Disclosure Report Cover

Use this form for general report and committee information, must be submitted along with other detailed forms.
Do not use this form to update information.

1. Committee Information
   a. Full Name: Friends of Shaun Murphy
   b. Mailing Address (Include City, State and Zip Code): 2465 Dixon School Rd., Kings Mtn., NC 28086
   c. ID Number
   d. Date Filed: 12-14-2020
   e. Phone Number: 704-300-8760

2. Report Year: 2020
   3. Period Start Date (mm/dd/yyyy): 10-18-2020
   4. Period End Date (mm/dd/yyyy): 12-14-2020
   5. Treasurer Full Name: Shaun Murphy

6. Type of Committee (Check One)
   - Candidate Campaign
   - P A C
   - Independent Expenditure
   - Legal Expense Fund
   - Political Party

7. Type of Fund (If applicable, check one)
   - Booster Fund
   - Building Fund
   - Other:

8. Number of Fundraisers this Report

9. Type of Report (Check only one type of report from one category)
   - Municipal
   - Organizational
   - Thirty-five day
   - Pre-primary
   - Pre-election
   - Pre-runoff
   - Semi-annual
   - Mid Year
   - Year End
   - Final
   - Special

10. Special Report Name

11. Account Information
   a. Financial Institution Full Name: BB&T
   b. Purpose
   c. Account Code
   d. Period Begin Balance: $717.00

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.

Printed Name of Signer: Shaun Murphy
Signature of Accountant: Shaun Murphy
Date: 12/14/2020

FOR OFFICE USE ONLY

Date Received: 12-14-2020
Delivery Method: CL

Date Postmarked: ____________
Employee: ____________

Date Scanned: ____________
Employee: ____________

Date Data Entered: ____________
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-2104A-E) to make committee changes.
### Detailed Summary

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

#### 1. Committee Full Name (and Fund if applicable)

| Friends of Shawn Murphy | Elected Position | RECEIVED |

| Start of Election Cycle: January 1 |

| 4) Cash on Hand at Start |

| 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-1240) |
| 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) |
| 11e) Exempt Purchase Price Sales (CRO-1265) |

| 12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e) |

| EXPENDITURES |

| 13) Disbursements |
| 13a) Operating Expenditures (CRO-1310) |
| 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-1240) |
| 16) Refunds/Reimbursements from the Committee (CRO-1320) |
| 17) In-Kind Contributions (CRO-1350) |

| 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) |

| 19) Cash on Hand at End (Add items 4 and 12 together, then subtract line 18) |

| ADDITIONAL INFORMATION |

| 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-1410) |
| 26) Forgiven Loans (CRO-1414) |
| 27) 48-Hour Notice Reports Sum (CRO-222) |
| 28) Contributions to be Refunded (CRO-1215) |

| CRO-1100 | NC State Board of Elections | August 2008 |
Disbursements

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

1. Committee Full Name (and Fund if applicable):
   Friends of Shawn Murphy

2. ID Number

3. Type of Disbursement (Please use separate CRO-1190 forms for each type of Disbursement):
   - [ ] Operating Expenses
   - [ ] Contributions to Candidate or Political Committee
   - [ ] Coordinated Party Expenditures

4. Payee Information
   - [ ] Add
   - [ ] Remove
   a. Full Name, Mailing Address & Phone (include city, state, & zip):
      Totally Free Clothes Store
      1146-B W. Warren St.
      Shelby, NC 28150
   b. Coordinated Committee Name
   c. Level Registered (Specify)
      - [ ] Federal
      - [ ] County
      - [ ] State
      - [ ] Municipality
   d. Comments
   e. Election Sum to Date
      $ 117.00
   f. Account Code
      01
   g. Form of Payment
      check
   h. Purpose Code
      (a) (b) (c) (d) (e) (f) (g) (h) (i) (j) (k) (l) (m) (n) (o) (p) (q) (r) (s) (t) (u) (v) (w) (x) (y) (z)
   i. Date (mm/dd/yyyy)
      12-14-2020
   j. Amount
      $ 117.00
   k. Required Remarks
      Donation

5. Total only this Page
   $ 117.00

6. Total of ALL CRO-1310 Pages
   (This line goes in line 16a of Detailed Summary Page CRO-1190 if Operating Expenses)
   (This line goes in line 16b of Detailed Summary Page CRO-1190 if Contrib to Candidate or Political Comm.)
   (This line goes in line 16c of Detailed Summary Page CRO-1190 if Coordinated Party Expenditures)
   $ 117.00

