## **Disclosure Report Cover**

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					and the second s
a. Full Name			c.	ID Number	
Committee to Elect	Don MA	FRITIN		in rumber	
b. Mailing Address (include City, State and Zip Cod			d.	Date Filed	
6307 TOBACCOVILL				1/28/21	
Tobaccoville, NC ;	2 7050		e.	Phone Number	
				336-399	-8064
2. Report Year 3. Period Start Date (mm/de			5. Treasurer l	Full Name	
2020 7/01/20		1	DONALd L		
6. Type of Committee (Check One)	9. Type of Rep	ort (check only one	type of report	from one cates	gory)
Candidate Campaign Party	Municipal	State/County	Re	ferendum	
PAC Referendum	Organizationa	l 🔲 Organizati	onal	<b>O</b> rganizational	
Independent Expenditure 🔲 Joint Fundraiser	Thirty-five da	y Quarterly		Pre-referendun	n
Legal Expense Fund	Pre-primary	E First		Final	
	Pre-election	Seco	nd F	Supplemental I	Final
7. Type of Fund (if applicable, check one)	Pre-runoff	Third		Annual	
Booster Fund	Semi-annual	Fourt Fourt	line and the second sec		
Building Fund				Special	
Building Fund	Mid Yea				
	Year Enc		Year 10	Special Rep	ort Name
Other:	Final	Year Year	End		20
8. Number of Fundraisers this Report	Special	Final			2
		Special		0	Ser 1
11 Account Information	1	and the second se		<u>['</u>	1.
11. Account Information		11. Account Inform		C .	N CAN
a. Financial Institution Full Name		a. Financial Institution	Full Name	- E4	CO
BB+T (TRUIST)				~	PK COL
b. Purpose c. Account Co	ode	b. Purpose	c	Account Code	
Election DM 2	014			C	8:22
Canadia			-		
			d.	Period Begin Ba	lance
\$ 841	.17		\$		
CERTIFICATION					
I certify that the Committee or Fund is in compl	iance with all appli	cable provisions of Art	icle 22A, 22B &	22D-22M of C	hapter 163
of the NC General Statutes and that no funds are					
OF THE INCLUENCE AND THAT HO TUNDS AND		promotion of other not	i diberobed fund.	. i futurer corti	ing that this
		the NC State Board of	Elections		
report is complete, true and correct and that I ha		the NC State Board of	Elections. $\wedge$	. 1	
report is complete, true and correct and that I has $T$		the NC State Board of	Elections.	127/2	, ,
DONALD L. MARTIN, JR.	ve been trained by	SMantin	$\sum$	1/27/2	4
DONALD L. MARTIN, JR. Printed Name of Signer	ve been trained by	the NC State Board of Martin nature of Appointed Treas	$\sum$	_1/27/2 Date	4
DONALD L. MARTIN, JR.	ve been trained by	SMantin	$\sum$	1/27/2 Date	니
DONALD L. MARTIN, JR. Printed Name of Signer	ve been trained by	A Martin hature of Appointed Treas	uter Delive	ry Method	<u>4</u>
The point is complete, true and correct and that I has <u>DoNALD</u> . MARTIN, JR. Printed Name of Signer FOR OFFICE USE ONLY	ve been trained by	A Martin hature of Appointed Treas	Delive	ry Method ormal Mail	<u>4</u>
The point is complete, true and correct and that I has <u>DoNALD</u> . MARTIN, JR. Printed Name of Signer FOR OFFICE USE ONLY	ve been trained bySig	Amantum nature of Appointed Treas	Delive	ry Method ormal Mail gistered Mail	<u>4</u>
report is complete, true and correct and that I ha DONALD L. MARTIN, JR. Printed Name of Signer FOR OFFICE USE ONLY Date Received:	ve been trained by	Amantum nature of Appointed Treas	Delive Delive	ry <u>Method</u> ormal Mail gistered Mail and Delivered	<u>4</u>
report is complete, true and correct and that I ha DONALD L. MARTIN, JR. Printed Name of Signer FOR OFFICE USE ONLY Date Received:	ve been trained bySig	nature of Appointed Treas	Delive Delive	ry Method ormal Mail gistered Mail	led
report is complete, true and correct and that I ha <u>DoNALd L. MARTIN, JR.</u> Printed Name of Signer FOR OFFICE USE ONLY Date Received: <u>128</u> 21 Date Postmarked:	ve been trained by	ree:	Delive Delive Re Electric Sig	ry <u>Method</u> ormal Mail gistered Mail and Delivered	eceived
report is complete, true and correct and that I ha <u>DoNALd L. MARTIN, JR.</u> Printed Name of Signer FOR OFFICE USE ONLY Date Received: <u>128 21</u> Date Postmarked: Date Scanned: Date Data Entered:	ve been trained by Employ Employ Employ Employ	ree:	Delive Delive No Re Electric Signation	ry Method ormal Mail gistered Mail and Delivered ectronically Fi gner has not re andatory traini	eceived ng
report is complete. true and correct and that I ha DONALD L. MARTÍN, JR. Printed Name of Signer FOR OFFICE USE ONLY Date Received: Date Postmarked: Date Scanned: Date Data Entered: Please Note: This form cannot be used	ve been trained by Employ Employ Employ Employ Employ	hature of Appointed Treas	Delive Delive Re Electric Signature Delive	ry Method ormal Mail gistered Mail and Delivered ectronically Fi gner has not re andatory traini ttee address, tr	eceived ng
report is complete, true and correct and that I ha DONALD L. MARTIN, JR. Printed Name of Signer FOR OFFICE USE ONLY Date Received: Date Postmarked: Date Scanned: Date Data Entered: Please Note: This form cannot be used assistant treasurer, cu	ve been trained by Employ Employ Employ Employ Employ to amend comm	A provinted Treas	Delive Delive Re Electric Delive Re Electric Signation as the comminut information	ry Method ormal Mail gistered Mail and Delivered ectronically Fi gner has not re andatory traini ttee address, tr n.	eceived ng
report is complete. true and correct and that I ha DONALD L. MARTÍN, JR. Printed Name of Signer FOR OFFICE USE ONLY Date Received: Date Postmarked: Date Scanned: Date Data Entered: Please Note: This form cannot be used	ve been trained by Employ Employ Employ Employ Employ to amend comm	A provinted Treas	Delive Delive Re Electric Delive Re Electric Signation as the comminut information	ry Method ormal Mail gistered Mail and Delivered ectronically Fi gner has not re andatory traini ttee address, tr n.	eceived ng

