## **Disclosure Report Cover**

Amendment

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 Informati	On	· 行告"这一句"包括"是"		The Archive and State Provide State
a. Full Name			CALCULATE PARTY PARTY	c. ID Number
BRADLEY TAYLOR FO	RCOUNCIL	2000 0-		
		2020 81	IP 32 AM 8: 19	ECQRYQ
b. Mailing Address (incl	ude City, State and Zi	ip Code)		d. Date Filed
1745 AMMONS DRIVE				10/01/2023
CLEMMONS, NC 27012				
				e. Phone Number
				(336) 408-8501
2. Report Year 3. Perio	d Start Date (mm/dd	yy) 4. Period	End Date (mm/dd/yy)	5. Treasurer Full Name
2023	07/01/2023		09/26/2023	BRADLEY TAYLOR
6 T				
6. Type of Committee (C Candidate Campaign	heck One)	9. Type of Repo	**************************************	type of report from one category)
Joint Fundraiser		Municipal Organizati	State/County	
	Legal Expense Fund			and a second sec
	plicable, check one)	Pre-prima		Pre-referendum Final
Booster Fund"		Pre-election	-	
Building Fund		Pre-runoff		Annual
Presidential Election Ya		Semi-annu	al 🗖 Fourth	
NC Public Campaign Fir	nancing Fund	🔲 Mid Y	ear Semi-annua	
<b>Fi</b> ll out		Q Year H	End 🔲 Mid Ye	10. Special Report Name
Other:		Final	Year E	
8. Number of Fundraise	rs this Report	X Special	E Final	
0			Special	
3. Account Information		11-11-11-11-11-11-11-11-11-11-11-11-11-	3. Account Informati	ion
a. Financial Institution F	ull Name		a. Financial Institutio	
ALLEGACY FEDERAL C	REDIT UNION			
h Domester				
b. Purpose	c. Account Cod	e	b. Purpose	c. Account Code
BRADLEY TAYLOR FOR COUNCIL CAMPAIGN	<sup>Қ</sup>   ВТ	2021		
ACCOUNT	d. Period Begin	Balance		
ACCOUNT				d. Period Begin Balance
	\$ 1,138	.53		\$
CERTIFICATION	A CARLEND AND A CARLEND			
I certify that the Comm	ittee or Fund is in co:	mpliance 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 prol	hibited or other non-disclosed
funds. I further certify	that this report is con	mplete, true and c	orrect and that I have	been trained by the NC State Board
2 -		<	P	
DRADLEY AL	11672		20	10/01/2023
FOR OFFICE USE ONLY		Sign	aure of Appointed Treas	urer Date
FOR OFFICE USE ONLY				
Date Received:	10.2.23	Emplo	yee MB	Delivery Method
			a stand to be	Normal Mail
Date Postmarked:	1	Emplo	yee	Registered Mail
D				Electronically Filed
Date Scanned:		_ Employ	yee	- Laconomicany Filed
Date Data Entered:				Signer has not received
Date Data Effeted.		_ Employ	yee	mandatory training
Please Note: This f	orm cannot be used t	o amend committe	e information such as	the committee address, treasurer,
25	sistant treasurer cus	todian of hooks in	nformation, or account	information
			CRO-2100A-E) to make	
CRO-1000		NC State Board		December 2007
				December 2007

Use this form to summarize all disclosure reporting forms a l. Committee Full Name (and Fund if applicable)	and to total m	onetary int				
BRADLEY TAYLOR FOR COUNCIL	2. Type of R		*****	ID Num	***************************************	
	2023 Special	1	1	ECQEAQ		
Start of Election Cycle: January 1,3 22022	ANL 8: 19		tal this ting Period	1	Fotal this ction Cycle	
4) Cash on Hand at Start		S	1,141.83		1,141.8	
RECEIPTS	1			100		
5) Aggregated Contributions from Individuals	(CRO-1205)	S	0.00	S	0.0	
6) Contributions from Individuals	(CRO-1210)	s	5.00	S	5.0	
7) Contributions from Political Party Committees	(CRO-1220)	S	0.00	S	0.0	
8) Contributions from Other Political Committees	(CRO-1230)	S	0.00	S	0.0	
9) Loan Proceeds	(CRO-1410)	S	0.00	S	0.0	
0) Refunds/Reimbursements to the Committee	(CRO-1240)	S	0.00	S	0.0	
1) Other Receipt Sources		Sale in the	0.00		0.0	
11a) Interest on Bank Accounts	(CRO-1250)	S	0.10	S	0.1	
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)		0.00	5 5	0.1	
11c) Outside Sources of Income	(CRO-1250)			s S	0.0	
11d) Legal Expense Fund - Other Sources	(CRO-1270)		0.00	s	0.00	
11e) Exempt Purchase Price Sales	(CRO-1265)		0.00		0.00	
2) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c		S	0.00	S	0.00	
EXPENDITURES	,110 810 110)	3	5.10	S	- 5.10	
3) Disbursements		S. S. P.V.C.		NIT AND	A TENED	
13a) Operating Expenditures	(CRO-1310)	S	7.00	S	7.00	
13b) Contributions to Candidates/Political Committees	(CRO-1310)	S	0.00	S	7.00	
13c) Coordinated Party Expenditures	(CRO-1310)	s		\$	0.00	
4) Aggregated Non-Media Expenditures	(CRO-1315)		0.00	s	0.00	
5) Loan Repayments	(CRO-1420)	S			0.00	
) Refunds/Reimbursements from the Committee	(CRO-1320)	S		\$	0.00	
) In-Kind Contributions	(CRO-1510)	5		\$	0.00	
) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15,		s		S	0.00	
(Add lines 4 and 12 together, then sub		s		<u>s</u>	7.00	
DDITIONAL INFORMATION		3	1,139.93	\$	1,139.93	
) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	s	0.00	R. C.		
) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	S	0.00	S SPECIE		
) Debts and Obligations owed by the Committee	(CRO-1610)	S	0.00			
) Debts and Obligations owed to the Committee	(CRO-1620)	S	0.00	Hands I		
) Account Transfers Within the Committee	(CRO-1720)	s	0.00			
) Administrative Support	(CRO-1710)	s		S	0.00	
) Forgiven Loans	(CRO-1440)	\$		s	0.00	
) 48-Hour Notice Reports Sum	(CRO-2220)	s			0.00	
) Contributions to be Refunded		a.	0.00	S	0.00	

