

Detailed Summary

Amendment
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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	
Nicholas Peters for Mayor	Thirty-five Day		
Start of Election Cycle: January 1, 2024		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 0.00	\$ 0.00
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 170.00	\$ 170.00
6) Contributions from Individuals (CRO-1210)		\$ 2537.79	\$ 2542.79
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 (7 dd lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 2707.79	\$ 2712.79
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$ 47.11	\$ 47.11
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)		\$ 1000.00	\$ 1000.00
17) In-Kind Contributions (CRO-1510)		\$	\$ 5.00
18) TOTAL EXPENDITURES (7 dd lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 1047.11	\$ 1052.11
19) Cash on Hand at End (7 dd lines 4 and 12 together, then subtract line 18)		\$ 1660.68	\$ 1660.68
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)		\$	\$

Contributions from Individuals

Amendment

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	
Nicholas Peters for Mayor							
3. Contributor Information <input type="checkbox"/> 7 dd <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Louis Pittard 4994 Lake Tree Ln Crozet VA 22432				No Job Title			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				Not Employed		\$ 200-	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	NP	credit card	NA	8/22/25	\$ 200-		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> 7 dd <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Brandon Maxwell 2337 Providence Creek Ln Charlotte NC 28270				Co-Founder			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				Sage Equity/ Terra Nexus Ventures		\$ 250-	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	NP	credit card	NA	8/27/25	\$ 250-		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> 7 dd <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Hemal Bathani 6031 Hemby Rd Matthews NC 28104				Business Owner			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				Investment		\$ 250-	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	NP	credit card	NA	9/13/25	\$ 250-		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 700-	
5. Total of A. . CRO-1210 Pages						\$ 2537.79	
<i>(This line must be on line 6 of Detailed Summar- Page CRO-1100)</i>							

Contributions from Individuals

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	
Nicholas Peters for Mayor							
3. Contributor Information <input type="checkbox"/> 7 dd <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Frank Capobianco San Juan, NY 11780				No Job Title			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				Not Employed		\$ 500	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	NP	Credit Card	NA	9/25/25	\$ 500		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> 7 dd <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Peters Custom Homes Inc 433 Highland Forest Dr Charlotte NC 28270				Construction Company			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
						\$ 337.79	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	NP	Credit Card	NA	8/28/25	\$ 1337.79		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> 7 dd <input type="checkbox"/> 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		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 1837.79	
5. Total of A. . CRO-1210 Pages						\$ 2537.79	
<i>(This line must be on line 6 of Detailed Summar- Page CRO-1100)</i>							

Disbursements

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
Nicholas Peters for Mayor						
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
Sunset Beach Town Hall 700 Sunset Blvd N Sunset Beach NC 28468						Rental of community center
				c. 7 level Registered (Specify)		e. Election Sum to Date
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$ 200-
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
NP	CreditCard	0	9/20/25	\$ 200-	Event Space	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
Act Blue. com						
				c. 7 level Registered (Specify)		e. Election Sum to Date
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 47.11
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
NP	Draft	Ø	9/23/25	\$ 47.11	Payment Processing Fee	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
				c. 7 level Registered (Specify)		e. Election Sum to Date
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$
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						\$ 247.11
6. Total of A77 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>						247.11
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 7 egal Expense Fund			
O* Other						
* Codes require detailed explanation in required remarks field (k)						

Refunds/Reimbursements From the Committee

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Amendment
 Yes No

Use this form to report refunds/reimbursements, including contributions returned to the contributor.

1. Committee Full Name (and Fund if applicable)			2. ID Number	
Nicholas Peters for Mayor				
3. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date
Peters Custom Homes Inc 433 Highland Forest Dr Charlotte NC 28270		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		8/28/25
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		e. Level Registered		i. Original Receipt Amount
		<input type="checkbox"/> Federal <input type="checkbox"/> County:		\$ 1337.79
		<input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		
		f. Purpose Code		j. Election Sum to Date
		L		\$ 337.79
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code
		marketing/print		NP
l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount	
Credit Card	Marketing/Print	8/28/25	\$ 1000-	
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date
		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		e. Level Registered		i. Original Receipt Amount
		<input type="checkbox"/> Federal <input type="checkbox"/> County:		\$
		<input type="checkbox"/> State <input type="checkbox"/> Municipality:		
		f. Purpose Code		j. Election Sum to Date
				\$
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code
l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount	
			\$	
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date
		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		e. Level Registered		i. Original Receipt Amount
		<input type="checkbox"/> Federal <input type="checkbox"/> County:		\$
		<input type="checkbox"/> State <input type="checkbox"/> Municipality:		
		f. Purpose Code		j. Election Sum to Date
				\$
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code
l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount	
			\$	
4. Total only this Page				\$ 1000-
5. Total of A. . CRO-1320 Pages (This line must be on line 16 of Detailed Summar- Page CRO-1100)				\$ 1000-
6. Purpose Codes (7ist detailed disbursement code in (f) above)				
7 - Returned to Contributor		M - Overpayment for Service		N - Exceeded Contribution Limit
P* - Reimbursement of In-Kind		O* Other		
* Codes require detailed explanation in required remarks field (m)				