Disclosure Report Cover	Disc	losure	Report	Cover
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Amendment

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 In	formation								
a. Full Name						c. ID Number			
Comm	ittee	to El	ectlar	ry Pitta	nan				
b. Mailing Address	(include City, State	and Zip Code)	1		d. Date Filed			
	lober to					May 20, 2024			
Conco	rd, N	C 28	027			e. Phone Number			
						704-782-3528			
2. Report Year	3. Period Start	Date (mm/dd/	yy) 4. Period E	nd Date (mm/dd/yy)	5. Treasure	er Full Name			
2024	01/01/	2021	02/	17/2024	Larry	G. P. Hman			
6. Type of Comr			The state of the s		type of repo	rt from one category)			
Candidate Camp		12 00	Municipal	State/County		Referendum			
PAC		rendum	Organizationa			Organizational			
Independent Exp		Fundraiser	Thirty-five day Pre-primary	Quarterly First		Pre-referendum Final			
Legal Expense F	·una		Pre-election	Second Second		Supplemental Final			
7. Type of Fund	(if applicable,	check one)	Pre-runoff	Thir		Annual			
Booster Fund	(i) applicable,	encer one)	Semi-annual	Four		Special			
Building Fund			Mid Year			- specim			
Other: Camp		2200	Year End	☐ Mid	Year	10. Special Report Name			
Other: Camp	aign tin	ance	Final	☐ Yea	r End				
8. Number of Fu	indraisers this	Report	☐ Special	Final					
	I □ Special								
1. Account Information 11. Account Information									
a. Financial Institution Full Name									
Wells	Fargo	Bank	,	RECE	The state of the state of the state of the state of				
b. Purpose		c. Account Co	de	b. Purpose	ISON	c. Account Code			
		()	MAY 2	0 2024				
Campai	3 N	d. Period Regi	n Ralance	CABARRUS COUNTY		d. Period Begin Balance			
	inance	d. Period Begin Balance \$ 764,41		BOARD OF ELECTIONS					
		\$ 107	141			\$			
CERTIFICATION									
						B & 22D-22M of Chapter 163			
						ands. I further certify that this			
report is complete	e, true and correc	t and that I hav	ve been trained by	the NC State Board o	f Elections.				
Larry	60.4	ton an	1000	11 My D-	the	5/10/20211			
	inted Name of Sign	tman		pature of Appointed Trea	yman	Date			
FOR OFFICE U	THE RESERVE THE PARTY OF THE PA		Sig	value of Appointed Trea	isuici	Date			
		5-20-24		WAN	Del	ivery Method			
Date Receive	ed:		_ Employ	/ee:	- <u>D</u>	Normal Mail			
B . B .			-			Registered Mail			
Date Postmar			_ Employ	/ee:	一 区	Hand Delivered			
Date Scanned	d: 5-	21-24	Employ	/ee:		Electronically Filed			
Date Data En	itered:		Employ	/ee:		Signer has not received mandatory training			
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.								
Ye				n (CRO-2100A-E) to					

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

Amendment
Yes No

	2. Type of	Rep		3. ID N	Number
	First	+ 0	Suarter		
Start of Election Cycle: January 1, 2021		F	Total this Reporting Period	1	Total this Election Cycle
4) Cash on Hand at Start		\$	764.41	\$	800,00
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	530.0	00 \$	530.00
6) Contributions from Individuals	(CRO-1210)	\$	5,590.0	00 \$	5,726,70
7) Contributions from Political Party Committees	(CRO-1220)	\$,	\$,
8) Contributions from Other Political Committees	(CRO-1230)	\$	200.0	0 \$	200.00
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)	\$	6,320	\$	6,456.70
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$	4,126.0	5 \$	4,761.64
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)	\$	400.00	\$	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 13c)	-	-	4,726.05	-	
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	otract line 18)	\$	1,958,3	6 \$	1,958.36
ADDITIONAL INFORMATION	(CDO 1220)	<u></u>			
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)	\$		\$	5

