

Disclosure Report 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 update information.

1. Committee Information				
a. Full Name			c. ID Number	
KEEP WAYNE NIXON REGISTER OF DEEDS				
b. Mailing Address (include City, State and Zip Code)			d. Date Filed	
P.O. BOX 602 CONCORD, NC 28026			07/10/2024	
			e. Phone Number	
			704-608-5173	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name	
2024	02/18/2024	06/30/2024	WAYNE NIXON <i>Kimberly Herrick</i>	
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund		Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special		
		State/County <input type="checkbox"/> Organizational Quarterly <input type="checkbox"/> First <input checked="" type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special		
		Referendum <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special		
7. Type of Fund (if applicable, check one)		10. Special Report Name		
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:				
8. Number of Fundraisers this Report				
0				
3. Account Information		3. Account Information		
a. Financial Institution Full Name		a. Financial Institution Full Name		
WELLS FARGO				
b. Purpose	c. Account Code	b. Purpose	c. Account Code	
CAMPAIGN EXPENSES	A	RECEIVED IN-PERSON JUL 10 2024 CABARRUS COUNTY BOARD OF ELECTIONS		
	d. Period Begin Balance		d. Period Begin Balance	
	\$ 634.90		\$	
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				
<i>Kimberly A Herrick</i>		<i>Kimberly A Herrick</i>		07/10/2024
Printed Name of Signer		Signature of Appointed Treasurer		Date
FOR OFFICE USE ONLY				
Date Received:	<u>7-10-24</u>	Employee:	<u>TC</u>	Delivery Method
Date Postmarked:	_____	Employee:	_____	<input type="checkbox"/> Normal Mail
Date Scanned:	<u>7-10-24</u>	Employee:	<u>KAN</u>	<input type="checkbox"/> Registered Mail
Date Data Entered:	_____	Employee:	_____	<input checked="" type="checkbox"/> Hand Delivered
				<input type="checkbox"/> Electronically Filed
				<input type="checkbox"/> 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.				
You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.				

Detailed Summary

Amendment
 Yes No

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

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number	
KEEP WAYNE NIXON REGISTER OF DEEDS	2024 Second Quarter		
Start of Election Cycle: January 1, <u>2021</u>		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 634.90	\$ 634.90
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 0.00	\$ 0.00
6) Contributions from Individuals (CRO-1210)		\$ 0.00	\$ 0.00
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00	\$ 0.00
8) Contributions from Other Political Committees (CRO-1230)		\$ 0.00	\$ 0.00
9) Loan Proceeds (CRO-1410)		\$ 0.00	\$ 1,000.90
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$ 0.00	\$ 0.00
11) Other Receipt Sources			
11a) Interest on Bank Accounts (CRO-1250)		\$ 0.00	\$ 0.00
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$ 0.00	\$ 0.00
11c) Outside Sources of Income (CRO-1250)		\$ 0.00	\$ 0.00
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$ 0.00	\$ 0.00
11e) Exempt Purchase Price Sales (CRO-1265)		\$ 0.00	\$ 0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		\$ 0.00	\$ 1,000.90
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$ 0.00	\$ 1,000.90
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$ 0.00	\$ 0.00
13c) Coordinated Party Expenditures (CRO-1310)		\$ 0.00	\$ 0.00
14) Aggregated Non-Media Expenditures (CRO-1315)		\$ 0.00	\$ 0.00
15) Loan Repayments (CRO-1420)		\$ 0.00	\$ 0.00
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$ 0.00	\$ 0.00
17) In-Kind Contributions (CRO-1510)		\$ 0.00	\$ 0.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 0.00	\$ 1,000.90
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 634.90	\$ 634.90
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 2,802.90	
22) Debts and Obligations owed by the Committee (CRO-1610)		\$ 0.00	
23) Debts and Obligations owed to the Committee (CRO-1620)		\$ 0.00	
24) Account Transfers Within the Committee (CRO-1720)		\$ 0.00	
25) Administrative Support (CRO-1710)		\$ 0.00	\$ 0.00
26) Forgiven Loans (CRO-1440)		\$ 0.00	\$ 0.00
27) 48-Hour Notice Reports Sum (CRO-2220)		\$ 0.00	\$ 0.00
28) Contributions to be Refunded (CRO-1215)		\$ 0.00	\$ 0.00

Outstanding Loans

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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		
KEEP WAYNE NIXON REGISTER OF DEEDS					
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
WAYNE NIXON 3462 RANKIN RD CONCORD, NC 28027		REGISTER OF DEEDS			
		c. Employer's Name/Specific Field		e. Start Date (mm/dd/yyyy)	
		CABARRUS COUNTY		09/09/2016	
				f. End Date (mm/dd/yyyy)	
g. Rate	h. Security Pledged	i. Original Loan Amount		j. Remaining Loan Balance	
%		\$ 500.00		\$ 500.00	
k. Full Name of Lending Institution				l. Loan Number	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
WAYNE NIXON 3462 RANKIN RD CONCORD, NC 28027		REGISTER OF DEEDS			
		c. Employer's Name/Specific Field		e. Start Date (mm/dd/yyyy)	
		CABARRUS COUNTY		02/01/2018	
				f. End Date (mm/dd/yyyy)	
g. Rate	h. Security Pledged	i. Original Loan Amount		j. Remaining Loan Balance	
%		\$ 500.00		\$ 500.00	
k. Full Name of Lending Institution				l. Loan Number	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
WAYNE NIXON 3462 RANKIN RD CONCORD, NC 28027		REGISTER OF DEEDS			
		c. Employer's Name/Specific Field		e. Start Date (mm/dd/yyyy)	
		CABARRUS COUNTY		12/04/2019	
				f. End Date (mm/dd/yyyy)	
g. Rate	h. Security Pledged	i. Original Loan Amount		j. Remaining Loan Balance	
%		\$ 802.00		\$ 802.00	
k. Full Name of Lending Institution				l. Loan Number	
4. Total only this Page				\$ 1,802.00	
5. Total of ALL CRO-1430 Pages <i>(This line must be on line 21 of Detailed Summary Page CRO-1100)</i>				\$ 2,802.90	

Outstanding Loans

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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	
KEEP WAYNE NIXON REGISTER OF DEEDS			
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
WAYNE NIXON 3462 RANKIN RD CONCORD, NC 28027		REGISTER OF DEEDS	e. Start Date (mm/dd/yyyy)
		c. Employer's Name/Specific Field	12/11/2023
		CABARRUS COUNTY	f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
0.00%		\$ 1,000.90	\$ 1,000.90
k. Full Name of Lending Institution			l. Loan Number
4. Total only this Page			\$ 1,000.90
5. Total of ALL CRO-1430 Pages <i>(This line must be on line 21 of Detailed Summary Page CRO-1100)</i>			\$ 2,802.90