

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	
CHARLIE NERN FOR COUNCIL	PRE-ELECTION		
Start of Election Cycle: January 1,	<u>2021</u>	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 737.71	\$ 0
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 208.52	\$ 490.19
6) Contributions from Individuals	(CRO-1210)	\$ 200.00	\$ 2425.81
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$	\$ 500.00
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)		\$ 408.52	\$ 3416.00
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 0	\$ 618.15
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)	\$ 32.01	\$ 857.82
17) In-Kind Contributions	(CRO-1310)	\$ 125.17	\$ 950.98
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 157.18	\$ 2426.95
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 251.34	\$ 989.05
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

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	
CHARLIE NERN FOR COUNCIL						ENFC	
3. Contributor 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	
LAWRENCE S. HERSHOFF 219 BARONKY PLACE DR SUNSET BEACH NC 28468 910 579-1546				NO JOB TITLE			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				NOT EMPLOYED		\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	ENFC	CHECK		09/18/2021		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor 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	
FRITZ DOVE 2327 ROSWELL AVE CHARLOTTE, NC 28207 704-609-4902				NO JOB TITLE			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				NOT EMPLOYED		\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	ENFC	CHECK		10/10/2021		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor 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	
				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						\$ 200.00	
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 6 of Detailed Summary Page CRO-1106)</small>						\$ 200.00	

Refunds/Reimbursements From the Committee

Pg 1 of 1

Amendment
 Yes No

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

1. Committee Full Name (and Fund if applicable) CHARLIE NERN FOR COUNCIL	2. ID Number CNFC
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3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) ...GODADDY.COM LLC 14455 N. HAYDEN RD STE 219 SCOTTSDALE AZ 85260 480-505-8877	<table border="1" style="width:100%"> <tr> <td>d. Type of Committee <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party</td> <td>h. Original Receipt Date 09/01/2021</td> </tr> <tr> <td>e. Level Registered <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:</td> <td>i. Original Receipt Amount \$ 32.01</td> </tr> <tr> <td>f. Purpose Code P</td> <td>j. Election Sum to Date \$ 32.01</td> </tr> </table>	d. Type of Committee <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party	h. Original Receipt Date 09/01/2021	e. Level Registered <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	i. Original Receipt Amount \$ 32.01	f. Purpose Code P	j. Election Sum to Date \$ 32.01
d. Type of Committee <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party	h. Original Receipt Date 09/01/2021						
e. Level Registered <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	i. Original Receipt Amount \$ 32.01						
f. Purpose Code P	j. Election Sum to Date \$ 32.01						
b. Job Title/Profession NO JOB TITLE	c. Employer's Name/Specific Field NOT EMPLOYED						
g. Comments							
k. Account Code CNFC							

l. Form of Payment CREDIT CARD	m. Required Remarks REPAY 1/3 DOMAIN NAME + WEBSITE FEES	n. Date (mm/dd/yyyy)	o. Amount \$ 32.01
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3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)	<table border="1" style="width:100%"> <tr> <td>d. Type of Committee <input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party</td> <td>h. Original Receipt Date</td> </tr> <tr> <td>e. Level Registered <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:</td> <td>i. Original Receipt Amount \$</td> </tr> <tr> <td>f. Purpose Code</td> <td>j. Election Sum to Date \$</td> </tr> </table>	d. Type of Committee <input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party	h. Original Receipt Date	e. Level Registered <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	i. Original Receipt Amount \$	f. Purpose Code	j. Election Sum to Date \$
d. Type of Committee <input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party	h. Original Receipt Date						
e. Level Registered <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	i. Original Receipt Amount \$						
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 \$
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3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)	<table border="1" style="width:100%"> <tr> <td>d. Type of Committee <input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party</td> <td>h. Original Receipt Date</td> </tr> <tr> <td>e. Level Registered <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:</td> <td>i. Original Receipt Amount \$</td> </tr> <tr> <td>f. Purpose Code</td> <td>j. Election Sum to Date \$</td> </tr> </table>	d. Type of Committee <input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party	h. Original Receipt Date	e. Level Registered <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	i. Original Receipt Amount \$	f. Purpose Code	j. Election Sum to Date \$
d. Type of Committee <input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party	h. Original Receipt Date						
e. Level Registered <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	i. Original Receipt Amount \$						
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 \$
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4. Total only this Page	\$ 32.01
5. Total of ALL CRO-1320 Pages <i>(This line must be on line 16 of Detailed Summary Page CRO-1100)</i>	\$ 32.01

6. Purpose Codes (List detailed disbursement code in (f) above)

L - Returned to Contributor M - Overpayment for Service
P* - Reimbursement of In-Kind O* Other N - Exceeded Contribution Limit

* Codes require detailed explanation in required remarks field (m)

In-Kind Contributions

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.
Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
CHARLIE NEEN FOR COUNCIL		CNFC	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
MELISSA WARREN 209 WATARWAY DR SW SUNSET BRACH NC 28468 910-520-2917		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	1/3 OF WEB SITE + DOMAIN NAME FEE
			d. Election Sum to Date \$ 32.01
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
DOMAIN NAME FEE 1/3		09/01/2024	\$ 4.05
WEB SITE FEE 1/3		09/01/2020	\$ 27.96
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
KAREN JOSEPH P.O. SANDPIPER BAY DR SW SUNSET BRACH NC 28468 910-529-4891		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	1/3 OF REFRESHMENTS AT MEETING
			d. Election Sum to Date \$ 12.40
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
IN KIND REFRESHMENTS		10/09/2024	\$ 12.40
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
STEAK SKINS 144 CROOKED Gobbey CURELE SUNSET BRACH NC 28468 631-338-2295		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	1/3 of Refreshments AT MEETING
			d. Election Sum to Date \$ 8.33
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
IN-KIND REFRESHMENTS		10/03/2024	\$ 8.33
			\$
			\$
4. Total only this Page		\$ 52.74	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 125.17	

In-Kind Contributions

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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 Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number
CHARLIE NERN FOR COUNCIL		CNFC
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
KEN DUNBAR 679 OYSTER BAY DRIVE SUNSET BEACH NC 28468 812-493-9313	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	1/3 of Refreshments @ MEAT + GREAT
		d. Election Sum to Date
		\$ 48.44
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
REFRESHMENTS	10/06/2021	\$ 48.44
		\$
		\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
KATHERINE MACDONALD 712 OYSTER BAY DR SUNSET BEACH NC 28468 804-382-3343	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	1/3 of Refreshments @ MEAT + GREAT
		d. Election Sum to Date
		\$ 11.65
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
REFRESHMENTS	10/15/2021	\$ 11.65
		\$
		\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
SUSAN BRIDGES 595 COACH TRAIL SUNSET BEACH NC 28468 910-575-4768	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	1/3 of Refreshments @ MEAT + GREAT
		d. Election Sum to Date
		\$ 12.34
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
REFRESHMENTS	10/11/2021	\$ 12.34
		\$
		\$
4. Total only this Page		\$ 72.43
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 125.17