<b>Detailed Summary</b> Use this form to summarize all disclosure reporting forms and	to total mo	netary information	Amendment
1. Committee Full Name (and Fund if applicable)	2. Type of	Report 3.	D Number
Committee to Elect DON MAR	TN 50	Emi ANNUAL YEAREND	
Start of Election Cycle: January 1, <u>2018</u>	<u> </u>	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$1,841,17	\$2,415,77
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$	\$2456.05
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$
8) Contributions from Other Political Committees	- (CRO-1230)	\$	\$ 1000.00
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)	\$ -0-	\$ 34 56.05
EXPENDITURES		<u> </u>	· <u>····································</u>
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$	\$ 1074.60
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 750,00	\$ 32 50,00
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)	\$	\$ 456.05
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1	5, 16 and 17)	\$ 750.00	
19) Cash on Hand at End (Add lines 4 and 12 together, then su	btract line 18)	\$ 1091.17	\$ 1091.17
ADDITIONAL INFORMATION			an a len it. Noner mitter i sond miner a sum figst in since which a
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-1610) (CRO-1620)	\$ \$	
		_ ·	
<ul> <li>23) Debts and Obligations owed to the Committee</li> <li>24) Account Transfers Within the Committee</li> <li>25) Administrative Support</li> </ul>	(CRO-1620)	\$	\$
· · ·	(CRO-1620) (CRO-1720)	\$ \$	\$ \$
24) Account Transfers Within the Committee 25) Administrative Support	(CRO-1620) (CRO-1720) (CRO-1710)	\$ \$ \$	