Aggregated Contributions from Individuals	Page	 of	 Amendment Yes	l 🔯 No	
66 6			 		

Optional form used to report NC Contributions From Individuals of \$50 or less

			nd Fund if applicab	A		2. ID	Number
-				y Pittman			
-		tor Information					
a. A	Add	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyy	-	Amount
	Remove	0	Cash		01/03/202	24	\$ 50,00
	Add Remove	D	Cash		01/03/202	4	\$ 50,00
	Add Remove	0	check		01/08/20	24	\$ 50,00
	Add Remove	0	check		01/16/202	24	\$ 25,00
	Add Remove	0	check		01/19/20	24	\$ 25.00
	Add Remove	0	check		01/19/202	$\overline{}$	\$ 20.00
	Add Remove	0	check		01/19/202		\$ 25,00
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	Add Remove	D	cash		01/19/202		\$ 30.00
	Add Remove	0	cash		01/19/202		\$ 20,00
	Add Remove	0	cash		01/19/202		\$ 40.00
	Add Remove	0	cash		02/14/202		\$ 30,00
	Add Remove	٥	cash		01/22/202	24	\$ 50,00
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		ly this Page	***************************************			\$	530.00
5. 7	otal of	ALL CRO-1	_			\$	530.00
(T	iis line mu	st be on line 5 of De	tailed Summary Page C.	RO-1100)			0100

		rom Individua		Pg ontributions unde			Amendment Yes No 205 is not used	
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7 - Table 12 - 12 - 12 - 12 - 12 - 12 - 12 - 12	tributor Inform			Add Ren	nove			
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	de city, state, & zip)	- MOASMA	_	Owne	.~			
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	le city, state, & zip)	**************************************		Retire	q			
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11	1 saint	John's Dri	V					
3	alisbury	14	Prevce	Construction	e. E	lection Sum to Date		
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	1							

4. Total only this Page

5. Total of ALL CRO-1210 Pages

(This line must be on line 6 of Detailed Summary Page CRO-1100)

\$ 650.00

Contributions from Individuals Pg 2 of 9 Amendment No 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 Committee to Elect Larry Pittman ☐ Add ☐ Remove b. Job Title/Profession a. Full Name, Mailing Address & Phone d. Comments (include city, state, & zip) Treasurer cynthia Griffin 77 Bridlewood Place c. Employer's Name/Specific Field snyder Packaging e. Election Sum to Date Concord, NC 28025 \$ 500.00 j. Date (mm/dd/yyyy) g. Account Code . Prior h. Form of Payment i. In-Kind Description k. Amount 01/17/24 check \$ 500.00 D \$ Remove 3. Contributor Information Add a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Owner David Snyder 188 Harris Place, NW c. Employer's Name/Specific Field snyder Packaging Concord, NC 28025 e. Election Sum to Date 400.00 k. Amount g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) . Prior 01/17/2024 \$ 400.00 0 cheek П Remove 3. Contributor Information Add a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Refired Ronald chandler 4977 Hilton Lake Road c. Employer's Name/Specific Field Kannapolis, NC 28083 No information e. Election Sum to Date \$ 150.00 g. Account Code j. Date (mm/dd/yyyy) k. Amount f. Prior h. Form of Payment i. In-Kind Description 01/19/2024 \$ 100.00 check 4. Total only this Page 1,000.00 5. Total of ALL CRO-1210 Pages \$ 5,390.00 (This line must be on line 6 of Detailed Summary Page CRO-1100)

		rom Individua		Pg ontributions unde	3 of	_	Amendment Ves No 205 is not used		
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CRO-1210

4. Total only this Page

5. Total of ALL CRO-1210 Pages

(This line must be on line 6 of Detailed Summary Page CRO-1100)

\$ 400.00

\$ 5,390.00

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	man Ech	noral Ave.		c. Employer's Nan	ne/Specific Field		
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Con	tributions fi	rom Individua	ıls	Pg	6 of	9	Amendment Yes No
Use th	is form to report i	individual contribution	ons over \$50 or c				Contraction of the Contraction o
		ne (and Fund if app	**************************************			2. I	D Number
Co	mmitte	e to Elec	+ Larry	Pittm	lan		
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Use this	form to report in	ndividual contribution	ns over \$50 or co	ontributions unde	er \$50 if form CF	RO 1:	205 is not used
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(include city, state, & zip)				auto me			
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141 Irish Potato Road							
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Contributions from Individuals

