Disclosure Repo	ort Cover				Amendment Yes No		
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	NAME OF TAXABLE PARTY.						
1. Committee Informate a. Full Name	tion				TO M		
	2 1				c. ID Number		
Norris Fo	or Concord						
b. Mailing Address (include	City, State and Zip Code)				d. Date Filed		
261 Scenic					11/1/2023		
Concord, N	2 doods				e. Phone Number		
					704/981-2828		
2. Report Year 3. Peri	od Start Date (mm/dd/yy)	4. Period End D	ate (mm/dd/yy)	5. Treasure	er Full Name		
2023 9	-27-2023	10/23/20			Ot Vell		
6. Type of Committee			1	type of repo	ort from one category)		
Candidate Campaign		nicipal	State/County	1	Referendum		
PAC Independent Expenditure	Referendum Loint Fundraiser	Organizational Thirty-five day	Organizati Quarterly	ional	Organizational Pre-referendum		
Legal Expense Fund	John Fundraiser	Pre-primary	First		Final		
		Pre-election	Secon	nd	Supplemental Final		
7. Type of Fund (if a	applicable, check one)	Pre-runoff	Third	i	Annual		
Booster Fund		Semi-annual	Fourth		☐ Special		
☐ Building Fund	님	Mid Year	Semi-annual		10 C 11D 1N		
Other:	H	Year End Final	Mid Year		10. Special Report Name		
8. Number of Fundrais	sers this Report	Special	Final	Eliu			
		JP	Special				
11. Account Information	on	11. A	Account Inform	nation			
a. Financial Institution Full	Name	a. Fin	ancial Institution	Full Name			
First Citizen	s Bank		RE	CEIVED			
b. Purpose	c. Account Code	b. Pui		OLIVED	c. Account Code		
Compagn	14		NOV	0.1 0000			
o only wy.	d. Period Begin Ba	NUV U1 202			d. Period Begin Balance		
		lance	CARADE	RUS COU	d. Periou degiii baiance		
	\$ 50		CADARR	(05 000)	VS Y		
CERTIFICATION			BUARD C				
					3 & 22D-22M of Chapter 163		
	tes and that no funds are com and correct and that I have be				ands. I further certify that this		
report is complete, and a	. /	All trained by the fi	2 Spile Double St.	Diccions.			
Tyl 11 /	1/0005	1/6//	//-		1V1/2023		
Printed Na	me of Signer	Signature	of Appointed Treas	surer	Date		
FOR OFFICE USE ON	NLY		LIAM				
Date Received:	11/01/2023	Employee:	HAN		ivery Method		
Dute Records		Employee.		- 1	Normal Mail		
Date Postmarked:		Employee:		- 12	Registered Mail Hand Delivered		
Date Scanned:	11/01/2123	Employee:	HAN		Electronically Filed		

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.

Employee:

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

Date Data Entered:

Signer has not received mandatory training

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. Type of		Report		3. ID Number	
Norris For Concord Pre-E			\wedge		
Start of Election Cycle: January 1, <u> </u>			Total this Reporting Period		Total this Election Cycle
4) Cash on Hand at Start		\$	50	\$	
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	50	\$	50
6) Contributions from Individuals	(CRO-1210)	\$ 1.	600.72	\$	1756.72
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)	\$		S	
11c) Outside Sources of Income	(CRO-1250)	\$		S	
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$		S	
11e) Exempt Purchase Price Sales	(CRO-1265)	\$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,	11d and 11e)	\$ 16	250.7a	\$	1806,77
<u>EXPENDITURES</u>					
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$ 1	64.78	\$	164.78
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)	\$ 1.0	00.7a	S	1106.72
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 13	5, 16 and 17)		65,50	\$	1871,50
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	otract line 18)	\$ 5	35.22	\$	535.22
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-1710)	\$		\$	
26) Forgiven Loans	(CRO-1440)	\$		\$	
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$		\$	
28) Contributions to be Refunded	(CRO-1215)	\$		\$	

