<b>Disclosure</b>	Report	Cover
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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 update information.

1. Committee Inform	ation	14.59							
a. Full Name			,		c. ID Number				
mille	to Flort R	cian K.							
b. Mailing Address (include	te City, State and Zip Code)	147 / 10	M		d. Date Filed				
DA RIV	P.O. Box 1643 Concard, NC 28026  7/26/2023 e. Phone Number 7/4792:001								
1.0,000	1043	_ (			1/26/2025				
Concord	111 280	26			e. Phone Number				
	)				709782.0010				
2. Report Year 3. Per	riod Start Date (mm/dd/	yy) 4. Period F	End Pate (mm/dd/yy	5. Treasure	r Full Name				
2023 07	105/2023	07/13	1/2023	Micho	el Buraner				
6. Type of Committee		9. Type of Rep	ort (check only or		rt from one category)				
Candidate Campaign		Muniespal	State/Count		Referendum				
PAC	Referendum	Organizationa	l Organiz	zational	Organizational				
Independent Expenditu	are Doint Fundraiser	Thirty-five day	y Quarter	ly	Pre-referendum				
Legal Expense Fund		Pre-primary		rst	Final				
7 T 6 F 1	C 1: 11 1 1	Pre-election		econd	Supplemental Final				
7. Type of Fund (i)  Booster Fund	f applicable, check one)	Pre-runoff Semi-annual		nird ourth	Annual Special				
Building Fund		Mid Yea	_		Special				
		Year End	_	id Year	10. Special Raport Name				
Other:		Final	☐ Ye	ear End	S ANN-				
8. Number of Fundra	isers this Report	☐ Special	Final		OUTINIVE				
0			☐ Special		7-26-2023				
11. Account Informat	tion		11. Account Info	rmation					
a. Financial Institution Fu	ll Name		a. Financial Institution	on Full Name					
Truist				-	****				
b. Purpose	c. Account Cod	le	b. Purpose	IN-P	ERSOMINT Code				
Canal to	-1	7-1	•		0.0000				
Campaign,	and by			,: JUL	2 6 2023				
	d. Period Begin	Balance		CADADD	d. Period Begin Balance US COUNTY				
	\$ 0.0	0		BOARD O	FELECTIONS				
CERTIFICATION									
I certify that the Comm	nittee or Fund is in complia	nce with all appl	icable provisions of	Article 22A, 22F	3 & 22D-22M of Chapter 163				
					ands. I further certify that this				
report is complete, true	and correct and that I hav	e been traind	the NC State Board	f Elect ons.					
1/1/5	rian tine				77/7012				
	11.	1	MAN		7.26.2023				
FOR OFFICE USE O	Name of Signer	Sig	nature of App inted Tr		Date				
	7/26/23		/ WAI	V Del	ivery Method				
Date Received:	1,00102	Employ	vee:	Dei	Normal Mail				
Data Dostovala 1		F1	V	ä	Registered Mail				
Date Postmarked:	. 01 (1:00	Employ		<b>−</b> ⊠	Hand Delivered				
Date Scanned:	7/26/2023	Employ	vee: WAN		Electronically Filed				
					Signer has not received				
Date Data Entered	: - <u></u>	Employ	/ee:		mandatory training				
Please Note: Th	is form cannot be used t	o amend comm	ittee information s	uch as the com	mittee address, treasurer,				
2 22222 1 10001 111	assistant treasurer, cus								
You mu	ist amend the Statement								

**Detailed Summary**Use 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. I	D Number
Committee to Elect Briank	ine	Urgani Bations	
Start of Election Cycle: January 1, 2023	( )	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 6.00	\$
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$ ,
6) Contributions from Individuals	(CRO-1210)	s 1900	s 1900
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)	\$ 1900	\$ 1900
<u>EXPENDITURES</u>			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	S. /32.43	s/32.43
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)	\$	\$
<b>18) TOTAL EXPENDITURES</b> (Add lines 13a, 13b, 13c, 14, 13	5, 16 and 17)	\$ 132.43	s /32.43
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18)	s /767.57	s 1767.57
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)	\$	\$
	(CRO-2220)	\$	\$
28) Contributions to be Refunded	(CRO-1215)	\$	\$