Amendment

☐ No

Yes

		rom Individua		_	8 of C	1	to the second se	
THE PERSON NAMED IN		ndividual contributio	THE RESERVE OF THE PERSON NAMED IN COLUMN 2 IS NOT THE OWNER.	ontributions und	er \$50 if form CF		NAMES AND ADDRESS OF THE PARTY	
	Children of the control of the contr	ne (and Fund if appl	Principles and Administration and described	. D \ L	L	2. 1	D Number	
0	mmitte	e to Ele	cfLari	77 TT	man			
7.000,000,000	tributor Inform			Add Rei				
	Name, Mailing Addro de city, state, & zip)			b. Job Title/Profession			comments	
Mr. 1010000000000000000000000000000000000				computer repair				
Ro	nald L	ong Earnhardt	Blvd.	c. Employer's Nar	ne/Specific Field	1		
15	26 Dale	tarnheral	2102					
K	annapoli	5, NC 28	5083	self-employed			lection Sum to Date	
	¥/		\$	250,00				
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy	yy)	k. Amount	
	0	check			01/23/24		\$250,00	
							\$	
							\$	
3. Con	tributor Informa	ation		Add Rei	nove			
	ame, Mailing Addre	ess & Phone		b. Job Title/Profes	ssion	d. C	omments	
-	de city, state, & zip)			Teacher				
		ssy) Jone.		c. Employer's Nan	ne/Specific Field	1		
18	SETTE S	iericea Dr	,,,	Ret	l. ovi	L		
Mo	untple	asant, NC	28124	Refired			lection Sum to Date	
			,	İ		\$	100,00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy	yy)	k. Amount	
	0	check		01/25/202			\$100.00	
							\$	
							\$	
3. Cont	ributor Informa	ition		SUCCESSION OF THE PROPERTY OF	nove			
	ame, Mailing Addre	ss & Phone		b. Job Title/Profes	ssion	d. C	Comments	
41-10. A. CO. TOLOTON TO BEING BY	le city, state, & zip)	~1 . /		owner				
В.	etty w. 2	Edwards		c. Employer's Nar	ne/Specific Field	1		
13	521 Day	break Kid	ge	Edward	ls	_		
K	annapol	Edwards break Rid lis, NC 2	8081	Bookke.			lection Sum to Date	
	, , , , , , , , , , , , , , , , , , ,			Bookerce	4	\$	400.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy	yy)	k. Amount	
	D	check			02/6/202	4	\$300.00	
							\$	
							\$	
4. Tota	4. Total only this Page \$ 650.00							
		O-1210 Pages of Detailed Summary Pa	nge CRO-1100\			\$		
(2700) 11	in indicate on time o	of Detailed Summary 10	ge cho-1100)			1		

Con	tributions fi	rom Individua	ls	Pg	9 of 0	2	Yes No		
THE PERSON NAMED IN COLUMN 2 I	Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used								
		ne (and Fund if appl		0.11		2. I	D Number		
committee to Elect Larry Pittman									
	3. Contributor Information Add Remove								
	lame, Mailing Addre	ess & Phone		b. Job Title/Profes	ssion	d. C	omments		
	de city, state, & zip)	Λ1		Accon	rtant				
J	onathan	Almond	=	c. Employer's Nan					
		ey Place, 5		Blue SA	41				
Có	ncord, N	C 28025	_	Blue SA Partner Manage	2001+		ection Sum to Date		
				manage	TACE TO 1	\$	500.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yyy		k. Amount		
	0	check			01/24/20	24	\$ 500,00		
							\$		
							\$		
3. Cont	tributor Informa	ation		Add Ren	nove				
	ame, Mailing Addre	ess & Phone		b. Job Title/Profes		d. C	omments		
	le city, state, & zip)	- n		Retina	5 4				
pr	uce War	1 0 148		c. Employer's Nan	ne/Specific Field				
		od Drive		11 1.6	-mating				
K9	nnapolis	, NC 280	83	No information e.					
	٧ .					\$	75.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy	y)	k. Amount		
	δ	check			02/09/202	24	\$75,00		
							\$		
							\$		
	ributor Informa			Add Ren	nove				
	ame, Mailing Addre	ss & Phone		b. Job Title/Profes		-	omments		
	e city, state, & zip)	-oElect La		Schedule	er/Referrals	1			
Bla	ickwell L	indsey	are	c. Employer's Nan	ne/Specific Field				
P.C	Box 81	33		11.					
	cord, NC			Atri	unc		ection Sum to Date		
				1		\$.	200,00 Kind		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip		j. Date (mm/dd/yyy	(y)	k. Amount		
	0	in kind	for fun	d tacility draiser	01/19/2002	4	\$ 200.00 kind		
				III BASSINSET SAMILIENSET ANNIEUS SEUGENIA			\$		
							\$		
4. Tota	al only this Pa	age				\$	575,00		
5. Tota	al of ALL CR	O-1210 Pages				\$	5,390.00		
(This li	ne must be on line 6	of Detailed Summary Pa	ige CRO-1100)			1	3/3/0.00		