ĩ

2

## Disbursements

5

4

Pg \_\_\_\_\_ of \_\_\_\_\_ Yes

No No

٠

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

<u> </u>	<b>Ull Name (and Fund</b>	l if applicable)					2. ID Number
Commit	tee to EL.	ect De	In	ARTIN			
3. Type of Disb		use separate Ch				WEGA	nont)
Operating Exp	And the second	tributions to Candida					d Party Expenditures
4. Payee Inform					Remove	oromate	a Party Expenditures
	lailing Address & Phi	<u></u>	<b>يليا</b> :		d Committee Nam	<u></u>	d. Comments
(include city, state,	•	AIC		D. COULUMAN		<u> </u>	
	LL COMMIT			-			v
				c. Level Regis	stered (Specify)		
299 S	. Westvie	V DR.	1	Federal	County:		
Winsto	N- SAlem	NC 27	104	L State	Municipa	ality:	e. Election Sum to Date
336-	748-004	6					\$500.00
Account Code	g. Form of Payment	h. Purpose Code	i. Date (	mm/dd/yyyy)	j. Amount	k Re	quired Remarks
DM 2014	Check	D	07/3	22/2020	\$ 500.00		
0				- <u>I'</u>	¢		
		L,		A . 1 <sup>10</sup> 1 1 1	6		म् सः द्वानः असः स्वर्भः
1. Payee Inform		<u> </u>			Remove	<u></u>	
include city, sta	ing Address & Phone			b. Coordinate	d Committee Nam	e (	d. Comments
Include city, sta	RAW (C. for	NO GOUD	.+				
				c. Level Regis	tered (Specify)		
7030	Inter La	Ken DR.		Federal	County:		
Kerne	rsville,	NC 272	284	L State	Municipa	ality:	e. Election Sum to Date
	- 733- 7						\$2,50,00
Account Code	g. Form of Payment	h. Purpose Code	i. Date (	nm/dd/yyÿy)	j. Amount	k. Re	quired Remarks
- İ	Check	D			\$250,00		
		<u> </u>	-	-	\$		
4. Payee Inform	nation			Add	Remove		-> u
		<u> </u>			d Committee Nam	<u> </u>	d. Comments
a run manic, itiáli	ing Address & Phone			In Coordinan		ų. II	
(include city, sta	ing Address & Phone te, & zip)			. Coordinau			
						<u>.</u>	
		• .		c. Level Regis	tered (Specify)		
		<u></u>		c. Level Regis	County:		
		<u></u>		c. Level Regis			e, Election Sum to Date
				c. Level Regis	County:		e. Election Sum to Date
(include city, sta	te, & zip)	h, Purpose Code	i. Date (	c. Level Regis	County:	ality:	\$
(include city, sta		h. Purpose Code	i. Date (1	c. Level Regis	j. Amount	ality:	
(include city, sta	te, & zip)	h. Purpose Code	i. Date ()	c. Level Regis	County: County: Municipa	ality:	\$
(include city, sta	te, & zip)	h. Purpose Code	i. Date (1	c. Level Regis	j. Amount	ality:	\$ quired Remarks
(include city, sta . Account Code	te, & zip) g. Form of Payment	h. Purpose Code	i. Date (	c. Level Regis	County: County: Municipa	ality:	\$
(include city, sta . Account Code 5. Total only th	te, & zip) g. Form of Payment	h. Purpose Code	i. Date ()	c. Level Regis	County: County: Municipa	ality:	\$ quired Remarks
(include city, sta Account Code 5. Total only th 6. Total of ALI	g. Form of Payment is Page			c: Level Regis	County: County: Municipa	ality:	\$ quired Remarks \$ 750. <u>2</u>
(include city, sta Account Code 5. Total only th 5. Total of ALI (This line goes in	g. Form of Payment is Page . CRO-1310 Pages	amary Page CRO-11	100 if Ope	c: Level Regis	County: Municipa j. Amount \$ \$ \$ \$ \$ \$ \$ \$ \$	ality:	\$ quired Remarks