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	Contract to the second	ne (and Fund if appli		ond routions und		2. ID Number
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	ame, Mailing Addre			b. Job Title/Profes		d. Comments
	de city, state, & zip)	-		Attorna	m	
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						\$
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	Ca Kur	ck Drive		c. Employer's Nam	ne/Specific Field	
200	s= Dun	Wa dela		sef.a	try lord	e. Election Sum to Date
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I. Prior	g. Account code		. II-Kilid Descrip	uod	17/2	
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No Control of the Con-		RO-1210 Pages				s /900.10
(This li	, , , , , ,					

## **Contributions from Individuals**

	7	7	Amendment	
Pg	of		☐ Yes	☐ No

Use th	is form to report	individual contribution	ons over \$50 or	contributions un	der \$50 if form C	RO 1205 is not used	
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10	mmittet	t. Elect (	rion t	Ino			
	tributor Inform				emove		
a. Full l	Name, Mailing Addr	ress & Phone		b. Jol Title/Pro		d. Comments	
	de city, state, & zip)			Real 6	tely Advi	801	
JI	15tin Mu	Ieller		,		]~,	
38	28 Mai	ultrie Fre	-6	c. Employer's N	ame/Specific Field		
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Che	arlotte	N( 282	09	009	projec	\$ 500.00	
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	de city, state, & zip)			Thank	1-1		
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77	wrae	2 Machine		Stillpa	int,	e. Election Sum to Date	e
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(inclu	de city, state, & zip)						
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BRIDGE STREET,		RO-1210 Pages				6 10	
2022/2018/2019		6 of Detailed Summary P	age CRO-1100)			\$ 1900	

Dick	oursemer	its
DISI	Jui Scillei	112

	/		1	Am	endment	
Pg		of	_		Yes	☐ No

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

	Full Name (and Fun					2. ID Number
	11 1 1	an applicable)		11.		2. ID Number
Name and Address of the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner, which i	tree to Ele	et Dri	07 1	Sing		
3. Type of Dis		use separate Cl		THE RESERVE AND ADDRESS OF THE PERSON NAMED IN		bursement.)
Operating Ex	Name and Address of the Owner, where the Party of the Owner, where the Party of the Owner, where the Owner, which is the Owner, where the Owner, which is	tributions to Candid	ates/Politi			ordinated Party Expenditures
4. Payee Infor				Add -	Remove	
	Mailing Address & Ph	one		b. Coordinat	ed Committee Nan	ne d. Comments
(include city, state	e, & zip)			-		
raype	4			c. Level Regi	stered (Specify)	
22/11	N. 1st St	roct		Federal	County:	
				State	☐ Municip	pality: e. Election Sum to Date
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f. Account Code	g. Form of Payment	h. Purpose Code			j. Amount	k. Required Remarks
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	Court				\$	3
4. Payee Infor	mation (/			Add	Remove	
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(include city, st			_			
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CUDGIT	ok 1315 1 NC 28	7			stered (Specify)	
7.0. B	ok 1315	,		Federal	County:	
	1 1/0 79	612/		State	Municip	pality: e. Election Sum to Date
Concora	NC 20	6	(	<b>*</b>		\$ 106.00
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			1/0	1/202	5	7 7
4. Payee Infor	CONTRACTOR OF THE PROPERTY OF			Add	Remove	
	iling Address & Phone			b. Coordinate	ed Committee Nan	ne d. Comments
(include city, st	ate, & zip)		339			
				a Lavel Pagi	stered (Specify)	
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				State		pality: e. Election Sum to Date
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	Codes (List detailed				<b>D</b>	A de Carlilli
A* - Media E - Salaries	B* - Printi F* - Equip	0		undraising		Another Candidate
I - Postage	J - Penalti			litical Party Office Expen		Holding Public Office Expenses Donation to Legal Expense Fund
O* Other	J - I Challi		10	Thee Expen	Q - D	onation to negai expense runt
	re detailed explanati	on in required	remark	s field (k)		