Disclosure Re	port Cover				1	Amendment Yes No			
Use this form for ge	neral report and committee i	nformation	, must be signed	and sub	mitted along with oth				
Do not use this form to update information									
1. Committee Infor	mation					TO V. I			
Committee to Elect		c. ID Number							
	lude City, State and Zip Code)					d. Date Filed			
2010 Murchison Rd		09/23/2021							
Fayetteville, NC 28		c. Phone Number							
						910-987-2684			
2. Report Year	3. Period Start Date (mm/d	aiver	. Period End Da nm/dd/yy)	ite	5. Treasurer Full I	and the second s			
2021	01/01/2021		06/30/2021		Wixie D. Stephens	140-6775			
6. Type of Commit		9. Type o	f Report (c	check onl	ly one type of report j				
Candidate Camp		Municipal		State/Co		Referendum			
PAC Independent	Referendum		ganizational	_	Organizational	Organizational			
Expenditure	Joint Fundraiser	Thi	irty-five day		Quarterly	Pre-referendum			
Legal Expense F 7. Type of Fund	(if applicable, check one)	☐ Pre	e-primary	П	First	☐ Final			
"Booster Fund"	(у прристен)		e-election	lΗ	Second	Supplemental Final			
Building Fund		Pre	e-runoff		Third	Annual			
			mi-annual		Fourth	Special			
Other:			Mid Year Year End		Semi-annual Mid Year	10. Special Report Name			
Other.		│		lΗ	Year End	10. Special Report Name			
8. Number of Fund	raisers this Report	☐ Spe	ecial	🗀 F	Final				
					Special				
11. Account Inform			11. A	ccount I	nformation				
a. Financial Institution	Full Name		a. Fina	ncial Insti	tution Full Name				
First Horizon Bank b. Purpose	c. Account Code		b. Puri	noso		c, Account Code			
D. I di pose			b. Furj	pose		c. Account Code			
	06	ĺ							
	d. Period Begin Balanco					d. Period Begin Balance			
	\$ 44.92					\$			
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. Nixe D Stephens 09/23/2021									
FOR OFFICE USE O		ED 9 2 1	2021	. 1					
Date Received:	SEP & 2 4029		nployee:	the	<u> </u>	Delivery Method Normal Mail			
Date Postmarke	d:	En	nployee:			Registered Mail Hand Delivered			
Date Scanned:		Electronically Filed Signer has not received							
Date Data Enter	red:	En	mployee:			mandatory training			
Please Note: Th	Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information. You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.								

Amendment

Amendment No

Detailed SummaryUse 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 Mitch Colvin	Mid Year		
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Total this	Total this
Start of Election Cycle: January 1,	2021	Reporting Period	Election Cycle
4) Cash on Hand at Start		\$ 44.92	\$ 6340.00
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$	\$
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$	\$ 5345.00
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 Organizat	ions <i>(CRO-1250)</i>	\$	\$
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, 1	Ic, 11d and 11e)	\$ 44.92	\$ 6340.00
<u>EXPENDITURES</u>			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 4168.92	\$ 4168.92
13b) Contributions to Candidates/Political Commi	ttees <i>(CRO-1310)</i>	\$	\$
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)	\$ 1000.00	\$ 1000.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14,	15, 16 and 17)	\$ 5168.92	\$ 5168.92
19) Cash on Hand at End (Add lines 4 and 12 together, then su	btract line 18)	\$ 1216.00	\$ 1216.00
<u>ADDITIONAL INFORMATION</u>			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaig	(CRO-1430)	\$ 5345.00	
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)	\$	\$

