Disclosure Report Co	ver		Amendment
Use this form for general report	and committee information	must be signed and si	binited along with other detailed forms.
Do not use this form to update i	nformation.	.7.70	OF ELECTRINS
1. Committee Information		2018 IAM	22 1110 0
a. Full Name		TUIU JAN	23 AM IQ: 3 Number
a. Full Name Committee to b. Mailing Address (include City, Sta	Elect Bruce	e Boy PFI	FIVED
b. Mailing Address (include City, Sta	te and Zip Code)		d. Date Filed
108 Rock to	nd Cf.		1/23/2018
Kernersuille,	NC 27284		e. Phone Number
			336-996-4699
2. Report Year 3. Period Start	Date (mm/dd/yy) 4. Period	End Date (mm/dd/yy)	
			Bruce Porter Boyer
6. Type of Committee (Check C			type of report from one category)
Candidate Campaign Par	the state of the s	State/County	Referendum
☐ PAC ☐ Ref	erendum Organizatio	nal Organizat	
☐ Independent Expenditure ☐ Join			
Legal Expense Fund	☐ Pre-primary	☐ First	
	☐ Pre-election	Seco	ond Supplemental Final
7. Type of Fund (if applicable,	check one) Pre-runoff	Thir	
Booster Fund	Semi-annua	I Four	th Special
☐ Building Fund	☐ Mid Y	ear Semi-anni	ual
	Year E	nd Mid	Year 10. Special Report Name
Other:	Final	Year	SOPE TRO
8. Number of Fundraisers this	Report	Final	
		☐ Special	
11 Account Information	THE REST OF THE PARTY OF THE PA	III Account Inform	nation
11. Account Information		11. Account Inform	
a. Financial Institution Full Name	3	11. Account Informa. Financial Institution	
a. Financial Institution Full Name First Citizen T	Bank		
a. Financial Institution Full Name	Sank c. Account Code		
a. Financial Institution Full Name First Citizen T	c. Account Code	a. Financial Institution	Full Name
a. Financial Institution Full Name First Citizen T	c. Account Code BP 13 108	a. Financial Institution	c. Account Code
a. Financial Institution Full Name First Citizen T	c. Account Code	a. Financial Institution	Full Name
a. Financial Institution Full Name First Citizen T	c. Account Code BP 13 108	a. Financial Institution	c. Account Code
a. Financial Institution Full Name First Citizen T	c. Account Code BP 13 10 8 d. Period Begin Balance	a. Financial Institution	c. Account Code d. Period Begin Balance
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a. Financial Institution Full Name First Citizen T b. Purpose CERTIFICATION I certify that the Committee or Fun	d. Period Begin Balance s dis in compliance with all appart no funds are commingled wi	a. Financial Institution b. Purpose plicable provisions of Arth prohibited or other no	c. Account Code d. Period Begin Balance \$ ticle 22A, 22B & 22D-22M of Chapter 163 n-disclosed funds. I further certify that this
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a. Financial Institution Full Name First Citizen b. Purpose CERTIFICATION I certify that the Committee or Furof the NC General Statutes and the report is complete, true and correct Printed Name of Sign FOR OFFICE USE ONLY Date Received: Date Postmarked: Date Scanned: Date Data Entered:	c. Account Code BP 13 10 8 d. Period Begin Balance \$ O and is in compliance with all appart no funds are commingled with and that I have been trained by the complete of t	a. Financial Institution b. Purpose plicable provisions of Arth prohibited or other no by the NC State Board of Appointed Treasing atture of Appointed Treasing	c. Account Code d. Period Begin Balance \$ ticle 22A, 22B & 22D-22M of Chapter 163 n-disclosed funds. I further certify that this Elections. c/23/267 Date Delivery Method Normal Mail Registered Mail Hand Delivered

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		ndividual contribution	THE RESERVE OF THE PARTY OF THE	ontributions und	er \$50 if form CF	_		
		ne (and Fund if app				2. 10) Number	
Co	mmittee	to Elect	Bruce	Boyor				
3. Con	tributor Inform	ation		Add Re	move	40157		
a. Full Name, Mailing Address & Phone			b. Job Title/Profe	ssion	d. Co	mments		
	de city, state, & zip)			develop	0-/			
Scott L. Pope 1349 S. Park Dr., Ste C			c. Employer's Name/Specific Field					
			PoveCo	ompanies				
Kernersville, NC 27284-3687		, , , ,			e. Election Sum to Date			
						\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy	yy) k	k. Amount	
		check			10/26/2017		\$ 500	
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	BPB108	cash				7	\$ 0.25	
	tributor Inform			Add Re				
	lame, Mailing Addr de city, state, & zip)			b. Job Title/Profe	ssion	d. Co	mments	
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4. Tot	tal only this P	age				\$	1.120.25	
5. Tot	tal of ALL CI	RO-1210 Pages 6 of Detailed Summary I	Page CRO-1100)			\$	1,120.25	

