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

1. Committee Information
   a. Full Name  
   Committee to elect Kevin S. Gordon
   b. Mailing Address (include City, State and Zip Code)
   Post Office Box 340
   Waco, NC 28169-0340

2. Report Year  | Period Start Date | Period End Date | Treasurer Full Name
   2022         | 07/01/2022       | 12/31/2022      | Sandra Canipe Stroup

3. Type of Committee check one:
   □ Candidate Campaign
   □ PAC
   □ Independent
   □ Expenditure
   □ Legal Expense Fund
   □ Referendum
   □ Joint Fundraiser
   □ Municipal
   □ State/County
   □ Organizational
   □ Thirty-five day
   □ Quarterly
   □ Organizational
   □ Pre-referendum
   □ Pre-primary
   □ First
   □ Pre-election
   □ Second
   □ Pre-runoff
   □ Third
   □ Semi-annual
   □ Fourth
   □ Mid Year
   □ Mid Year
   □ Year End
   □ Special
   □ Final

4. Number of Fundraisers for this report: 0

5. Account Information
   a. Financial Institution Full Name
      The Fidelity Bank
   b. Purpose
      Campaign expenses
   c. Account Code
      KSG-1
   d. Period Begin Balance
      $ 359.78

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.

Sandra Canipe Stroup
01/27/2023

Printed Name of Signer
Signature of Appointed Treasurer
Date

FOR OFFICE USE ONLY
Date Received: 1/30/23
Date Postmarked: ____________________
Date Scanned: ____________________
Date Data Entered: ____________________

Delivery Method
□ Normal Mail
□ Registered Mail
□ Hand Delivered
□ Electronically Filed
□ Signer has not received mandatory training

Employee: B0
Employee: ____________________
Employee: ____________________
Employee: ____________________
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

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

<table>
<thead>
<tr>
<th>Committee to elect Kevin S. Gordon</th>
<th>2022 Year End</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Start of Election Cycle:</strong></td>
<td><strong>January 1,</strong> 2020</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Item</th>
<th>Reporting Period</th>
<th>Election Cycle</th>
</tr>
</thead>
<tbody>
<tr>
<td>4) Cash on Hand at Start</td>
<td>$359.78</td>
<td></td>
</tr>
<tr>
<td>5) Aggregated Contributions from Individuals</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>6) Contributions from Individuals</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>7) Contributions from Political Party Committees</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>8) Contributions from Other Political Committees</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>9) Loan Proceeds</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>10) Refunds/Reimbursements To the Committee</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>11) Other Receipt Sources</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>11a) Interest on Bank Accounts</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>11b) Contributions from Not-for-Profit Organizations</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>11c) Outside Sources of Income</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>11d) Legal Expense Fund – Other Sources</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>11 e) Exempt Purchase Price Sales</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)</td>
<td>$0.00</td>
<td></td>
</tr>
<tr>
<td>13) Disbursements</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13a) Operating Expenditures</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>13b) Contributions to Candidates/Political Committees</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>13c) Coordinated Party Expenditures</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>14) Aggregated Non-Media Expenditures</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>15) Loan Repayments</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>16) Refunds/Reimbursements From the Committee</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>17) In-Kind Contributions</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)</td>
<td>$0.00</td>
<td></td>
</tr>
<tr>
<td>19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)</td>
<td>$359.78</td>
<td></td>
</tr>
</tbody>
</table>

This form is prepared in accordance with the North Carolina Campaign Finance Act and the North Carolina Ethics in Public Service Act.

CRO-1100 NC State Board of Elections August 2008