	eport Cover eneral report and committee in n to update information	nformation, must be signed	d and submitted along with	☐ Yes ☑ No n other detailed forms.
1. Committee Info. a. Full Name	rnation (1)		en entre a temporar	c. ID Number
Committee to elect	Kevin S. Gordon			
CONTRACTOR CONTRACTOR OF THE PROPERTY OF THE P	clude City, State and Zip Code)			d. Date Filed
Post Office Box 34 Waco, NC 28169-0				10/29/2024
				e. Phone Number
				(704) 470-5378
2. Report Year -	3. Period Start Date (mm/d	4. Period End D (mm/dd/yy)	2. I TEASUTEL T	A Committee of the Comm
2024	07/01/2024	10/19/2024	Kevin (Alex) (	Gordon
6. Type of Commit			check only one type of rep	
Candidate Camp	paign Party Referendum	Municipal Organizational	State/County Organizational	Referendum Organizational
Independent Expenditure	Joint Fundraiser	Thirty-five day	Quarterly	Pre-referendum
Legal Expense F	Fund (Japplicable, check one) (6	Dry neimory	Pient	Final
"Booster Fund"	(Pappacase, Sacrone)	Pre-primary Pre-election	First Second	Supplemental Final
Building Fund		Pre-runoff Semi-annual	Third Fourth	Annual Special
		Mid Year	Semi-annual	
Other:		Year End Final	Mid Year Year End	10. Special Report Name
8. Number of Fund	traisers this Report	Special	Final Special	
11. Account Inform a. Financial Institution			secount Information : ancial Institution Full Name	-, -, -, -, -, -, -, -, -, -, -, -, -, -
Fidelty Bank b. Purpose	c. Account Code	b, Pur	ennee	c. Account Code
campaign exp	KSG			CARLOUNI COM
	d. Period Begin Balance			d. Period Begin Balance
	\$ 1306.01			\$
CERTIFICATION				J
I certify that the Cor	mmittee or Fund is in compli	ance with all applicable pro	ovisions of Article 22A, 2	2B, & 22D-22M of Chapter 163 of
the NC General Stat	tutes and that no funds are cond correct and that I have been	mmingled with prohibited	or other non-disclosed fun	nds. I further certify that this report
Ze u	in A- toude	/// N		10/29/2u
FOR OPRICE USE	Printed Name of Signer		of Appointed Treasurer	Date
Date Received:	11/05/24	Employee:	Calourdates	Delivery Method
Date Postmarke		Employee:	patient of the second of the s	Normal Mail.  Registered Mail
	G.			Hand Delivered Electronically Filed
Date Scanned: Date Data Enter	red:	Employee: Employee:		Signer has not received mandatory training
Please Note: Th				ldress, treasurer, assistant treasurer,
		an of books information, or ment of Organization (CRO		CLEVELAND COUNTY  nittee changes. NEW 174 PN 2.0.

## **Detailed Summary**

Amendment

Yes No

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

1. Committee Full Name (and Fand if applicable) 2. Ty	AND		ID Number
	Third Qtr.		
Start of Election Cycle: January 1,	)24	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 1306.01	\$ 1306.01
incorpos de la companya de la compa			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$ 10000.00	\$ 41261.68
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$ .
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$ 0.00	\$ 12000.00
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 Organizations	(CRO-1250)	\$	\$
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 a	and 11e)	\$ 10000.00	\$ 53261.68
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 7484.45	\$ 40065.14
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)	\$ 0.00	\$ 10680.99
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 an	nd 17)	\$ 7484.45	\$ 50746.13
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract lin		\$ 3821.56	\$ 3821.56
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		\$	\$
20) Contributions to be Refunded	(CRO-1215)	Ψ	Ψ

					Amen	ument		
Contributions from Individuals	Pg	_1	of	1_		Yes	$\boxtimes$	No
			~-~		. 1			

