Disclosure Repo							Amendmer Yes	s	No No
	ral report and committee i	informatio	on, must be	signed	and sub	mitted along with oth	her detaile	ed forms.	
Do not use this form to update information									
1. Committee Informa	ation								
a. Full Name							c. ID Nu	ımber	
Derek Colson for COu	inty Commissioner								
b. Mailing Address (include	e City, State and Zip Code)						d. Date 1	Filed	
4470 Lakehill Dr Catawba, NC 28609								07/24/20	19
							e. Phone	e Number	
								828-217-5	904
2. Report Year 3.	Period Start Date (mm/d	MATERIA I	4. Period 1 (mm/dd/yy)	End Da	te	5. Treasurer Full	Name		
2019	01/01/2019		06/3	Derek Colse		Derek Colson			
6. Type of Committee	(Check One)	9. Type	of Report	(ci	heck on	ly one type of report	from one	category)	
Candidate Campaign	Party	Municipal	l		State/Co	ounty	Reference	dum	
PAC	Referendum		organizational			Organizational	O	Organizational	
Independent Expenditure Legal Expense Fund	Joint Fundraiser	□ т	hirty-five day	,	(Quarterly	Pr	re-referendum	
	if applicable, check one)	☐ Pi	re-primary			First	☐ Fi	inal	
"Booster Fund"	y		re-election		H	Second		upplemental Fir	nal
Building Fund		📄 P1	re-runoff			Third		nnual	
		S	emi-annual			Fourth	∏ sr	pecial	
l_		□	Mid Year	.	_	Semi-annual			
Other:			Year End	.	\boxtimes	Mid Year	10. Spe	ecial Report	t Name
O Name of Fig. 1	4L!- D4]	Final		Year End				
8. Number of Fundraisers this Report Special Final Special									
11. Account Informati		l .		11. Ac	count I	nformation			
a. Financial Institution Full						tution Full Name			
BB&T									
b. Purpose	c. Account Code			b. Purp	ose		c. Acco	ount Code	
Campaign	DN	C							
	d. Period Begin Balance	;					d. Peri	iod Begin Balaı	nce
	\$ 20.08						\$		
CERTIFICATION	1						-		
	ittee or Fund is in compli	ance with	all applica	ble prov	risions c	of Article 22A, 22B.	& 22D-23	2M of Chan	ter 163 of
	s and that no funds are co								
	rrect and that I have been	trained b	y the NC S	tate Boa	ard of E	lections.			•
Derek Colson				In	71-6		07/24/201	19	
	Printed Name of Signer		Si	gnature of	Appointe	ed Treasurer		Date	
FOR OFFICE USE ONLY Determinent Delivery Method									
Date Received:		E	mployee:					rmal Mail	
Date Postmarked:	DEGEIV	E	mployee:				Reg	gistered Mail	
Date Scanned:	JUL 2 4 201	9 E	mployee:		,	<u> </u>	Elec	ectronically P gner has not	Filed
Date Data Entered:	By	E	mployee:					ndatory train	

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.

August 2008

NC State Board of Elections

CRO-1000

Amendment No

Detailed SummaryUse this form to summarize all disclosure reporting forms and to total monetary information.

1. Committee Full Name (and Fund if applicable)		3. ID Number	
Derek Colson for County Commissioner	2019 Semi-annual Mid Year		
Start of Electron Coules I I I I I I I I I I I I I I I I I I I		Total this	Total this
Start of Election Cycle: January 1,	2019	Reporting Period	
4) Cash on Hand at Start		\$ 20.08	\$ 20.08
RECEIPTS	(07.0 10.0)	Ф.	
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 40.00	\$ 40.00
6) Contributions from Individuals	(CRO-1210)	\$ 40.00	\$ 40.00
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		d d	Φ.
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$
11b) Contributions from Not-for-Profit Organization	ons <i>(CRO-1250)</i>	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$	\$
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11e	c, 11d and 11e)	\$ 40.00	\$ 40.00
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 30.00	\$ 30.00
13b) Contributions to Candidates/Political Commit	tees (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, 1.	5, 16 and 17)	\$ 30.00	\$ 30.00
19) Cash on Hand at End (Add lines 4 and 12 together, then sub-	tract line 18)	\$ 30.08	\$ 30.08
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaign	(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)	\$	\$
20) Contributions to be Refunded	(CKU-1213)	Ψ	Φ