						Amendment
Disburseme	ents			Pg	1 of 5	
Use this form to	report expenditures	from the committe	e f	or; operating expenses,		
	coordinated party ex					
	ull Name (and Fun	d if applicable)	(0) 0) 0 0 0 1			2. ID Number
	lect Mitch Colvin	-	unionis			annshin eszerekszenken ken ken ken ken ken ken ken ken ke
3. Type of Disbu				<i>-1310 forms for each t</i>) ates/Political Committees	MINORINA (1995)	- Antique () () ()
Operating E		Contributions to Can	Salary po	dd	Remove	ordinated Party Expenditures
4. Payee Inform	ng Address & Phone		Secretary.	Coordinated Committee Na		d. Comments
(include city, state,	사용하는 것 만큼 하나 나는 사람들은 사람 가장에 하는 것 같은 것 같은 것 같은 것 같다.			Coordinated Committee 14		sii Commence
First Horizon Ba						
P.O. Box 84			c.	Level Registered (Specify)		
Memphis, TN 3	8101			Federal	County:	
				State 🔲	Municipality:	e, Election Sum to Date
						\$
			53.4			
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	debit	O		01/29/2021	\$20.00	Bank Service
						Fees Paper Statement
	debt	O		01/29/2021	\$9.92	service charges
4. Payee Inform	ation	П	Δ	dd 🔲	Remove	service charges
and the second of the second o	ng Address & Phone		*******	Coordinated Committee Na	en i mai desta de la partició em la porta esta de la compacta de la compacta de la compacta de la compacta de l	d. Comments
(include city, state,	보고 시간을 보고 있는 이번 중에 이번 시간을 보다.		.~•			
First Horizon Ba						
P.O. Box 84			c.	Level Registered (Specify)		
Memphis, TN 3	8101			Federal	County:	
-				State	Municipality:	e. Election Sum to Date
						\$
		1.5			Digitiza di manazari a conserva	
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	debit	O		02/26/2021	\$15.00	bank service
						fees
	debit	O		02/26/2021	\$5.00	paper statement
4. Payee Inform	ation	П	Α	dd 🔲	Remove	
	ng Address & Phone			Coordinated Committee Na		d. Comments
(include city, state,	경구 : 하나 하는 경기를 하는 것이 하는 것이다.			· · · · · · · · · · · · · · · · · · ·		
First Horizon Ba	ank					
P.O. Box 84			c.	Level Registered (Specify)		
Memphis, TN 3	8101		Ļ	Federal	County:	
		}	L	State 🔀	Municipality:	e. Election Sum to Date
						\$
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k, Required Remarks
i. Account Code	-	ans, and I was a way were		i. Date (iiiibuwyyyy)		over draft
	debit	O		03/12/2021	\$37.00	charge
					4-44	paper statement
	debit	O		03/262021	\$5.00	charges
5. Total only thi	s Page		1400000			\$ 91.92
	CRO-1310 Pages	randi as jib ja jib ja jib				
_	line 13a of Detailed Sun					\$ 4168.92
	-	· -	-	Contrib to Candidates/Politic		,
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						
	es (List detailed ex				n	- Condidate
A* - Media E - Salaries	B* - Printing F* - Equipment	C* - Fund G - Politic			D - To Anothe	Public Office Expenses
I - Postage	J - Penalties	K* - Offic				n to Legal Expense Fund