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

	ittee Full Name (a	ind Fund if applicabl	(e)		lengt edition	2. ID Numl	oer	-11
Committe	e to elect Kevin S.	Gordon					KSG-1	
	outor Information		Ø	Add Remo	we the		, 1, 1/B	
	e, Mailing Address & city, state, & zip)	Phone		b. Job Title/Profession Self		d. Comments		
Kevin Go	rdon		30000000		· · · · · · · · · · · · · · · · · · ·			
PO Box 3 Waco NC				e. Employer's Name/Spec Retired				
W acc 110	20107			<b>-</b>		e. Election Su	m to Date	
					·	\$	6000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	and Description	j. Date (mm/dd/yy		k, Amount	
	KSG-1	Debit			09/09/20	024	\$	2000.00
	KSG-1	Debit			10/18/2	024	\$	3000.00
							\$	
and the state of t	huter informatie		N	Add Rem	ove			
	ie, Mailing Address & city, state, & zip)	Phone		b. Job Title/Profession Self		d. Comments		
Millie Ho	lbrook							·
201 Troop Shelby, N				e. Employer's Name/Spe- Retired	cific Field			
Silciby, i	IC 20130			Reineu		e. Election Su	m to Date	
						\$	2500.00	
L/Prior	g. Account Code	h. Form of Payment	i. In-K	and Description	j, Date (mm/dd/yy	yy).	k. Amount	
	KSG-1	Check			09/05/2	024	\$	2500.00.
						,	\$	
							\$	
		Orași (Carlos de Sentes) Orași (Carlos de Sentes)	121	YAMI YAMI Kem	Company of the Compan			
A STATE OF THE PARTY OF THE PAR	te, Mailing Address &	Phone:		b: Job Title/Profession		d. Comments		
Edwin Ho	eity, state, & zip) olbrook	<u> </u>		Self				
201 Troop				e. Employer's Name/Spec	cific Field			
Shelby N	C 28150			Retired		e. Election St	m to Date	e de la companya de l
						\$	2500.00	
f. Prior	g, Account Code	h, Form of Payment	i. In-K	and Description	j. Date (mm/dd/yy	yy)	k. Amount	
	KSG-1	Check			09/05/2	024	\$	2500.00
							\$	
							\$	107-2-1
		A. POSSELE CONTRACTO		ATTE SURFICION STATE	2009 ACT (5	\$		10000.00
		1774 Pagos 😁 🗓			Tall Garages	\$		10000.00
		Paraller Stranger (1946)	es iren			Ψ		10000.00

## Disbursements Pg 1 of 2 Amendment Yes Viv. (a Vision)

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

	Il Name (and Fund ect Kevin S. Gordon	if applicable)		New Section 1997		Harris Haller	2. ID Number
3. Type of Disbu	rsement (Pleas	e use separate Ck	(()-	1310 forms for e	ach ty	e of Dishursame	All and Destry Evenen ditures
Operating Ex	a construent and a second and a	Contributions to Cano	lida A c	Contract of the Contract of th	ees	Remove -	rdinated Party Expenditures
a. Full Name, Mailin		<u> </u>	000000000000000000000000000000000000000	Coordinated Commi	ttee Nar		d, Comments
(include city, state, &	č zip)				-		
Go Big Print PO Box 248			c. ]	Level Registered (Sp	ecify)		
Shelby NC 2815	0		F	Federal		County: Municipality:	e. Election Sum to Date
		-		State	<u>Ļ</u>	wumcipanty.	\$ 3130.45
		I D C I				j. Amount	k. Required Remarks
f. Account Code	g. Form of Payment	h, Purpose Code		i. Date (mm/dd/yyy	y)		Printing Printing
KSG-1	Check	В		09/09/2024		\$2529.98	Deinting
KSG-1	Check	В		09/24/2024		\$600.47	Printing
4. Paper listora	and the second s	<u> </u>		dd Coordinated Comm		Kemové : 1	d. Comments
a. Full Name, Mailin (include city, state,	ng Address & Phone & zin)		0.	Coordinated Comm	ILLEE NA	inc	u. Comments
CC GOP	, , , , , , , , , , , , , , , , , , ,						
Shelby NC 2815	50		е. Г	Level Registered (Sp Federal	iecity)	County:	
Sheloy IVC 2013	,,,		È	State		Municipality:	c. Election Sum to Date
							\$ 500.00
L Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyy	у)	j. Amount	k. Required Remarks
KSG-1	Check	О		08/21/2024		\$500.00	Donation
						\$	
d.Payseinform				200 March 1980 March 1		Remove	
	ng Address & Phone	or the Late of the		Coordinated Comm	ittee Na		d. Comments
(include city, state,							
Constant Contact 5001 Celebratio	n Pointe Avenue		c.	Level Registered (S)	ecify)		:
Gainesville, FL	32601		Ē	Federal	$\boxtimes$	County:	The state of the State S
			┞┖	State		Municipality:	e. Election Sum to Date
	t sa	h. Purpose Code					\$ 2344.00
f. Account Code	g. Form of Payment			i, Date (mm/dd/yy)	'Y)	j. Amount	k. Required Remarks Email Service
KSG-1	CC	0	_	07/08/2024		\$145.00	Fig. 3 Garden
KSG-1	cc	О		08/07/2024		\$145.00	Email Service
							\$ 3920.45
(This line goes in	line 13a of Detailed Sun	nmary Page CRO-110	0 if	Operating Expenses)			\$ 7484.45
, .	line 13b of Detailed Sun						\$ 7484.45
,	line 13c of Detailed Sun				фенини		Programme Control (No. 2008) (No. 1880)
A* - Media	B* - Printing F* - Equipment	C* - Fund	ira	ising		D - To Anoth	er Candidate Public Office Expenses
I - Postage	J - Penalties	K*-Offi					n to Legal Expense Fund
O* - Other		ion in Federard T					The state of the s

