## 

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 PLANCE FOR TAYETTEVILLE CAMPAIGN b. Mailing Address (include City, State and Zip Code) d. Date Filed 3037 A BOONE TRAIL EXT FAYETYEVILLE, NC 78304 e. Phone Number 2. Report Year 3. Period Start Date (mm/dd/yy) 4. Period End Date (mm/dd/yy) 5. Treasurer Full Name 9. Type of Report (check only one type of report from one category) 6. Type of Committee (Check One) Candidate Campaign Party Municipal State/County Referendum Organizational Organizational PAC Referendum Organizational Thirty-five day Quarterly Pre-referendum Independent Expenditure Joint Fundraiser Final Legal Expense Fund Pre-primary First Pre-election Second Supplemental Final (if applicable, check one) Annual 7. Type of Fund Pre-runoff Third Booster Fund Semi-annual Fourth Special Building Fund Mid Year Semi-annual 10. Special Report Name Year End Mid Year Final Other: Year End 8. Number of Fundraisers this Report Special Final Special 11. Account Information 11. Account Information a. Financial Institution Full Name a. Financial Institution Full Name c. Account Code c. Account Code b. Purpose b. Purpose 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 of Elections. FRANCO K. WEBB Printed Name of Signer Signature of Appointed Treasurer FOR OFFICE USE ONLY Delivery Method Employee: Date Received: ■ Normal Mail Registered Mail Date Postmarked: Employee: Hand Delivered **Electronically Filed** Date Scanned: Employee: Signer has not received Date Data Entered: Employee: 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.

Amendment  $N_0$ 

**Detailed Summary**Use this form to summarize all disclosure reporting forms and to total monetary information.

	2. Type of Report		3. ID Number
Franco For Fayetteville	Semi Annual 2021 Year End		
Start of Election Cycle: January 1,	2021	Total this	Total this
4) Cash on Hand at Start		Reporting Period	Election Cycle
RECEIPTS		\$ 0	\$ 0
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)	\$ 326	\$ 326
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 Organization	ons <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, 11c	, 11d and 11e)	\$ 326	\$ 326
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 326	\$ 326
13b) Contributions to Candidates/Political Commit	tees (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	5, 16 and 17)	\$ 326	\$ 326
19) Cash on Hand at End (Add lines 4 and 12 together, then subt	ract line 18)	\$ 0	\$ 0
<u>ADDITIONAL INFORMATION</u>			100 may 100 ma
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaign	(CRO-1430)	\$ 326	
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$	egenes 20 see see see see see see
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$	in the sign
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)	\$	\$

<b>Disbursem</b> Use this form to	report expenditures	from the committe	Pg e for; operating expenses,	of contributions to c	Amendment  Yes No candidate/political
committees and	coordinated party ex	penditures.			
	full Name (and Fun	d if applicable)			2. ID Number
Franco For Fay	edistribuses da la regiona de la companya de la co				
3. Type of Disb  Operating B	Art -		<i>RO-1310 forms for each t</i> didates/Political Committees	Control of the Contro	
4. Payee Inform	···	Contributions to Cant	Add	Remove	ordinated Party Expenditures
	ing Address & Phone		b. Coordinated Committee No		d. Comments
(include city, state,					Filing Fee
Cumberland Co					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Board of Elections			c. Level Registered (Specify)		
227 Fountainhead Lane			Federal 🖂	County:	
Fayetteville, NO	C		State	Municipality:	e. Election Sum to Date
28301		-			\$ 326
f. Account Code	F. CD /	h. Purpose Code		1	
I. Account Code	g. Form of Payment	n. r ur pose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
02	Check	Н	12-6-2021	\$326	Filing Fee
				\$	
4. Payee Inforn			Add 🔲	Remove	
	ing Address & Phone		b. Coordinated Committee Na	ame	d. Comments
(include city, state,	& zip)				
			c. Level Registered (Specify)		
		<u> </u>	Federal	County:	1
			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
				\$	
				\$	
4. Payee Inforn	 nation		Add	Remove	
	ing Address & Phone		b. Coordinated Committee Na		d. Comments
(include city, state,	=				di commenta
			c. Level Registered (Specify)		
			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
				\$	
				\$	
5. Total only th	is Page			<u>]</u>	\$ 326
CONTRACTOR	CRO-1310 Pages				\$ 320
	line 13a of Detailed Sun	mary Page CRO-1100	if Operating Expenses)		
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)					\$ 326
			if Coordinated Party Expenditu	res)	
	es (List detailed ex				
A* - Media	B* - Printing	C* - Funda		D - To Anothe	
E - Salaries I - Postage	F* - Equipment J - Penalties	G - Politica K* - Office			Public Office Expenses n to Legal Expense Fund
O* - Other	o - i chanos	K - Office	у маринаса Подражения	A Donatio	n to regat expense rund
* Codes requir	e detailed explanat	ion in required re	marks field (k)		

Outstanding L	oans		Pg	Amendment of Yes No
Use this form to report	t any outstanding loans rec	eived during	a previous reporting period	and until the loan is paid in full.
	me (and Fund if applical	ble)		2. ID Number
Franco For Fayettevil	le			
3. Lender Informatio	n 🗵	Add	Remove	
a. Full Name, Mailing Ado			itle/Profession	d. Comments
(include city, state, & zi	p)	Busine	ess Owner	Self Funding
Franco Webb 1967 Merrimac Drive				
Fayetteville		c. Emple	yer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
NC			3	12-6-2021
28304				f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged		i. Original Loan Amount	j. Remaining Loan Balance
	n. Security Fredged			
%			\$ 326	\$ 326
k. Full Name of Lending I	l. Loan Number			
3. Lender Informatio	n	Add	Remove	
a. Full Name, Mailing Add		eaneggeverenns-ovegreeg	itle/Profession	d. Comments
(include city, state, & zi	化类型 医克里特氏病 医电影 医电影 医电影 医电影			
				e. Start Date (mm/dd/yyyy)
		c. Emplo	yer's Name/Specific Field	
				f. End Date (mm/dd/yyyy)
				33337
g. Rate	h. Security Pledged		i. Original Loan Amount	j. Remaining Loan Balance
%			\$	
			3	\$
k. Full Name of Lending I	l. Loan Number			
3. Lender Informatio		Add	Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job T	tle/Profession	d. Comments
(include city, state, & Zi	<u>')</u>			
				e. Start Date (mm/dd/yyyy)
		e. Emplo	yer's Name/Specific Field	
			f. End Date (mm/dd/yyyy)	

\$

i. Original Loan Amount

j. Remaining Loan Balance

I. Loan Number

326

326

\$

\$

\$

g. Rate

h. Security Pledged

%

k. Full Name of Lending Institution

5. Total of ALL CRO-1430 Pages

4. Total only this Page