Detailed Summary

Amendment No

☐ Yes Use this form to summarize all disclosure reporting forms and to total monetary information 1. Committee Full Name (and Fund if applicable) 2. Type of Report 3. ID Number Committee to Elect Bruce Boyer FinaloyE Total this Total this Start of Election Cycle: January 1, 2017 Reporting Period **Election Cycle** 4) Cash on Hand at Start 222.88 \$ RECEIPTS 5) Aggregated Contributions from Individuals (CRO-1205) \$ 1120,25 6) Contributions from Individuals (CRO-1210) \$ 1000 7) Contributions from Political Party Committees (CRO-1220) \$ \$ 8) Contributions from Other Political Committees (CRO-1230) \$ 9) Loan Proceeds (CRO-1410) \$ \$ 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) \$ \$ 1343.13 1000 12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e) \$ **EXPENDITURES** 13) Disbursements (CRO-1310) 1,342.96 13a) Operating Expenditures \$ 766.37 13b) Contributions to Candidates/Political Committees (CRO-1310) \$ \$ \$ 13c) Coordinated Party Expenditures (CRO-1310) \$ 14) Aggregated Non-Media Expenditures (CRO-1315) \$ \$ (CRO-1420) \$ 15) Loan Repayments \$ 16) Refunds/Reimbursements from the Committee (CRO-1320) 0.25 10.75 17) In-Kind Contributions (CRO-1510) \$ \$ 1343.21 777,12 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) 0.08 \$ 222.88 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18 ADDITIONAL INFORMATION (CRO-1330) \$ 20) Non-Monetary Gifts Given to Other Committees 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) \$ (CRO-1710) \$ 25) Administrative Support \$ \$ 26) Forgiven Loans (CRO-1440) \$ 27) 48-Hour Notice Reports Sum (CRO-2220) \$

28) Contributions to be Refunded

(CRO-1215)

\$

							American American	
Disbursen	ients				Pgo	f (Amendment Yes No	
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committees and	coordinated party ex	xpenditures	tice for	operating ex	penses, controd	tions	to candidate/pontical	
	Full Name (and Fun			N mark	Control Valleton St		2. ID Number	
Committee to Elect Bruce Boyar								
3. Type of Dist	oursement (Pleas	e use separate Ci	RO-131	0 forms for	each type of Dis	hurse	ement)	
Operating Exp		ntributions to Candid					ted Party Expenditures	
4. Payee Inform					Remove		And Anna Marian Control of the Anna Marian Contr	
	Mailing Address & Ph	none			ted Committee Nam	ne	d. Comments	
(include city, state								
Staple	4							
210 H	armon Creek	, Pa		c. Level Reg	istered (Specify)			
	ersuille, Mc			Federal				
(ACTIO	Noune ! I'm	21254		State	☐ Municip	pality:	e. Election Sum to Date	
							\$ 423.96	
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(D	School State of the State of th			74 - 14 - 1 - 1 - 1	3	_		
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	ing Address & Phone			b. Coordinat	ed Committee Nan	ne	d. Comments	
(include city, sta								
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(include city, stat	te, & zip)							
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	line 13b of Detailed Sun					,)	\$ 1342.96	
	line 13c of Detailed Sum					2		
	odes (List detailed	THE RESERVE OF THE PARTY OF THE						

C* - Fundraising

G - Political Party

K* - Office Expenses

D - To Another Candidate

H* - Holding Public Office Expenses

Q* - Donation to Legal Expense Fund

B* - Printing

J - Penalties

F* - Equipment

A* - Media

E - Salaries

I - Postage

O* Other

In-Kind Contributions Pg of Yes Amendment Yes

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund. Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)			2. ID Nur	nber	
Committee to Elect Bruce	Boyer				
3. Contributor Information	Add Rei	nove			
a. Full Name, Mailing Address & Phone (include city, state, & zip) Bruce P. Boyer 108 Rockford CA- Kerners v. Ile, 140	b. Type of Contril Individual Candidate Party PAC	outor	c. Comments		
V- 1 NC	Referendum		d Flaction	Election Sum to Date	
Kerners ville , is C	Other Receipt	Source	\$	oun to Date	
e. Description		f. Date (mm/dd/yyy	y) g. Fair	Market Amount	
Darkins		10/27/201	7 \$	0.25	
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4. Total only this Page			\$ (3.25	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)			\$	0.25	

Z No