I - Postage O* - Other

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

Disburseme	anto				Amendment
		from the committe	Pg e for; operating expenses,	2 of 5	
	coordinated party ex		e for, operating expenses,	continuations to c	andidate/pointieat
	ull Name (and Fund				2. ID Number
	lect Mitch Colvin		мескандын на соот базаралы замом түзүү түүкөн каруылдарда кайтын түрөө түүгө		
3. Type of Disbu	irsement <i>(Plea</i>	se use separate Cl	RO-1310 forms for each t	ype of Disburseme	ent.)
Operating E	xpenses	Contributions to Cand	lidates/Political Committees	C00	ordinated Party Expenditures
4. Payee Inform	ation		Add	Remove	
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee N	ame	d. Comments
(include city, state,					
First Horizon Ba	ank	<u> </u>			
P.O. Box 84 Memphis, TN 33	Q1/11	-	c. Level Registered (Specify) Federal	County:	
wiempins, 114 5	6101		State	Municipality:	e. Election Sum to Date
		}		winicipanty.	1 199
					\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j, Amount	k. Required Remarks
	debit	0	03/12/2021	\$25.00	Bank Service
			03/12/2021	Ψ25.00	Fees
				\$	
4. Payee Inform	stion		Add	Remove	
The second of the second secon	ng Address & Phone		b, Coordinated Committee N		d. Comments
(include city, state,	가득 시간 사이 사이가 하는데 본 사이를 내가 되고 있다.		2, 00, 00, 00, 00, 00, 00, 00, 00, 00, 0		
First Horizon Ba					
P.O. Box 84			c. Level Registered (Specify)		
Memphis, TN 3	8101		Federal	County:	•
			State 🛛	Municipality:	e, Election Sum to Date
					\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
i, Account Code					bank service
	debit	О	03/26/2021	\$12.00	fees
	debit	0	05/03/2021	\$10.00	paper statement
4. Payee Inform	ation		Add	Remove	
grant and the second state of	ng Address & Phone		b. Coordinated Committee N		d. Comments
(include city, state,					
Kali Payton Med	dia				
3904 Oblu Cour		1	c. Level Registered (Specify)		
Fayetteville, NC	28306		Federal	County:	
			State 🛛	Municipality:	e. Election Sum to Date
					\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1002		A		8500.00	Social Media
1093	check	Α	02/05/2021	\$500.00	charge
1094	check	A	03/26/2021	\$500.00	Social media charges
5. Total only thi	s Page				\$ 1047.00
6. Total of ALL	CRO-1310 Pages				
-	line 13a of Detailed Sun				\$ 4168.92
, -	•	• -	if Contrib to Candidates/Politic		
			if Coordinated Party Expendite	ires)	
7. Purpose Code A* - Media	es (List detailed ex B* - Printing	penditure code in (C* - Fund		D - To Anothe	er Candidate
E - Salaries		G - Politic			Public Office Expenses
I - Postage	J - Penalties	K* - Offic			n to Legal Expense Fund
O* - Other					

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

Disburseme	ents				Pg	3 of :	Amendment 5 Yes No
	report expenditures		e f	or; operating expe			
	coordinated party ex	A					_
	ull Name (and Fun	d if applicable)				(0) (3) (0) (2) (2) (3) (3)	2. ID Number
	lect Mitch Colvin	2	Meganik	****	(8) (8) (8) (8) (8) (8) (8) (8) (8) (8)		
3. Type of Disbu		se use separate Ci		<i>=1310 jorms jor e</i> ntes/Political Committe			ent.) ordinated Party Expenditures
4. Payee Inform		Contributions to Cart	erentes No	dd		Remove	Sumateu Party Expellentires
	ng Address & Phone		A Company of the	aa Coordinated Commi	ttee Na		d. Comments
(include city, state,	엄마, 아마 아마마 아마마 아마마마 아니는				1110 1111	THE CALL THE CONTROL OF THE	W COMMENS
First Horizon Ba							
P.O. Box 84			c,	Level Registered (Sp	ecify)		
Memphis, TN 3	8101	Ì	Г	Federal		County:	
-				State	\boxtimes	Municipality:	e. Election Sum to Date
							\$
		h. Purpose Code	355		4 753435		
f. Account Code	g. Form of Payment	ii. Fui pose Code	1111	i. Date (mm/dd/yyy)	y) and (a)	j. Amount	k. Required Remarks Bank Service
	debit	О		02/26/2021		\$15.00	Fees
			1			Φ.	1003
					es and and an	\$	
4. Payee Inform			100000100	dd	Ц_	Remove	
	ng Address & Phone		Ъ.	Coordinated Commi	ttee Na	me	d. Comments
(include city, state,							
Paragon Paymer	tway Rd.Ste. 202			Level Registered (Sp	onifu)		
Tempe, Az 8528	•			Federal		County:	
800-884.5208	,2		ᅡ	State	\boxtimes	Municipality:	e. Election Sum to Date
000 00 1.0200							
							\$
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy	y)	j. Amount	k. Required Remarks
		С		02/05/2021		\$320.00	service charges
			4	OL/03/L021		Ψ520.00	for paypal
						\$	
4. Payee Inform	ation		A	dd	П	Remove	
	ng Address & Phone		ingayin.	Coordinated Commi	ttee Na		d. Comments
(include city, state,				·			
Kali Payton Me							
3904 Oblu Cour	t		c.	Level Registered (Sp	ecify)		
Fayetteville, NC	28306] Federal		County:	
				State	\boxtimes	Municipality:	e. Election Sum to Date
							
