Disclosure Report Cover

L 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 Info	rmation							
a. Full Name					c. ID Number			
Moger for Council								
	lude City, State and Zip Code)				d. Date Filed			
4225 Stoney Brook Clemmons, NC 270					12/30/19			
12					e. Phone Number			
					(336) 831-4233			
2. Report Year	3. Period Start Date (mm/	dd/yy) 4. Period (mm/dd/yy)	End Date	5. Treasurer F	ull Name			
2019	10/22/19	12/3	31/19Co	Connor Michae	el Groce			
6. Type of Commit	tee (Check One)	9. Type of Report	t (check or	nly one type of rep	ort from one category)			
Candidate Camp PAC Independent Expenditure	Referendum Joint Fundraiser	Municipal Organizational Thirty-five day		County Organizational Quarterly	Referendum Organizational Pre-referendum			
Legal Expense F 7. Type of Fund "Booster Fund" Building Fund Other:	fund (if applicable, check one)	Pre-primary Pre-election Pre-runoff Semi-annual Mid Year Year End		First Second Third Fourth Semi-annual Mid Year	 Final Supplemental Final Annual Special 10. Special Report Name			
8. Number of Fund	Iraisers this Report	Final Special		Year End Final	12 C			
				Special	63			
11. Account Inform	nation		11. Account	Information	E F			
a. Financial Institution	Full Name		a. Financial Ins	titution Full Name				
Fidelity Bank								
b. Purpose Committee	c. Account Code		b. Purpose		c. Account Code			
Commutee	MI				6			
	d. Period Begin Balanc	e			d. Period Begin Balance			
	\$ 802.90				\$			
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. Connor Groce 12/30/19 Printed Name of Signer Signature of Appointed Treasurer								
FOR OFFICE USE (ONLY			1				
Date Received:	2114/2020	Employee:	_d	3 -	Delivery Method Normal Mail			
Date Postmarke	ed:	Employee:			Registered Mail Hand Delivered			
Date Scanned:		Employee:			Electronically Filed Signer has not received			
Date Data Enter	red:	Employee:			mandatory training			
Please Note: Th		an of books informat ment of Organization	tion, or account n (CRO-2100A	t information.	dress, treasurer, assistant treasurer, hittee changes. August 2008			
CRO-1000		NC State Board of	1.1 Alimonta		August 2009			

Amendment Ye

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No

Detailed Summary

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

Amendment

Use this form to summarize all disclosure reporting forms a			
1. Committee Full Name (and Fund if applicable)	2. Type of Report		3. ID Number
Moger for Council	Fourth Quarter		
Start of Election Cycle: January 1,	2019	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	_	\$ 802.90	\$ 0
RECEIPTIS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 0	\$ 0
6) Contributions from Individuals	(CRO-1210)	\$ 1445.00	\$ 2646.00
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0	\$ 0
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0	\$ 0
9) Loan Proceeds	(CRO-1410)	\$ 0	\$ 0
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$ 0	\$ 0
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0	\$ 0
11b) Contributions from Not-for-Profit Organizati	ons <i>(CRO-1250)</i>	\$ 0	\$ 0
11c) Outside Sources of Income	(CRO-1250)	\$ 0	\$ 0
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$ 0	\$ 0
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$ 0	\$ 0
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11	lc, 11d and 11e)	\$ 1445.00	\$ 2646.00
<u>IEXTRENIDIHURUS</u>	· •	· · · · · · · · · · · · · · · · · · ·	
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 2226.07	\$ 2624.17
13b) Contributions to Candidates/Political Commi	ttees (CRO-1310)	\$ 0	\$ 0
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0	\$ 0
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 0	\$ 0
15) Loan Repayments	(CRO-1420)	\$ 0	\$ 0
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$ 21.83	\$ 21.83
17) In-Kind Contributions	(CRO-1510)	\$ 0	<u> </u>
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1	15, 16 and 17)	\$ 2247.90	\$ 2646.00
19) Cash on Hand at End (Add lines 4 and 12 together, then sul	btract line 18)	\$ 0	\$ 0
ADDITUONALLINEORMATUON			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0	
21) Outstanding Loans (incl. ones from other campaig	ns) <i>(CRO-1430)</i>	\$ 0	
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$ 0	
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$ 0	
24) Account Transfers Within the Committee	(CRO-1720)	\$ 0	
25) Administrative Support	(CRO-1710)	\$ 0	\$ 0
26) Forgiven Loans	(CRO-1440)	\$ 0	\$ 0
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$ 0	\$ 0
28) Contributions to be Refunded	(CRO-1215)	\$ 0	\$ 0
CDO 1100 NC State Board of El			August 2008

