O* Other				H* - Holding Public Office Expenses	
				K* - Office Expenses	
				Q* - Donation to Legal Expense Fund	
* Codes require detailed explanation in required remarks field (k)					