No

## Disbursements Pg 2 of 2

Amendment

Yes No

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

	Il Name (and Fund	if applicable)				The state of the s	2. ID Number
3. Type of Disbu	ect Kevin S. Gordon rsement (Pleas	e usexeparate Cl				e of Disburseme	ants) estres v
Operating Ex	penses		dida A (	tes/Political Committe	es	Coo Remove.	rdinated Party Expenditures
4. Payee Inform.  a. Full Name, Mailin		ga petitory a 🔼 :		Coordinated Commi	ttee Nar		d. Comments
(include city, state, è	k zip)						
Constant Contact 5001 Celebration			c. J	Level Registered (Sp	ecify)		
Gainesville, FL				Federal		County:	e. Election Sum to Date
				State	<u> Ш</u>	Municipality:	
							\$ 2344.00
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy	y)	j. Amount	k. Required Remarks  Email Service
KSG-1	CC	0	_	09/09/2024		\$157.00	Email Service
KSG-1	CC	O		10/07/2024		\$157.00	Eman Service
		<b>18</b>		dd (Tirrethiae)		Remove :	d. Comments
a. Full Name, Mailin (include city, state,	ng Address & Phone & zin)		b.	Coordinated Commi	mee Na	me	u. Comments
Chase Credit Ca							
PO Box 6294 Carol Stgream II	I. 60197		c.	Level Registered (Sp Federal	ecity)	County:	
Caron Signoun I	E 00157	,	Ē	State		Municipality:	e. Election Sum to Data
							\$ 3250.00
f. Account Code	g, Form of Payment	h. Purpose Code		i. Date (mm/dd/yyy	y)	j. Amount	k. Required Remarks
KSG-1	CC	A		09/09/2024		\$3250.00	Billboard
					-	\$	
4:3 laves Inform	Alfon:		A			Remove	TO THE PERSON NAMED IN COLUMN TO THE PERSON NAMED IN COLUMN THE PERSON NAMED IN COLUMN TO THE PE
a. Full Name, Maili	ng Address & Phone		b.	Coordinated Comm	ittee Na		d. Comments
(include city, state,	& zip)						
			¢.	Level Registered (Sp	ecify)		
			片	Federal State	H	County: Municipality:	e, Election Sum to Date
			-				\$
L Account Code	g, Form of Payment	h: Purpose Code		i. Date (mm/dd/vyy	v)	j. Amount	k. Required Remarks
						\$	
			$\dashv$				
						\$	
							\$ 3564.00
, .	line 13a of Detailed Sun line 13b of Detailed Sun		-		/Dolitic	al Comm)	\$ 7484.45
	tine 136 of Detailed Sun line 13c of Detailed Sun						
**** Media	B* - Printing	endanceode al C* - Fun		TO THE STATE OF TH	grani di Grani	<b>D</b> - To Anoth	er Candidate
E - Salaries	F* - Equipment	G - Politic	al F	Party		H* - Holding	Public Office Expenses
1 - Postage	J - Penalties	K* - Offic	e E	дреняез		А NOURIO	n to Legal Expense Fund