Contribut	ions from Other	Political Com	mittees Pg	of	l An	nendment Yes 💹 No
	report contributions from		ferendum or PA	C committees		
	Full Name (and Fund if			,	2. ID 1	Number
Comm	ittee to Eli	et Larr	1 Pit	tman		
3. Contributor	Information		Add Re	move		
a. Full Name, Mai	ling Address & Phone		b. Type of Comm		d. Com	ments
(include city, sta	ite, & zip)	,	Candidate	☐ PAC		
Commit	toe to Elect well Lindse x 8133 J, NC 2802	Laura	c. Level Registere	d (Specify)	-	
plack	Melizinase	. 4	Federal	County:		
1-0 BO	X 8122	7	State	Municipality:	e. Elect	ion Sum to Date
Concore	d, NC 2802					00.00 in
f. Account Code	g. Form of Payment	h. In-Kind Description		i. Date (mm/dd/yyy	yy) j. A	Amount
٥	inkind	for fund	facility raiser	01/19/202	4 \$	200,00 kind
					\$	
					\$,
3. Contributor	Information		Add Re	move		
a. Full Name, Mail	ling Address & Phone		b. Type of Comm		d. Com	ments
(include city, sta	te, & zip)		Candidate	PAC		
			Referendum	w.down.co.co.co.co.co.co.co.co.co.co.co.co.co.		
			c. Level Registere	party .		
			Federal State	County: Municipality:	o Floor	for Com to Data
			L State	Municipanty:	e. Elect	ion Sum to Date
					\$	
f. Account Code	g. Form of Payment	h. In-Kind Description		i. Date (mm/dd/yyy	(y) j. /	Amount
					\$	
					\$	
					\$	
3. Contributor	Information		Add Re	move		
a. Full Name, Mail	ing Address & Phone		b. Type of Comm		d. Com	ments
(include city, sta	te, & zip)		Candidate	PAC		
			Referendum		-	
e e			c. Level Registere	County:		
			State	Municipality:	e Flect	ion Sum to Date
			State	ividificipanty.	1	ion Sum to Date
f. Account Code	L F f P	L L VI 15		l: D-4 / /14/	\$	
i. Account Code	g. Form of Payment	h. In-Kind Description		i. Date (mm/dd/yy)	yy) J. /	Amount
					\$;
					\$	1
					\$;
4. Total only th	is Page				\$	
	CRO-1230 Pages				\$	
(This line must be	e on line 8 of Detailed Summe	ry Page CRO-1100)				

^			•
(har	tetan	mma	aanc
V/II	Stan	ших	Loans
~ ~			

	,		,	Amendment	:		
Pg		of		☐ Yes	\bowtie	No	

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable)	2. ID Number							
Committee to Elect Larry	4 PitAman							
3. Lender Information								
a. Full Name, Mailing Address & Phone	b. Job Title/Profession	d. Comments						
(include city, state, & zip)	Retired/Legislate Unemployed minist	Δ Υ						
Larry G. P. Hman	Unemployed minist	er						
Larry G. P. Hman 250 Roberta Road, SW		e. Start Date (mm/dd/yyyy)						
Concord, NC 28027	c. Employer's Name/Specific Field	10/10/2011						
2, 1, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2,	NCGA (Rep. NC Hous	f. End Date (mm/dd/yyyy)						
		12/31/2022						
g. Rate h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance						
0% None	\$ 500.00	\$500.00						
k. Full Name of Lending Institution		l. Loan Number						
None		None						
3. Lender Information	Add Remove							
a. Full Name, Mailing Address & Phone	b. Job Title/Profession	d. Comments						
(include city, state, & zip)								
		e. Start Date (mm/dd/yyyy)						
	c. Employer's Name/Specific Field							
		f. End Date (mm/dd/yyyy)						
g. Rate h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance						
%	\$	\$						
k. Full Name of Lending Institution		I. Loan Number						
3. Lender Information	Add Remove							
a. Full Name, Mailing Address & Phone	b. Job Title/Profession	d. Comments						
(include city, state, & zip)								
		e. Start Date (mm/dd/yyyy)						
	c. Employer's Name/Specific Field							
		f. End Date (mm/dd/yyyy)						
g. Rate h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance						
%	\$	\$						
k. Full Name of Lending Institution	l. Loan Number							
4. Total only this Page		\$						
5. Total of ALL CRO-1430 Pages (This line must be on line 21 of Detailed Summary Page CRO-1100)		\$						