		rom Individual		I ontributions	g <u>1</u> of <u>1</u>		Yes	N No
L. Com	mittee Full Name	e (and Fund if applical	ble)	011111			Number	
	LEY TAYLOR FO						COIZI	1Q
_	ributor Informat	and the second sec		Add 🗖 R	emove	Contra In	- A.S. 7	
(incl	Name, Mailing Ad ude city, state, & 2			b. Job Title/I UNIVERSIT		d. Co	mments	
1745 A	LEY TAYLOR MMONS DRIVE MONS, NC 27012				NT <b>5 Name/Specific Field</b> Γ UNIVERSITY			
(336) 4	08-8501				I UNIVERSITI	e. Elec	ction Sum	to Date
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyy)	S k	Amount	5.00
	BT2021	Cash			07/07/2023	S		5.00
						\$		
						s		
	al only this Pa	and the second se			NACTOR	S		5.00
	al of ALL CR	O-1210 Pages 6 of Detailed Summary 1	Page CRO-1100)			g S		5.00
CR0-12	210		NC State Bo	ard of Elections		18 C		April 2007

NC State Board of Elections

April 2007

2023 SEP 32 IN 8: 19

Other Red	ceipt Sources				1	_	1	Amendm	
Use this form to	o report income not re-	ported on another	Come i a Tu	Pg		of	1	<b>V</b> Yes	X No
1. Committee F	o report income not re ull Name (and Fund if	amplicable)	tonn. i.e. m	terest	incom	e, not for			
BRADLEY TAY	LOR FOR COUNCIL	- applicavie;	*******				2	. ID Numbe	r
3. Type of Rece								ECQR	4Q
X Interest	Contr	ise separate CRO-	-Profit Orga	s <u>for e</u> mizatio	ach ty	Outside S	ceip	t Source.)	
4. Contributor	utormation	SCHOOL INTO THE	Add	Ren	OVe		Cure	cs of Theone	an wonger
a. Full Name, Ma (include city, a	ailing Address & Phon state, & zip)	e	b. Not-for			al ID #	d.	Comments	
	DERAL CREDIT UNIC	)N							
PO BOX 26043			c. Outside	e Som	re Fra	anation	-		
WINSTON-SAL	EM, NC 27114		***********************						
							e. ]	Election Su	m to Date
f. Account Code	g. Form of Payment						S		0.10
		h. In-Kind Descri	ption	i	Date (	mm/dd/y	yyy) j. Amount		
BT2021	Cash					01/2023	*****	S	0.05
BT2021	Cash				08/	31/2023		s	0.05
5. Total only t	his Page	H HAT BE FRANK	A ROALD		S. Mar	(Mieura)		J	
	L CRO-1250 Pag	10.0	Serie Call	12.7	- 10		S		0.10
(This line goes in (This line goes in	time 11a of Detailed Sum time 11b of Detailed Sum time 11c of Detailed Sum	unary Page CRO-110	A Stat Law	D. C.	Сонитв	l ution)	s		0.10
RO-1250		NC State Box	ard of Election	Source	s of Inci	ome)		-	2007

December 2007

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## **Disbursements**

Pg 1 of 1 Yes X No

Amendment

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

	YLOR FOR COUNC	d if applicable)		******				2. ID Nu	nber
								ECG	RHQ
3. Type of Dis	allester and an and a state of the second stat	e use separate CH	RO-1310 fo	rms for eac	ch type of	Disb	ursem	ent.)	
4. Payee Infor		ntributions to Candid		the second s			oordina	ted Party Ex	penditures
	Mailing Address & P	hone			Remov		313	124.6	
(include city, s	tate, & zip)	A CHE	0,	Coordinat	ed Comm	ittee N	ame	d. Comm	ents
FC GOV CENT NC	ER			L <b>evel Regi</b> Federal State		County		e. Election	Sum to Date
Annual Cal	7							\$	2
DT2021	g. Form of Paymen	h. Purpose Code	i. Date (m	m/dd/yyyyy)	j. Amou	ıt	k. Re	quired Ren	aarks
BT2021	Debit Card	0	07/07	7/2023	\$	1.00	PARI	KING FEE	*******************************
BT2021	Debit Card	0	07/12	2/2023	S	1.00	PARK	KING FEE	
. Payee Inform		and state of the	Ad	Id 🔲	Remove	PASIS!			MEDIEVA
L Full Name, M	lailing Address & Ph	one	and the second se	Coordinate		tee Na	me	d. Comme	ate
include city, sta	<b>ate, &amp; zip)</b> NTY BOARD OF EL			*********	*******				a nab
Account Code	g. Form of Payment	h. Purpose Code		State				S uired Rem	Sum to Date 5.(
BT2021	Cash	0	07/07/		s.	1	******	G FEE	
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T	Dees				Con the	11518	1 - 22	S	7.0
and the second se	The second se								/ []
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