7. Purpose Codes (List detailed expenditure code in (h.) above)
   - A* - Media
   - B* - Printing
   - C* - Fundraising
   - D* - To Another Candidate
   - E* - Salaries
   - F* - Equipment
   - G* - Political Party
   - H* - Holding Public Office Expenses
   - I* - Postage
   - J* - Penalties
   - K* - Office Expenses
   - L* - Donation to Legal Expense Fund
   * Codes require detailed explanation in required remarks field (k)

CRO-1310  NC State Board of Elections  December 2009
Refunds/Reimbursements From the Committee

Use this form to report refunds/reimbursements, including any returns or contributions returned to the contributor.

1. Committee Full Name (and Fund if applicable):

2. ID Number:

3. Payee Information

<table>
<thead>
<tr>
<th>Full Name, Mailing Address &amp; Phone</th>
<th>Type of Committee</th>
<th>Original Receipt Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shaun Murphy</td>
<td>PAC</td>
<td>3.12.2020</td>
</tr>
<tr>
<td>245 Dixon School Road</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kings Mtn., NC 28086</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. Purpose Code: $500.00

5. Total only this page: $500.00

6. Purpose Codes (List detailed disbursement code in (f) above)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>L</td>
<td>Returned to Contributor</td>
</tr>
<tr>
<td>M</td>
<td>Overpayment for Service</td>
</tr>
<tr>
<td>N</td>
<td>Exceeded Contribution Limit</td>
</tr>
<tr>
<td>P*</td>
<td>Reimbursement of In-Kind</td>
</tr>
<tr>
<td>O*</td>
<td>Other</td>
</tr>
</tbody>
</table>

* Codes require detailed explanation in required remarks field (m)
Loan Repayments

Use this form to report payments on an existing Loan Repayment.

1. Committee Full Name (and Fund if applicable): Friends of Shaun Murphy

2. ID Number

3. Lender Information
   a. Full Name, Mailing Address & Phone (include city, state, & zip):
      shaunmurphy
      245 Dixon School Road
      Kings Mountain, NC 28086
      704-300-8760
   b. Comments
   c. Original Loan Date
      1-07-2020
   d. Original Loan Amount
      $100.00

4. Remaining Loan Balance
   a. Remaining Loan Balance
      $100.00
   b. Account Code
      Cash
   c. Form of Payment
   d. Date (mm/dd/yyyy)
      12-14-2020
   e. Repayment Amount
      $100.00

5. Lender Information
   a. Full Name, Mailing Address & Phone (include city, state, & zip):
   b. Comments
   c. Original Loan Date
   d. Original Loan Amount
      $0

6. Remaining Loan Balance
   a. Remaining Loan Balance
      $0
   b. Account Code
   c. Form of Payment
   d. Date (mm/dd/yyyy)
   e. Repayment Amount
      $0

4. Total only this Page
   $100.00

5. Total of ALL CRO-1420 Pages
   (This line must be on line 15 of Detailed Summary Page CRO-1100)
   $100.00
Certification to Close Committee

This Certification is used to express the intent to close the committee after all funds have been properly disbursed.

This Certification is filed at the Board of Elections office where the committee's campaign reports are filed.

FILED BY:
Committee Name: Friends of Shawn Murphy
Treasurer Name: Shawn Murphy
Treasurer Address: 243 Dixon School Rd.
             (include city, state, & zip) Kings Mtn., NC 28086
Treasurer Phone: 704-300-8760

I certify that the above mentioned Committee intends to close and cease existence. Upon signing this certification, I declare that all funds have been distributed and reported (if required). In addition, no contributions will be accepted or disbursements made after the "Final Report" is filed or this form is signed. If the Committee at any future time intends to accept or spend funds in support or opposition of any candidate or ballot issue, a new political committee must be formed and registered with the Board of Elections before such activities may commence.

Committees that have filed under the $1,000 threshold will only be required to sign this Certification. No "Final Report" will be required for committees meeting this criterion. Any Committee that did not file under the $1,000 threshold must submit a "Final Report" with this Certification. This report must have a zero balance with no outstanding loans or debts.

12/14/2020
Date Signed

Signature

CRO-3400 Certification to Close Committee