f. Account Code	g. Form of Payment	h, Purpose Code		i. Date (mm/dd/yyyy	<u> </u>	j. Amount	k. Required Remarks
			1		· / - (19.50)	* 1,113111111111111111111111111111111111	Social Media
1096	check	Α		04/20/2021		\$500.00	charge
			T			\$	
			25000000		755A-1159711995	"	
5. Total only thi		<u> </u>	<u> </u>	South per copies on constant		Alleria inner salina inco	\$ 835,00
	CRO-1310 Pages line 13a of Detailed Sun	arv Paga CRO-1100) ; <i>f (</i>	Operativa Evpensas)	1997		
	une 13a of Detailed Sun line 13b of Detailed Sun				/Politic	al Comm)	\$ 4168.92
	line 13c of Detailed Sum		-				
	es (List detailed ex						
A* - Media	B* - Printing	C* - Fund	rai	sing			
E - Salaries		G - Politic					Public Office Expenses
I - Postage O* - Other	J - Penalties	K* - Offic	e K	xpenses		Ų* - Donatio	n to Legal Expense Fund
	e detailed explanati	ion in required re	ma	irks field (k)			

Disbursements to the company of the	report expenditures	from the committe	e fo	Pg or; operating expenses, o	4 of g	
	coordinated party ex ull Name (and Fund					2. ID Number
	lect Mitch Colvin	и п аррпсавлеј	JENNESS			2. ID Number
3. Type of Disb		so uso sonurato Cl	20.	1310 forms for each ty	ing of Dichurcain	out)
Operating E				tes/Political Committees		ordinated Party Expenditures
4. Payee Inform			Αc		Remove	and the Expendences
and the contract of the contra	ng Address & Phone		1,000,000,000	Coordinated Committee Na		d. Comments
(include city, state,		-		Name of the state		
First Horizon B						
P.O. Box 84			c. I	Level Registered (Specify)		
Memphis, TN 38101				Federal	County:	
- ,	~ - * -	ŀ	F	State 🕅	Municipality:	e. Election Sum to Date
		ļ	<u> </u>			<u> </u>
						\$
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
					410.00	Bank Service
	debit	О		06/01/2021	\$10.00	Fees
					ė	
				•	\$	
4. Payee Inform	iation		Αţ	ld 🔲	Remove	
a. Full Name, Maili	ng Address & Phone		Ъ. (Coordinated Committee Na	me	d. Comments
(include city, state,	& zip)					
Sterlings Strateg	gies					
3407 Tulane Dr	ive Apt. 12		c. I	Level Registered (Specify)		
Adelphi MD 20	783			Federal	County:	
				State 🔀	Municipality:	e. Election Sum to Date
						\$
						3
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	debit	С		04/20/2021	\$1000.00	sort out names
	deon			04/20/2021	\$1000.00	from list of
					\$	voters
		orzeczonowanijotennijstowyczar <u>a i a</u> turczni	None Constant	intrakkenninkintrikenneekirjeskankkelulioikin		Annual Annual Property Committee of the
4. Payee Inform	nation		Αc		Remove	
a. Full Name, Maili	ng Address & Phone		b. (Coordinated Committee Na	me	d. Comments
(include city, state,	& zip)					
Call Time		-	2504255			
811 W. 7 th St.			c.]	Level Registered (Specify)		
Los Angeles CA	X 90017		느	Federal	County:	
		-		State 🔀	Municipality:	e. Election Sum to Date
						\$
f Assemble C=3-	g Form of De	h. Purpose Code		1 Data (mondad)		L Dealing Daniel
f. Account Code	g. Form of Payment	m r ar pose Code	: []	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks Voters List
		С		06/29/2021	\$435.00	Ro. Bo Calls
						Ro, Bo Cans
					\$	
5. Total only th	is Paga					\$ 1445,00
	CRO-1310 Pages					\$ 1445.00
	line 13a of Detailed Sun	ımary Page CRO-1100	if C	Derating Expenses)		
-	•		-	operating Expenses) Contrib to Candidates/Politica	al Comm)	\$ 4168.92
	-		-	Coordinated Party Expenditus		
	es (List detailed ex	A Printer of the Control of the Cont	Signature 2011			
A* - Media	B* - Printing	C* - Fund	rais	sing	D - To Anothe	er Candidate
E - Salaries	F* - Equipment	G - Politica	al P	arty	H* - Holding	Public Office Expenses
I - Postage	J - Penalties	K* - Offic	e E	xpenses	Q* - Donation	n to Legal Expense Fund
O* - Other			768(U)A	al-gaayis		
- voues requir	e detailed explanat	оп зи гедшгей ге	ша	i wo iiciu (K)		