Use this form to report non-monetary contributions, donations, good Use CRO-1215 if In-Kind Contributions were or will be refunded.			lee or	fund.
1. Committee Full Name (and Fund if applicable)			2. ID) Number
committee to Elect Larr	y Pitt	man		•
3. Contributor Information	The base of the second			
a. Full Name, Mailing Address & Phone (include city, state, & zip) Molly Measmer (6300 Homestead Drive	b. Type of Contrib	outor	c. Cor	mments
Concord, NC 28025	Referendum Other Receipt			ection Sum to Date
e. Description		f. Date (mm/dd/yyy	(y) g	g. Fair Market Amount
provided food for fundraises				\$ 200.00
				\$
				\$
3. Contributor Information		nove		
a. Full Name, Mailing Address & Phone	b. Type of Contrib	outor	c. Cor	mments
(include city, state, & zip) Committee to Elect Laura Blackwell Lindsey P.O'Box 8133	Individual Candidate Party PAC			
Concord, NC 28027	Referendum	2000		ection Sum to Date
Concord, NC 28UZI	Other Receipt	Source	\$ 2	200.00 kind
e. Description	L	f. Date (mm/dd/yyy		g. Fair Market Amount
provided facility for fundra		01/19/202		
				\$
				\$
	Add Ren			
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contrib			ection Sum to Date
e. Description		f. Date (mm/dd/yyy	(y) g	g. Fair Market Amount
-				\$
				\$
				\$
4. Total only this Page			\$.	400.00
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)			\$	400.00

Pg ____ of ____ Amendment No

In-Kind Contributions

	1		endment
Disbursements	Pg	of	Yes
		_	

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

	Full Name (and Fund					2. ID Number			
	ittee to d		larr	y Pi7	4man				
3. Type of Dish	oursement (Please	use separate CR	0-1310	forms for e	each type of Disb	ursement.)			
Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures									
4. Payee Inform	Comments and the second			Add	Remove				
	failing Address & Ph	one		b. Coordinate	ed Committee Name	d. Comments			
(include city, state, & zip)									
5taple	es incord Pkwy	1. th +	2 🗖	c Level Pegi	stered (Specify)				
1480 C	on cord PKWY	NOVICE	230	Federal	County:				
Concor	d, NC 28	025		State	Municipa Municipa	dity: e. Election Sum to Date			
	,					\$ 77.23			
	T =	I. S		<u> </u>					
f. Account Code	g. Form of Payment bankcard	h. Purpose Code		mm/dd/yyyy)		k. Required Remarks			
0	bankcara	handout	0110	12029	\$ 36.58	handout cards			
		B			\$				
4. Payee Inform				Add	Remove				
	ing Address & Phone			b. Coordinate	ed Committee Name	d. Comments			
(include city, sta	te, & zip)								
Woote	en Graphi er 819 ne, NC 27	CS		c. Level Regis	stered (Specify)				
Draw	er 879"	16		Federal	County:				
Melcor	ne, NC 27	374		State	■ Municipa	lity: e. Election Sum to Date			
70 30						\$2,220,25			
f. Account Code	g. Form of Payment	h. Purpose Code	I Data (nm/dd/yyyy)	j. Amount				
O O	and the state of t	\(\int \)	Commission of the Commission	Control expension in the street street of the street is not	A CONTRACTOR OF CONTRACTOR AND ADDRESS OF THE PARTY OF TH	k. Required Remarks Hown payment on yard s; ans			
	bankcard	_ A	01/1	1/24	\$ 1,100.00	yard's; gns			
					\$				
4. Payee Inforn				Add \Box	Remove				
	ing Address & Phone			b. Coordinate	ed Committee Name	d. Comments			
(include city, stat		_							
Woote	n Graphic 27819	>		c. Level Regi	stered (Specify)				
Drawe	24.814.			☐ Federal	County:				
Welcom	ne, NC 273	374		State	☐ Municipa	dity: e. Election Sum to Date			
,		,				\$ 2,220.25			
f. Account Code	g. Form of Payment	h. Purpose Code	Annual Congression		j. Amount	k. Required Remarks			
0	check	1 A	01/2	9/24	\$1,120,25	balance due on yardsigns			
					s				
5. Total only th	is Page					\$2,256.83			
	CRO-1310 Pages					\$2,256.83			
	line 13a of Detailed Sum	ımary Page CRO-11	00 if One	rating Expens	es)	4 226.05			
						8.1, /20.00			
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)									
7. Purpose Codes (List detailed expenditure code in (h.) above)									
A* - Media	B* - Printir			undraising	D - To	Another Candidate			
E - Salaries	F* - Equip		G - Po	litical Party		olding Public Office Expenses			
I - Postage	J - Penaltic	es	K* - O	office Expen	ises Q* - De	onation to Legal Expense Fund			
O* Other			77.15 (CALSENA	0. 11					
* Codes requir	e detailed explanati	on in required r	emarks	s field (k)		2000年,1900年,1900年			