Aggregated Contributions from Individuals Page of Optional form used to report NC Contributions From Individuals of \$50 or less					Amendment Yes No
1. Comm	ID Number				
	orris For				
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
Add			o. In Anna Description		
Remov	ve 4A	Electron:C		10/11/2023	s 50
Add Remov	WP.				\$
Add	VC				S
Remo	ve				3
Add Remov	ve				\$
Add					s
Remo	ve				3
Remov	ve				\$
Add					s
Remov	ve				
Remov	ve				\$
Add					\$
Remov	ve				
Remov	ve				\$
Add					S
Remov	/e		-		
Remov	ve				\$
Add Remov	/e				\$
Add					s
Remov	/e	-	+		
Remov	/e				\$
Add Remov	re.				\$
Add					S
Remov	/e				3
Add Remov	/e				\$
Add					s
Remov	/e	-			
Remov	/e				\$
Add Remov	10				\$
Add					\$
Remov	/e	-	-		Y
Remov	ve				\$
4. Total	only this Page			\$	50
5. Total of ALL CRO-1205 Pages (This line must be on line 5 of Detailed Summary Page (RO-1100)					50

(This line must be on line 5 of Detailed Summary Page CRO-1100)

		rom Individua		Pg			Yes No	
	E-NY DESCRIPTION OF THE PARTY O	ndividual contribution	THE RESERVE THE PARTY OF THE PA	ontributions und	ler \$50 if form Cl	W. C. C. C.		
		ne (and Fund if app	olicable)			2. ID	Number	
/	Vorristor	·Concord						
ESSENTIAL PROPERTY.	tributor Inform			Add Re				
	ame, Mailing Addr			b. Job Title/Profe		d. Com	ments	
	de city, state, & zip)			Teachen				
1	ylor Nom.s 66 Scon.zi oncord, M				me/Specific Field	1		
a	15. ngo 2 10.	or Ne		Cabarrus County Schools				
C	oncord, M	28025		Schools	2001,19	e. Elect	ion Sum to Date	
				00.00.3		\$	17.56.72	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yy		Amount	
	14	Electronic			10/16/20	13	600 -	
	IA	Electronic Electronic	Campal	n Signs	10/17/20	13 5	5 600 - 5 526,72 5 474-	
	LA	Election: C	Campan	in Signs In Signs	10/16/20	23 5	174-	
Direction of the last of the l	tributor Inform				move			
	ame, Mailing Addr			b. Job Title/Profe	ession	d. Com	ments	
(includ	de city, state, & zip)							
				c. Employer's Na	me/Specific Field	1		
						e. Elect	tion Sum to Date	
						\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yy	yy) k.	Amount	
						9	S	
_	-	-	+					
							5	
						5	5	
BENDER STATE OF STREET	tributor Inform			CONTRACTOR	move			
	ame, Mailing Addro le city, state, & zip)			b. Job Title/Profe	ession	d. Com	ments	
(IIICIUC	ie city, state, & zip)			1				
				c. Employer's Na	me/Specific Field			
						e. Elect	ion Sum to Date	
						\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yy	yy) k.	Amount	
				¥		9	S	
							S	
			-13			3	S	
	al only this P					\$	1600.72	
		RO-1210 Pages	Page CRO, 1100			\$	1600.72	