								Amendm	ent
Disbursements				Pg	<u>5</u>	of	5		es

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures. 2. ID Number 1. Committee Full Name (and Fund if applicable) Committee to Elect Mitch Colvin (Please use separate CRO-1310 forms for each type of Disbursement.) 3. Type of Disbursement Contributions to Candidates/Political Committees Coordinated Party Expenditures Operating Expenses Add Remove 4. Payee Information d. Comments b. Coordinated Committee Name a. Full Name, Mailing Address & Phone (include city, state, & zip) Kalie Payton Media c. Level Registered (Specify) 3904 Oblu Court Fayetteville, NC 28306 Federal County: State 冈 Municipality: e. Election Sum to Date h. Purpose Code f. Account Code g. Form of Payment i. Date (mm/dd/yyyy) j. Amount k. Required Remarks Social Media 06/17/2021 \$750.00 1097 check A Fees \$ Add Remove 4. Payee Information b. Coordinated Committee Name d. Comments a. Full Name, Mailing Address & Phone (include city, state, & zip) c. Level Registered (Specify) Federal County: State Municipality: e. Election Sum to Date h. Purpose Code i. Date (mm/dd/yyyy) k. Required Remarks g. Form of Payment j. Amount f. Account Code \$ \$ 4. Payee Information Add Remove b. Coordinated Committee Name d. Comments a. Full Name, Mailing Address & Phone (include city, state, & zip) c. Level Registered (Specify) Federal County: State Municipality: e. Election Sum to Date h. Purpose Code k. Required Remarks i. Date (mm/dd/yyyy) j. Amount f. Account Code g. Form of Payment \$ \$ 750.00 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) 4168.92 \$ (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) D - To Another Candidate A* - Media B* - Printing C* - Fundraising F* - Equipment G - Political Party H* - Holding Public Office Expenses E - Salaries

Q* - Donation to Legal Expense Fund

K* - Office Expenses

J - Penalties

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

I - Postage O* - Other

Contri	butions fron	n Individuals		Pg	of	2_	Amendme Ye	
·				or contributions unde	r \$50 if form CR0	(
	e To elect Mitch (and Fund if applicab	iej			2. ID Num	Der	
Principal Control of the Control of			(- 1					The second second
2007100000000000000000000000	butor Informatio	авколеебология (политания высоду (поличения)	Ш	Add L Rem	ove		in sapulardin dari	
	ie, Mailing Address & city, state, & zip)	e Phone		b. Job Title/Profession Funeral Director		d. Comments		
	tch Colvin			Mayor City of Fayet	tteville			
3405 Gables Drive			c. Employer's Name/Spe					
Fayetteville, NC 28311			Colvin's Funeral Ho					
			Mayor City of Fayet	tteville	e. Election Su	ım to Date		
				\$ 5345.00				
f. Prior	g. Account Code	h. Form of Payment	i, In-K	ind Description	j. Date (mm/dd/yy	yy) ·	k. Amoun	
		Cash/Atm			02/02/20	021	\$	520.00
		Cash/Atm			03/12/2	021	\$	545.00
		Cash		:	06/30/2	021	\$	3500.00
3. Contri	butor Informatio	n		Add 🔲 Rem	ove			
a. Full Nam	ie, Mailing Address &	Phone		b. Job Title/Profession		d. Comments		
	city, state, & zip)			Democratic Party		vote Build	ers	
	rolina Democratic	Party						
	borough St.			c. Employer's Name/Spe Democratic Party	citic Field			
Raleigh, 1	NC 27003			Democratic Facty		e, Election Su	ım to Date	
						\$	1000.00	
f. Prior	g. Account Code	h. Form of Payment	i, In-K	 	j. Date (mm/dd/yy		k, Amoun	
			1000	······································	06/17/20	021	\$	1000.00
							\$	
							\$	
3. Contri	butor Informatio	n		Add Rem	ove			
a. Full Nan	ıe, Mailing Address &	Phone		b. Job Title/Profession		d. Comments		
	city, state, & zip)					Refund to		
First Hori						committee		
P.O. Box	84 TN 38101			c. Employer's Name/Spe	cilic Field			
Mempins	110 36101					e. Election St	ım to Date	
						\$		
f. Prior	g. Account Code	h. Form of Payment	i, In-K	 (ind Description	j. Date (mm/dd/yy		k. Amoun	<u>Carried Reserve</u>
		credit			03/26/20)21	\$	25.00