(include city, sta Account Code Total only th Total of ALI (This line goes in (This line goes in	g. Form of Payment is Page CRO-1310 Pages a line 13a of Detailed Sun	umary Page CRO-11 umary Page CRO-11	100 if Ope 100 if Con	c: Level Regis	County: Municipa j. Amount \$ \$ \$ s) tes/Political Comm	ality:	\$ quired Remarks \$ 750.20
(include city, sta . Account Code 5. Total only th 6. Total of ALI (This line goes in (This line goes in (This line goes in	te, & zip) g. Form of Payment lis Page . CRO-1310 Pages a line 13a of Detailed Sun t line 13b of Detailed Sun t line 13c of Detailed Sun	amary Page CRO-11 amary Page CRO-11 amary Page CRO-11 amary Page CRO-11	100 if Ope 100 if Con 100 if Con	c: Level Regis	County: Municipa j. Amount \$ \$ \$ s) tes/Political Comm	ality:	\$ quired Remarks \$ 750. <u>2</u>
(include city, sta . Account Code 5. Total only th 6. Total of ALI (This line goes in (This line goes in (This line goes in 7. Purpose C	g. Form of Payment g. Form of Payment is Page A CRO-1310 Pages a line 13a of Detailed Sun t line 13b of Detailed Sun	amary Page CRO-11 amary Page CRO-11 amary Page CRO-11 amary Page CRO-11 expenditure cod	100 if Ope 100 if Con 100 if Coo e in (h.)	c: Level Regis	County: Municipa j. Amount \$ \$ \$ s) mes/Political Comm Expenditures)	ality:	\$ quired Remarks \$ 750. <u>2</u>
(include city, sta . Account Code 5. Total only th 6. Total of ALI (This line goes in (This line goes in (This line goes in	te, & zip) g. Form of Payment is Page . CRO-1310 Pages a line 13a of Detailed Sun a line 13b of Detailed Sun line 13c of Detailed Sun odes (List detailed	amary Page CRO-11 amary Page CRO-11 amary Page CRO-11 amary Page CRO-11 expenditure cod	100 if Ope 100 if Con 100 if Con 100 if Coo e in (h.) 'C* - F G - Po	c: Level Regis	County: Municipa j. Amount \$ \$ \$ \$ solution Expenditures D - To H* - H	ality:	\$ quired Remarks \$ 750.22 \$ her Candidate g Public Office Expenses
(include city, sta include city, sta control of All control of All (This line goes in (This line goes	g. Form of Payment g. Form of Payment is Page CRO-1310 Pages a line 13a of Detailed Sum a line 13b of Detailed Sum a line 13c of Detailed Sum odes (List detailed B* - Printi	amary Page CRO-11 amary Page CRO-11 amary Page CRO-11 expenditure cod ang ment	100 if Ope 100 if Con 100 if Con 100 if Coo e in (h.) 'C* - F G - Po	c: Level Regis	County: Municipa j. Amount \$ \$ \$ \$ solution Expenditures D - To H* - H	ality:	\$ quired Remarks \$ 750.00 \$ her Candidate g Public Office Expenses
(include city, sta . Account Code 5. Total only th . Total of ALI (This line goes in (This line goes in (This line goes in (This line goes in <b>7. Purpose C</b> A* - Media E - Salaries I - Postage O* Other	g. Form of Payment is Page CRO-1310 Pages a line 13a of Detailed Sum a line 13b of Detailed Sum a line 13c of Detailed Sum b line 13c of Detailed Sum a line 13c of Detailed Sum b line 13c of	amary Page CRO-11 amary Page CRO-11 amary Page CRO-11 expenditure cod ng ment es	100 if Ope 100 if Con 100 if Con 100 if Coo 100 if Coo	c: Level Regis Federal State state mm/dd/yyyy)	County: Municipa j. Amount \$ \$ \$ \$ solution Expenditures D - To H* - H	ality:	\$ quired Remarks \$ 750.22 \$ her Candidate