Disclosure Report Cov	ver				Amendment Yes No		
Use this form for general report a	ind committee i	nformation, m	nust be signed and	submitted alor			
Do not use this form to update in	formation.						
1. Committee Information	Jack Till Ave						
a. Full Name		c. ID Number					
David Long]	5r. for	Mayor		. 8Cl			
b. Mailing Address (include City, State	and Zip Code)				d. Date Filed		
2969 Avalee St.					10/24/23		
WAIKERTOWN, NC	7051				e. Phone Number		
2. Report Year 3. Period Start	Date (mm/dd/w)	4 Period E	and Date (mm/dd/vy	5. Treasure			
24.27 4.01 /	2821	. /	/				
The state of the s	23	10/23	/23	Connier	Ann Chandler		
6. Type of Committee (Check O					ort from one category) Referendum		
Candidate Campaign Party		unicipal	State/County Organiz		Organizational		
	rendum	Organizational Thirty-five day			Pre-referendum		
	Fundraiser	Pre-primary	Fin	,	Final		
Legal Expense Fund	닒	Pre-election		cond	Supplemental Final		
7. Type of Fund (if applicable,		Pre-runoff	Third		Annual		
Booster Fund		Semi-annual	Fo Fo	urth	Special Special		
Building Fund		Mid Year	r Semi-ar	nnual	- 23		
		Year End	l 🔲 Mi	id Year	10. Special Report Name		
Other:		Final	☐ Ye	ar End			
8. Number of Fundraisers this	Report	Special	Final		100		
0			Special		No.		
11. Account Information		TALL M	11. Account Info	rmation			
a. Financial Institution Full Name			a. Financial Institutio	n Full Name			
Truist					affect .		
b. Purpose	c. Account Code		b. Purpose		c. Account Code		
40-00-10	5352						
campaigne	d. Period Begin F	Balance			d. Period Begin Balance		
	\$ 40.9	10			\$		
CERTIFICATION	10.7						
I certify that the Committee or Fur of the NC General Statutes and that report is complete, true and correct Printed Name of Sign	at no funds are co t and that I have	ommingled with been trained by	prohibited or other	non-disclosed for Elections.	B & 22D-22M of Chapter 163 unds. I further certify that this 10/24/23 Date		
FOR OFFICE USE ONLY							
Date Received:		Employ	yee:	De	livery Method Normal Mail		
Date Postmarked: Employ			Registered Mail				
Date Scanned: Emplo			yee:	_ □	Electronically Filed		
Date Data Entered:		Employ	yee:		Signer has not received mandatory training		
					nmittee address, treasurer,		

CRO-1000

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

NC State Board of Elections

assistant treasurer, custodian of books information, or account information.

August 2008

Detailed SummaryUse this form to summarize all disclosure reporting forms and to total monetary information

Amendment

Yes No

1. Committee Full Name (and Fund if applicable) 2. Typ			3. ID Number	
David Long Jr. For Muyor	Pre-El	ection	8CQJ64	
Start of Election Cycle: January 1, 2023		Total this Reporting Perio	Total this d Election Cycle	
4) Cash on Hand at Start		\$ 40.9D	\$ 0	
RECEIPTS				
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$	
6) Contributions from Individuals	(CRO-1210)	\$ 85.00) \$ 333.50	
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)	\$	\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,	11d and 11e)	\$ 85.0	0 \$ 333.50	
EXPENDITURES				
13) Disbursements				
13a) Operating Expenditures	(CRO-1310)	\$ 106.94	\$ 314.54	
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)	\$	\$	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1	5, 16 and 17)	\$ 106.94	\$ 314.54	
19) Cash on Hand at End (Add lines 4 and 12 together, then sul	otract line 18)	\$ 18.96	\$ 18.96	
ADDITIONAL INFORMATION	1000 1000			
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)	\$	Things of the sound of	
25) Administrative Support	(CRO-1710)	\$	\$	
26) Forgiven Loans	(CRO-1440)	\$	\$	
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$	\$	
28) Contributions to be Refunded	(CRO-1215)	\$	\$ Angust 200	