(This line must be on line 6 of Detailed Summary Page CRO-1100)

CRO-1210 NC State Board of Elections April 2007

4. Total only this Page

5. Total of ALL CRO-1210 Pages

\$

\$

5590.00

6340.00

\$

\$

				or contributions unde	r \$50 if form CR		-	5657/487#W897#Z21765U891P-2795
.,,		(and Fund if applical	ole)			2. ID Num	ber .	
Committe	ee To elect Mitch	Colvin						
**************************************	butor Informatio			Add 🗌 Rem	ove			
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ne, Mailing Address o	& Phone		b. Job Title/Profession		d. Comments		
	city, state, & zip)			Funeral Director	a91.			
3405 Gab	itch Colvin			Mayor City of Fayet c. Employer's Name/Spe		1		
	lle, NC 28311			Colvin's Funeral Ho				
	, 1.0 20511			1	Mayor City of Fayetteville		ım to Date	
						\$ 5345.00		
f. Prior	g. Account Code	h. Form of Payment	i, In-l	(ind Description	j. Date (mm/dd/yy) 333)	k. Amount	
		Cash/Atm			04/02/2	021	\$	400.00
		Cash/Atm			04/16/2	2021	\$	350.00
							\$	
3. Contri	butor Informatio	on and a second		Add Rem	ove			
a. Full Nan	ie, Mailing Address d	& Phone		b. Job Title/Profession		d. Comments		
(include	city, state, & zip)							
					<u> </u>			
				c. Employer's Name/Spe	citic Field			
						e. Election Si	ım to Date	
							in to Date .	
						\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Kind Description	j. Date (mm/dd/yy	yy)	k. Amount	
							\$	
							\$	
							\$	
3. Contri	butor Informatio	m		Add 🗌 Rem	ove	9.00.00.00.00		
	ıe, Mailing Address d	& Phone		b. Job Title/Profession		d. Comments		
(include	city, state, & zip)							
				c. Employer's Name/Spe				
				C. Employer S Name/Spe	eme Flera			
				:		e. Election Si	ım to Date	
						\$		
f, Prior	g. Account Code	h. Form of Payment	i. In-k	Kind Description	j. Date (mm/dd/yy	уу)	k. Amount	
							\$	
							\$	
							\$	
10.400.400.0000000000000000000000000000	only this Pag					\$	-	750.00
\$3000000000000000000000000000000000000	of ALL CRO	-1210 Pages Detailed Summary Page Cl	DO 1100			\$		6340.00
	a. oc on title o of		*********		esusopassassassassassassassassassassassassass	1		

