

# 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 <b>Bill Craft For Town Council</b>		c. ID Number	
b. Mailing Address (include City, State and Zip Code) <b>204 Barber Blvd Oak Island NC 28465</b>		d. Date Filed <b>07-27-2023</b>	e. Phone Number <b>9196122622</b>
2. Report Year <b>2022</b>	3. Period Start Date (mm/dd/yy) <b>01/01/2022</b>	4. Period End Date (mm/dd/yy) <b>06/30/2022</b>	5. Treasurer Full Name <b>Wm Craft</b>
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"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser		<b>Municipal</b> <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 checked="" type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
<b>7. Type of Fund (if applicable, check one)</b> <input type="checkbox"/> Booster Fund <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:		<b>State/County</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
8. Number of Fundraisers this Report <b>0</b>		10. Special Report Name	
11. Account Information		11. Account Information	
a. Financial Institution Full Name <b>BB+T</b>		a. Financial Institution Full Name	
b. Purpose <b>Campaign Transactions</b>	c. Account Code <b>BC1</b>	b. Purpose	c. Account Code
	d. Period Begin Balance <b>\$ 1831.46</b>		d. Period Begin Balance <b>\$</b>
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.			
<b>Wm Craft</b> Printed Name of Signer		<b>Wm Craft</b> Signature of Appointed Treasurer	
		<b>07-27-2023</b> Date	
FOR OFFICE USE ONLY			
Date Received: <b>RECEIVED</b>	Employee: <b>or</b>	Delivery Method	
Date Postmarked: <b>JUL 27 2023</b>	Employee: _____	<input type="checkbox"/> Normal Mail	
Date Scanned: <b>BRUNSWICK COUNTY BOARD OF ELECTIONS</b>	Employee: _____	<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	
<p><b>Please Note:</b> 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.</p>			

# 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
Bill Craft For Town Council	2022 NYSA	
Start of Election Cycle: January 1, 2022	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	\$ 1831.46	\$ 1831.46
<b>RECEIPTS</b>		
5) Aggregated Contributions from Individuals (CRO-1205)	\$	\$
6) Contributions from Individuals (CRO-1210)	\$	\$
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)	\$ 0.00	\$ 0.00
<b>EXPENDITURES</b>		
13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$	\$
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)	\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 0.00	\$ 0.00
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 1831.46	\$ 1831.46
<b>ADDITIONAL INFORMATION</b>		
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)	\$ 2,000.00	
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)	\$	\$

# Debts and Obligations Owed To the Committee

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Amendment

Yes  No

Use this form to report debts and obligations owed to the Committee.

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
Bill Craft For Town Council			
<b>3. Debtor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		Note: All payments received toward debts should be listed on the appropriate receipt form with the contributor listed as this debtor.	
Elizabeth White For Mayor 112 SE 34th Oak Island NC 28465		<b>b. Description of Debtor</b> Political Committee	
<b>c. Beginning Balance</b>	<b>d. Total Amount Paid</b>	<b>e. Total Amount Incurred</b>	<b>f. Remaining Balance</b>
\$ 2000.00	\$ 0	\$ 0.00	\$ 2000.00
<b>g. Incurred Debts (what the Committee gave)</b>			
<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>	<b>g3. Item Description</b>	
12/01/21	\$ 2000.00	Loan	
	\$		
	\$		
	\$		
	\$		
	\$		
<b>3. Debtor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		Note: All payments received toward debts should be listed on the appropriate receipt form with the contributor listed as this debtor.	
		<b>b. Description of Debtor</b>	
<b>c. Beginning Balance</b>	<b>d. Total Amount Paid</b>	<b>e. Total Amount Incurred</b>	<b>f. Remaining Balance</b>
\$	\$	\$	\$
<b>g. Incurred Debts (what the Committee gave)</b>			
<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>	<b>g3. Item Description</b>	
	\$		
	\$		
	\$		
	\$		
	\$		
<b>4. Total only this Page</b> (This should be the sum of all item 'f' from this page)		\$ 2000.00	
<b>5. Total of ALL CRO-1620 Pages</b> (This line must be on line 23 of Detailed Summary Page CRO-1100)		\$ 2000.00	