

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 <u>Committee to Elect Zach Erwin</u>	c. ID Number
b. Mailing Address (include City, State and Zip Code) <u>903 Applewood Ave</u> <u>Kannapolis, NC 28081</u>	d. Date Filed <u>9/26/2025</u>
	e. Phone Number <u>(704) 449-4250</u>

2. Report Year <u>2025</u>	3. Period Start Date (mm/dd/yy) <u>07/17/2025</u>	4. Period End Date (mm/dd/yy) <u>09/23/2025</u>	5. Treasurer Full Name <u>Zach Erwin</u>
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6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
☒ Candidate Campaign	☐ Party	Municipal	State/County	Referendum
☐ PAC	☐ Referendum	☐ Organizational	☐ Organizational	☐ Organizational
☐ Independent Expenditure	☐ Joint Fundraiser	☒ Thirty-five day	Quarterly	☐ Pre-referendum
☐ Legal Expense Fund		☐ Pre-primary	☐ First	☐ Final
		☐ Pre-election	☐ Second	☐ Supplemental Final
		☐ Pre-runoff	☐ Third	☐ Annual
		Semi-annual	☐ Fourth	☐ Special
		☐ Mid Year	Semi-annual	
		☐ Year End	☐ Mid Year	
		☐ Final	☐ Year End	
		☐ Special	☐ Final	
			☐ Special	

7. Type of Fund (if applicable, check one)		10. Special Report Name	
☐ Booster Fund			
☐ Building Fund			
☐ Other:			
8. Number of Fundraisers this Report <u>1</u>			

11. Account Information		11. Account Information	
a. Financial Institution Full Name <u>Wells Fargo</u>	a. Financial Institution Full Name	b. Purpose <u>RECEIVED IN-PERSON</u> <u>SEP 26 2025</u> <u>CABARRUS COUNTY BOARD OF ELECTIONS</u>	c. Account Code
b. Purpose	c. Account Code <u>2365</u>	d. Period Begin Balance	
	d. Period Begin Balance <u>\$ 25.00</u>		

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 of Elections.

Zachary Erwin
Printed Name of Signer

[Signature]
Signature of Appointed Treasurer

9/26/2025
Date

FOR OFFICE USE ONLY

Date Received: <u>9-26-25</u>	Employee: <u>WAN</u>	Delivery Method
Date Postmarked: <u>4-26-25</u>	Employee: <u>WAN</u>	☐ Normal Mail
Date Scanned:	Employee:	☐ Registered Mail
Date Data Entered:	Employee:	☒ Hand Delivered
		☐ Electronically Filed
		☐ 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	
Committee to Elect Zach Erwin		35-Day			
Start of Election Cycle: January 1, 2024		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 25.00		\$ 25.00	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 420.00		\$ 475.00	
6) Contributions from Individuals (CRO-1210)		\$ 800.00		\$ 800.00	
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)		\$ 1,220.00		\$ 1,275.00	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 996.40		\$ 996.40	
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)		\$ 0.00		\$ 30.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 996.40		\$ 1,026.40	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 248.60		\$ 248.60	
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 1 of 1

Amendment

☐ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Committee to Elect Zach Ennis						
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
☐ Add		Credit		08/09/2025	\$ 30.00	
☐ Remove						
☐ Add		Credit		08/09/2025	\$ 25.00	
☐ Remove						
☐ Add		Credit		08/09/2025	\$ 50.00	
☐ Remove						
☐ Add		Credit		08/09/2025	\$ 20.00	
☐ Remove						
☐ Add		Credit		08/09/2025	\$ 25.00	
☐ Remove						
☐ Add		Credit		08/09/2025	\$ 100.00	
☐ Remove						
☐ Add		Credit		08/09/2025	\$ 50.00	
☐ Remove						
☐ Add		Credit		08/09/2025	\$ 20.00	
☐ Remove						
☐ Add		Credit		08/09/2025	\$ 10.00	
☐ Remove						
☐ Add		Credit		08/09/2025	\$ 20.00	
☐ Remove						
☐ Add		Credit		08/09/2025	\$ 20.00	
☐ Remove						
☐ Add		Credit		08/10/2025	\$ 50.00	
☐ Remove						
☐ Add		Credit		08/25/2025	\$ 25.00	
☐ Remove						
☐ Add		Credit		09/07/2025	\$ 50.00	
☐ Remove						
☐ Add		Credit		09/15/2025	\$ 25.00	
☐ Remove						
☐ Add					\$	
☐ Remove					\$	
☐ Add					\$	
☐ Remove					\$	
☐ Add					\$	
☐ Remove					\$	
☐ Add					\$	
☐ Remove					\$	
☐ Add					\$	
☐ Remove					\$	
☐ Add					\$	
☐ Remove					\$	
4. Total only this Page					\$ 420.00	
5. Total of ALL CRO-1205 Pages					\$ 420.00	
(This line must be on line 5 of Detailed Summary Page CRO-1100)						

Contributions from Individuals

Pg 1 of 2 Amendment ☐ Yes ☐ 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 Zach Erwin						
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
Marjorie McVay 2501 Conland Pl. Cary, NC 27518				Consultant		
				c. Employer's Name/Specific Field		e. Election Sum to Date
				UNC Health		
						\$ 100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐		Credit Card		08/09/2025	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
Jennifer Deese 614 Orphanage Rd Concord, NC 28027				Regional Delivery Mgr.		
				c. Employer's Name/Specific Field		e. Election Sum to Date
				Professional Services at Five9, Inc.		
						\$ 100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐		Credit Card		08/09/2025	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
Jackson Boone 1218 Anthony Ln Mason, OH 45040				Dentist		
				c. Employer's Name/Specific Field		e. Election Sum to Date
				Sustain Your Smile Dentistry		
						\$ 100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐		Credit Card		08/09/2025	\$ 100.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 300.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 800.00	

Contributions from Individuals

Pg 2 of 2 ☐ Yes ☐ 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 Zach Erwin						
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
Robert Nicholson 96 Hammerschmidt Ave Buffalo, NY 14210				Team Lead		
				c. Employer's Name/Specific Field		
				JM Smucker Milkbone		
				e. Election Sum to Date		
				\$ 250.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐		Credit Card		08/11/2025	\$ 250.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
Rita Nicholson 96 Hammerschmidt Ave Buffalo, NY 14210				Senior AR Specialist		
				c. Employer's Name/Specific Field		
				Ensemble Health Partners		
				e. Election Sum to Date		
				\$ 250.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐		Credit Card		08/11/2025	\$ 250.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
				c. Employer's Name/Specific Field		
				e. Election Sum to Date		
				\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐					\$	
☐					\$	
☐					\$	
4. Total only this Page					\$ 500.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 800.00	

Disbursements

Pg 1 of 1 Amendment ☐ 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 Elect Zach Erwin							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures							
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Big Daddy Signs 28 W Spring St, Cookeville, TN 38501							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☒ Municipality:		e. Election Sum to Date	
						\$ 547.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	Credit Card	0	08/12/2025	\$ 547.00	Campaign Signs		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Willie B Moore Sign Co. 2305 S. Main St Kannapolis, Nc 28081							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☒ Municipality:		e. Election Sum to Date	
						\$ 449.40	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	Credit Card	0	08/29/2025	\$449.40	Campaign Magnets		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
				\$			
				\$			
5. Total only this Page						\$ 996.40	
6. Total of ALL CRO-1310 Pages							
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>						\$ 996.40	
7. Purpose Codes (List detailed expenditure code in (h.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							