Contributions from Individuals

Amendment

Yes

No

Loan Proceeds		Pg	1 of	1	Yes	No
	t proceeds from a loan and loan en	dorser's information	on	_		
	ment must accompany each loan th	at is from an indiv	CONTRACTOR DESCRIPTION OF THE PROPERTY OF THE			
committee To Elect N	ame (and Fund if applicable) Mitch Colvin		2.	ID Numb)er	
			-			· C
3. Lender Informatio	ii 🔲	Add	an Inc. in the state of		Remove	
a. Full Name, Mailing Add	dress & Phone	b. Job Title/Profes	sion		d. Comments	
(include city, state, & zi	p)	Funeral Directo	r			
Henry Mitch Colvin		Mayor				
3405 Gables Drive Fayetteville, NC 2831	1				e. Start Date (mm.	/dd/yyyy)
910-987-2684	11	c. Employer's Nam Colvin's Funera			January 1	1, 2021
310 307 D001		Home	.1		f. End Date (mm/c	ld/sana)
		Mayor of				
		Fayetteville, NO	7		June 30, 2021	
g. Rate	h. Security Pledged i	. Account Code	j. Form of Payme	nt	k. Amount	
%			Cash Deposit		\$ 5345.00	
l. Full Name of Lending In	stitution			m. Loan	Number	
			<u> </u>			14553 Services - 100 June 100
4. Endorsers/Makers		loan.)				
a. Full Name, Mailing Add		b. Job Title/Prof	ession	c. Emplo	yer's Name/Specific	Field
(include city, state, & zij	p)					
				-		
		d. Percentage		e. Amou	nf	
			2-11-1 April 10-1 - 11-1 - 11-1 - 11-1 - 11-1 - 11-1 - 11-1 - 11-1 - 11-1 - 11-1 - 11-1 - 11-1 - 11-1 - 11-1 -			1 - 1 - 11 - 11 - 12 - 13 - 14 - 15 - 15 - 15 - 15 - 15 - 15 - 15
			%	\$		
a. Full Name, Mailing Add	lress & Phone	b. Job Title/Prof	ession	c. Emplo	yer's Name/Specific	Field
(include city, state, & zij	p)					
		d. Percentage		e. Amou	nf	
						es es a commenciar a ser a commenciar de la commenciar de
			%	\$		
a. Full Name, Mailing Add	ress & Phone	b. Job Title/Prof	ession	c. Emplo	yer's Name/Specific	Field
(include city, state, & zij	p)					,,,,
		d. Percentage		e. Amoui		
		121 - 111 -	31 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			41-2 42-42-42-21-4-11-4-11-11-11-11-11-11-11-11-11-11-1
			%	\$		
a. Full Name, Mailing Add	ress & Phone	b. Job Title/Prof	ession	c. Emplo	yer's Name/Specific	Field
(include city, state, & zij))					
		d. Percentage		e. Amour		
		u. i ci centage		e Amoui		
			%	\$		

5. Total of ALL CRO-1410 Pages

(This line must be on line 9 of Detailed Summary Page CRO-1100)

\$

Amendment

In-Kind Contributions			Pg of	_	Yes _ No
Use this form to report non-monetary contributions, donations, go Use CRO-1215 if In-Kind Contributions were or will be refunded	ods or s	ervi	ces provided to th	ie com	mittee or fund.
1. Committee Full Name (and Fund if applicable)	WIUIIII	ua	ys.	2 11	D Number
Committee to Elect Mitch Colvin Mayor					
3. Contributor Information Add	Remove			1	
a. Full Name, Mailing Address & Phone		of C	Contributor	c. Co	mments
(include city, state, & zip)	-		vidual		
North Carolina Democratic Party 220 Hillsborough Street		Cane Party	didate		
Raleigh, North Carolina 27603		PAC	•		
	ļ 		erendum	d. Ele	ection Sum to Date
		Othe	er Receipt Source	\$	
e. Description Vote Builder		11	f. Date (mm/dd/yy)	уу)	g. Fair Market Amount
vote Builder			6/17/2021		\$ 1,000.00
					\$
· · · · · · · · · · · · · · · · · · ·					\$
3. Contributor Information Add R a. Full Name, Mailing Address & Phone	Remove				
(include city, state, & zip)	<u></u>		ontributor vidual	c. Co	mments
	Candi				
				1 10	
		Referendum Other Receipt			ection Sum to Date
e. Description			_	\$	I
· · · · · · · · · · · · · · · · · · ·			f. Date (mm/dd/yyy	/ y)	g. Fair Market Amount
	<u></u>				\$
					\$
					\$
3. Contributor Information Add R a. Full Name, Mailing Address & Phone	lemove	or C	ontributor		nments
(include city, state, & zip)			idual	e. Coi	mayas
		Cand	idate		
	=	Party			
		PAC Refer	rendum	d Fle	ction Sum to Date
			r Receipt Source	\$	CHOIL SUIL TO DATE
e. Description			f. Date (mm/dd/yyy	/ y)	g. Fair Market Amount
					\$
					\$
					\$
4. Total only this Page 5. Total of ALL CRO-1510 Pages				\$	1,000.00

(This line must be on line 17 of Detailed Summary Page CRO-1100)

In-Kind Contributions

Amendment