		vidual contributions or		or contributions unde	er \$50 if form CR		
1. Comm	1. Committee Full Name (and Fund if applicable)					2. ID Number	
David Long Jr. For Mayor					8CQ	8CQJ64	
3. Contri	butor Informatio	n		Add Ren	nove	الراساة 11	
a. Full Nan	ne, Mailing Address &	k Phone		b. Job Title/Profession		d. Comments	
	city, state, & zip)			Sargent	-		
Dav	id Long	Jr		- E-playeria Nama/Sn	ocific Field		
David Long Jr. 2969 Avaleest.			us Milita	2 JMATINE	e. Election Sum to Date		
wa	1Ker fown), NC 270	57		COPP	\$ \	45.00
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Description	j. Date (mm/dd/yy	уу)	k, Amount
	5352	EFT			10/04/2	023	\$ 60.00
	5352	EFT		10/23/2		023	\$ 25.00
							\$
3. Contr	ibutor Informatio	on		Add Ren	nove		
a. Full Name, Mailing Address & Phone			b. Job Title/Profession		d. Comments	s	
(include	city, state, & zip)						
				c. Employer's Name/Sp	ecific Field		
				or Zaaprojos			
						e. Election S	um to Date
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/yy	ууу)	k. Amount
							\$
							\$
							\$
3. Contr	ibutor Informati	on		Add Ren	nove		
	me, Mailing Address			b. Job Title/Profession		d. Comment	8
(include	city, state, & zip)						
				c. Employer's Name/Sp	pecific Field		
						e, Election S	um to Date
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-	Kind Description	j. Date (mm/dd/y	yyy)	k. Amount
	9.7.2.2.2.2.2						\$
							\$
							\$
4. Tota	al only this Pag	ge	-			\$	85.00
	al of ALL CRO	And the second s	'RO-110	20)		\$	85.00 85.00

Contributions from Individuals

Amendment

No

Disburseme	ents			Pg	of of	Yes No
Use this form to	report expenditures	from the committe	e for; operating exp	enses,	contributions to c	andidate/political
	coordinated party ex				- Service Co.	2. ID Number
1. Committee Full Name (and Fund if applicable) David Long Jr. for Mayor						8CQ 564
3. Type of Disbu	present (Plea	se use senarate Ci	RO-1310 forms for	each ty	pe of Disbursem	
Operating Ex		Contributions to Can	didates/Political Commi	tees	Coc	ordinated Party Expenditures
4. Payee Inform	Add		Remove			
a. Full Name, Mailin			b. Coordinated Comm	nittee Na	ıme	d. Comments
(include city, state,	& zip)					
Victo D-	yman St. M, MA		- 1D 11 16			
110100 41	St		c. Level Registered (Specify) Federal County:			
275 W	yman o''				Municipality:	e. Election Sum to Date
waltha	MMA	(~~)				6 0.11
0000	02	2451				\$ 94.94
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yy	yy)	j. Amount	k. Required Remarks
	credit	0	10/05/2	023	\$ 94.94	Post Cards
30					\$	
			LE A		Remove	
4. Payee Inform			Add b. Coordinated Com	nittee N		d. Comments
	ng Address & Phone		b. Cool amated Com	military 14		
(include city, state,	& zip)					
Truist			c. Level Registered (S	Specify)		
227 F	Unintain 5	t.	Federal		County:	
27 10.	11 .((,	State		Municipality:	e. Election Sum to Date
Kernersvi	Mountain 5 Ile, NC 272	84				\$ 27.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/y	уу)	j. Amount	k. Required Remarks
<i>53</i> 52	Debit	. 0	10/18/20	43	\$ 12.00	maint, Fees
					\$	
			Add		Remove	
4. Payee Inform			b. Coordinated Com	mittee N		d. Comments
	ing Address & Phone					
(include city, state,	& ZIP)					
			c. Level Registered (Specify)		
			Federal		County:	Til di Gin to Poto
			State		Municipality:	e. Election Sum to Date
						\$
64	a Form of Daymant	h. Purpose Code	i. Date (mm/dd/y	yyy)	j. Amount	k. Required Remarks
f, Account Code	g. Form of Payment					
					\$	
					\$	
				7		¢ 101 610.
5. Total only th						\$ 1010.94-
(This line goes i	L CRO-1310 Pages In line 13a of Detailed Su In line 13b of Detailed Su	mmary Page CRO-110	00 if Contrib to Candida	tes/Polit	ical Comm)	\$ 106.94
(This line goes i	n line 13c of Detailed Su	mmary Page CRO-110	00 if Coordinated Party	Expendi	tures)	THE ASSESSMENT OF THE PARTY OF
7. Purpose Co	doe (list detailed e	xpenditure code in	(h.) above)		D - To Anot	her Candidate
	les (List detailed e.	714 T	dvoicing	ical Party H* - Holdin		
A* - Media	B* - Printing	C* - Fur	draising		H* - Holdin	g Public Office Expenses
A* - Media E - Salaries	B* - Printing F* - Equipmen	c* - Fur G - Polit	idraising ical Party ice Expenses		H* - Holdin	
A* - Media E - Salaries I - Postage O* - Other	B* - Printing	C* - Fur G - Polit K* - Off	idraising ical Party ice Expenses		H* - Holdin	g Public Office Expenses

Amendment

Yes

No