		m Individuals		Pg	_1 of	1_	☐ Yes	No No	
				or contributions unde	er \$50 if form CR	· ·			
1. Committee Full Name (and Fund if applicable)					2. ID Number				
Derek Co	olson for County C	Commissioner							
3. Contri	ibutor Informatio	n		Add 🗌 Rem	nove				
a. Full Name, Mailing Address & Phone				b. Job Title/Profession		d. Comments	S		
(include Michelle	city, state, & zip)			Customer Service					
4470 Lak				c. Employer's Name/Spo	ecific Field				
	NC 28609			Cargo Transporters					
						e. Election Sum to Date			
						\$	40.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Kind Description	j. Date (mm/dd/yy	yy)	k. Amount		
	DNC	Cash			05/24/2	019	\$	40.00	
							\$		
							\$		
3. Contri	butor Informatio	n		Add Rem	iove				
	ne, Mailing Address &	& Phone		b. Job Title/Profession		d. Comments			
(include	city, state, & zip)								
				c. Employer's Name/Spe					
				or amproport of training opposite 2 total		-			
				e. Election Sum to Date					
						\$			
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Cind Description	j. Date (mm/dd/yy	yy)	k. Amount		
							\$		
							\$		
							\$		
3. Contri	butor Informatio	n		Add Rem	iove				
	ne, Mailing Address &	& Phone		b. Job Title/Profession		d. Comments			
(include (city, state, & zip)								
				c. Employer's Name/Spe					
					e. Election Sum to Date				
						\$			
f. Prior	g. Account Code	h. Form of Payment	i. In-K	and Description	j. Date (mm/dd/yy	yy)	k. Amount		
							\$		
							\$		
							\$		
4. Total	only this Page	e				\$		40.00	
5. Total	of ALL CRO	-1210 Pages				ø		40.00	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						\$		40.00	

Amendment

Amendment		
Ves	\boxtimes	Νo

Disbursements

	18	<u> </u>	01	<u>.</u>		
Use this form to report expenditures from the committee for; operation	ing expenses	, contribu	itions to c	candidate	/politic	cal
committees and coordinated party expenditures.						

	1. Committee Full Name (and Fund if applicable) 2. ID Number							
	or County Commissi							
3. Type of Disbu	ursement (Plea	ise use separate C	RC	0-1310 forms for each t	ype of Disburseme	ent.)		
Operating E	xpenses	Contributions to Car	ndid	lates/Political Committees	Coo	ordinated	d Party Expenditures	
4. Payee Inform	4. Payee Information Add Remove							
a. Full Name, Maili	ng Address & Phone		b	. Coordinated Committee N	ame	d. Co	mments	
(include city, state, BB&T	_							
12 N Main Ave			c	. Level Registered (Specify)				
Newton, NC 28			T	Federal County:				
,			ΙĒ	State	Municipality:	e. Elec	ction Sum to Date	
			-			\$ 3	30.00	
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
DNC	Draft	0		01/25/2019	\$5.00	-	ntenance Fee	
DNC	Draft	0		02/22/2019	\$5.00	Main	ntenance Fee	
4. Payee Inform	Lation			\dd \	Remove			
	ng Address & Phone		1	. Coordinated Committee Na		d. Cor	mments	
(include city, state,	ů .					u. 00.		
BB&T			H	T - 11D - 1-4 - 1/0 - 10 >				
12 N Main Ave			C.	Level Registered (Specify)	~			
Newton, NC 28	8608		-	Federal	County:			
			L	State	Municipality:	e. Elec	ction Sum to Date	
	\$ 30.00							
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount		quired Remarks	
DNC	Draft	О		03/25/2019	\$5.00	Main	ntenance Fee	
DNC Draft O				04/24/2019	\$5.00	Main	ntenance Fee	
4. Payee Inform	ation		A	\dd	Remove			
a. Full Name, Maili	ng Address & Phone		b.	. Coordinated Committee Na	ame	d. Cor	mments	
(include city, state, o								
12 N Main Ave			c.	Level Registered (Specify)				
Newton, NC 28	8658		Federal County:					
1.0			۱F	State	Municipality:	e. Elec	ction Sum to Date	
					The second secon		60.00	
f. Account Code	g. Form of Payment	h. Purpose Code	-	i. Date (mm/dd/yyyy)	j. Amount	k. Rec	quired Remarks	
DNC	Draft	0		05/23/2019	\$5.00		itenance Fee	
DNC	Draft	0		06/24/2019	\$5.00	Main	itenance Fee	
5. Total only this Page \$ 30.00								
	CRO-1310 Pages					_		
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)								
7. Purpose Codes (List detailed expenditure code in (h.) above)								
A* - Media	B* - Printing	C* - Fund			D - To Anothe	r Cand	idate	
E - Salaries I - Postage	F* - Equipment J - Penalties		cal I	Party	H* - Holding	Public	Office Expenses gal Expense Fund	
O* - Other				•				
* Codes require detailed explanation in required remarks field (k)								