Amendment

Disbursements				Pg of	Yes No
Use this form to report experienced		nmittee for o	perating ex	penses, contributi	ons to candidate/political
committees and coordinated 1. Committee Full Name (a		ale)			2. ID Number
Norris for	_	ole)			2. 1D Number
3. Type of Disbursement	(Please use separat	te CRO-1310	forms for	each type of Disb	ursement.)
Operating Expenses	Contributions to Ca	Color Street Control of Section 11 Control	CONTRACTOR OF THE PARTY OF THE		rdinated Party Expenditures
4. Payee Information			Add	Remove	
a. Full Name, Mailing Addre	ess & Phone		b. Coordina	ted Committee Name	d. Comments
(include city, state, & zip)					
Fe Dex Office 1215 Concord Pk Concord, VC 280	Prints Ship Cen Curs N	He/	c. Level Reg	istered (Specify) County:	·
C	26		State	Municipa	lity: e. Election Sum to Date
CONCUPA, VC 040					s 164.78
f. Account Code g. Form of Pa	yment h. Purpose C	ode i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
11 Electro	nic B	101	128/2023	5 164.78	Palm Cards
				S	, , ,
4. Payee Information			Add	Remove	
a. Full Name, Mailing Address &	Phone		NAME OF TAXABLE PARTY.	ted Committee Name	d. Comments
(include city, state, & zip)					
			Federal State	istered (Specify) County: Municipa	\$
f. Account Code g. Form of Pa	yment h. Purpose C	ode i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				s	
4. Payee Information			Add	Remove	
a. Full Name, Mailing Address &	Phone			ted Committee Name	d. Comments
(include city, state, & zip)	rione		b. Coordina	ted Committee Ivanic	u. comments
			c. Level Reg	istered (Specify) County:	
			State	Municipa	lity: e. Election Sum to Date
					\$
f. Account Code g. Form of Pa	yment h. Purpose C	ode li Doto (mm/dd/yyyy)	j. Amount	k. Required Remarks
i. Account Code g. Form of Fa	yment in rur pose C	oue i. Date (iiiii/dd/yyyy)	S. Amount	K. Required Remarks
				\$	
5. Total only this Page					\$ 164.78
6. Total of ALL CRO-1310	Pages				
(This line goes in line 13a of De (This line goes in line 13b of De (This line goes in line 13c of De	tailed Summary Page CF tailed Summary Page CF	RO-1100 if Con	trib to Candid	lates/Political Comm	s 164.78
7. Purpose Codes (List	detailed expenditure	code in (h.)	above)		
A* - Media B* E - Salaries F*	- Printing - Equipment Penalties	C* - Fo G - Po K* - O	undraising litical Party office Expe	Н* - Но	Another Candidate olding Public Office Expenses onation to Legal Expense Fund

Amendment

In-Kind Contributions Use this form to report non-monetary contributions, donations, good			tee o	Amendment Yes No r fund.
Use CRO-1215 if In-Kind Contributions were or will be refur	ided within 7 day	ys.	2 1	D Number
1. Committee Full Name (and Fund if applicable) Nomic For Concord			2. 1	D Number
3. Contributor Information	Add Rer	nove		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contril	outor	c. Co	omments
Tylor Norrs 261 Scenic DONE	Candidate Party PAC			
Concord, NC 28025	Referendum		d. E	lection Sum to Date
	Other Receipt	Source	\$	17-67)
e. Description		f. Date (mm/dd/yy	yy)	g. Fair Market Amount
				\$
Campaign Signs		10/17/20	对多	s 526.72 s 474.00
Campaign Signs		10/16/200	13	\$ 474.00
3. Contributor Information	Add Rei	nove		
a. Full Name, Mailing Address & Phone	b. Type of Contrib	outor	c. C	omments
(include city, state, & zip)	Candidate Party PAC Referendum		d. Election Sum to Date	
	Other Receipt	Source	\$	ection sum to Dute
e. Description		f. Date (mm/dd/yyy	yy)	g. Fair Market Amount
				\$
				\$
				\$
	Add Rer	nove		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contrib	butor c		omments
	Referendum		d. E	lection Sum to Date
	Other Receipt	Source	\$	
e. Description		f. Date (mm/dd/yyy	yy)	g. Fair Market Amount
				\$
				\$
				\$
4. Total only this Page			\$	1000-72
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)			\$	1000-72