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Amendment Yes

No

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

	ull Name (and Fun-		- 2				2. ID Number		
Moger for Cour									
	3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)								
	Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures								
4. Payee Inform	ation		A	Add Remove					
	ng Address & Phone		b.	Coordinated Commit	ttee Na		d. Comments		
(include city, state,	& zip)		N	loger for Council					
Proforma				ē					
P.O. Box 64081	4		c.	Level Registered (Spe	ecify)]		
Cincinnati, OH	45264-0814			Federal		County:			
				State	\square	Municipality.	e. Election Sum to Date		
							\$ 2541.46		
							\$ 2541.46		
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
MFC	АСН	в		11/19/19		\$2247.90	Signs		
			-						
1						\$			
4. Payee Inform			A	dd		Remove			
	ng Address & Phone		b.	Coordinated Commit	ttee Na	me	d. Comments		
(include city, state,	& zip)		M	loger for Council					
Matt Moger									
4225 Stoney Br			C.	Level Registered (Spa	ecify)		-		
Clemmons, NC	27012			Federal		County:			
				State	\boxtimes	Municipality:	e. Election Sum to Date		
							\$ 21.83		
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MFC	Check	0		11/21/19		\$21.83	Partial Reimbursement		
						\$			
4. Payee Inform	ation		Δ.	dd		Remove			
	ng Address & Phone		b. Coordinated Committee Name				d. Comments		
(include city, state,									
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			Federal County:			County:	-		
				State	Π .	Municipality:	e. Election Sum to Date		
							\$		
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						\$			
5. Total only th	іс Рада				10100		\$		
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		umary Page CRO-110	00 if (Operating Expenses)					
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Com						al Comm)	\$		
(This line goes in line 150 of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)									
· · ·	es (List detailed ex		_						
A* - Media	B* - Printing	C* - Fund				D - To Anoth			
E - Salaries	F* - Equipment	G - Politic	cal f	Party			Public Office Expenses		
I - Postage	J - Penalties	K* - Offic	ice E	Expenses		Q* - Donatio	on to Legal Expense Fund		
O* - Other	a datailad analar at	ion in required -	0.00	arks field (b)					
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Disbursements

Contributions from Individuals

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Amendment

Yes

No

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

3. Contributor Information Add Remove a Pall Name, Mailing Address & Phone Add Remove Adde 124 Sprglass Dr Addleife Trainer Adde Remove Election Sum of Sum 124 Sprglass Dr Adde Chemedia Sum Election Sum to Date 124 Sprglass Dr Advance NC 27006 E Farm of Payment LineKind Description J. Date (mm/dd/yyyy) K. Amount 1000000000000000000000000000000000000	1. Comm	1. Committee Full Name (and Fund if applicable)							2. ID Nun	nber							
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a. Full Name, Mailing Address & Phone (include city, state, & zip) b. Job Title/Profession d. Comments Connor Groce 1841 Curraghmore Rd Clemmons NC 27012 Student Student E c. Employer's Name/Specific Field c. Employer's Name/Specific Field E E f. Prior g. Account Code h. Form of Payment i. In-K d Description j. Date (mm/dd/yyy) k. Amount MFC ACH Intervent S 100 MFC ACH Intervent S 100 Image: Structure of the structure of										\$							
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(This line must be on line 6 of Detailed Summary Page CRO-1100)									\$		400						
									\$		1445						
		STATES OF TAXABLE PARTY.	Detauea Summary Page C	RO-1100		Board of	Election	s			April 2007						

Contributions from Individuals

Pg _____ of ____

Amendment

Yes

No

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

1. Committee Full Name (and Fund if applicable) 2. ID Number									
Moger for Council									
3. Contributor Information Add Remove									
	ne, Mailing Address &				le/Profession		d. Comment	~	
	city, state, & zip)			Preiden			u. Comment	5	
Gary Mo					it				
	cwood Rd			- Elas			4		
1	NC 27316				er's Name/Sp		4		
Kamsuer	NC 27510			Faith C	hristian Sch	001			
							e. Election S	um to Date	
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		-					-	\$	
						· · · · · ·		\$	
	butor Informatio			Add	Ren	nove			
a. Full Nam	e, Mailing Address &	e Phone		b. Job Tit	le/Profession		d. Comment	8	
(include)	city, state, & zip)			Real Es	tate Investo	г			
Matt Mog	ger								
4225 Stor	ney Brook Rd			c. Employ	er's Name/Sp	ecific Field			
Clemmon	s, NC 27012			M5 Hor			1		
							e. Election Sum to Date		
							\$	1025	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Lind Descrip	tion	j. Datê (mm/dd/yy		k. Amount	
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	e, Mailing Address &	<u></u>		b. Job Title/Profession			d. Comments		
	city, state, & zip)					1			
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				c. Employer's Name/Specific Field					
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								\$	
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								\$	
4. Total only this Page \$						- <u>-</u>	1045		
5. Total of ALL CRO-1210 Pages \$							1445		
(This line must be on line 6 of Detailed Summary Page CRO-1100)									

CRO-1210

5.5