Disb	ursemen	ts
	WA DULLEUR	4

			_	Amendment	
Pg	2	of	2	☐ Yes	No

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

	1. Committee Full Name (and Fund if applicable) 2. ID Number							
Committee to Eleot Larry Pittman								
3. Type of Disb	ursement (Please	use separate CR	0-1310	forms for e	ach type of Disb	ursement.)		
Operating Exp		ributions to Candida	tes/Politic			dinated Party Expenditures		
4. Payee Inforn				Add	Remove			
	ailing Address & Pho	one		b. Coordinate	ed Committee Name	d. Comments		
(include city, state,	& zip)							
Lamas	Adverti	sing		c. Level Regio	stered (Specify)	_		
4603 6	lickory Bl	rd'		Federal	County:			
Gna : L	e Falls, NC	28630		State	Municipal	lity: e. Election Sum to Date		
	(\$1,428.57		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
0	check	A	02/02	2/2024	\$1,428,57	billboard		
					\$			
4. Payee Inforn	nation			Add	Remove			
	ng Address & Phone			b. Coordinate	ed Committee Name	d. Comments		
(include city, stat						7		
Staple	5	North H	350	c. Level Poris	stered (Specify)			
Staples 1480 concord Pkwy., North #350 Concord, N C 28025 C. Level Registered (Specify) Federal Do County: State Municipality: e. Election Sum to Date								
Concord	N C280	25		State	Municipa	lity: e. Election Sum to Date		
1								
						\$77.23		
Make any local states of the last appearance in the last and a contract of the last and the last		h. Purpose Code		mm/dd/yyyy)		k. Required Remarks		
0	bankcard	В	02/0	2/2024	s 40.65	handoutcards		
					\$			
4. Payee Inform				Add	Remove			
	ng Address & Phone			b. Coordinate	ed Committee Name	d. Comments		
(include city, stat								
WRKB	Kadio			e Level Degle	stered (Specify)			
P. O.B.	Radio x 1388			Federal	County:			
Vannan	olis,NC 2	1082		State	Municipa	lity: e. Election Sum to Date		
nannap	111/11-20	, 00 —				\$ 1,000.00		
		h. Purpose Code			j. Amount	k. Required Remarks		
0	check	<i>A</i>	02/	09/2024	\$ /,000,00	radio ads		
					\$			
5. Total only thi	is Page					\$2,469.22		
6. Total of ALL	CRO-1310 Pages					The second secon		
	line 13a of Detailed Sum	mary Page CRO-11	00 if Ope	rating Expense	es)	4,726,05		
			37.0) 3 1/ 1-		
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)								
7. Purpose Codes (List detailed expenditure code in (h.) above)								
A* - Media	B* - Printin			undraising	D - To	Another Candidate		
E - Salaries	F* - Equipn			litical Party		olding Public Office Expenses		
- Postage	J - Penaltie	s	K* - O	office Expen	ises Q* - Do	onation to Legal Expense Fund		
O* Other	a detailed and and	in warming 3		Gold (I-)				
* Codes require detailed explanation in required remarks field (k)								