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		RECEIV	c. ID Number	
Gary Ceres for City (ouncil			
b. Mailing Address (include City, State and 2	Zip Code)	NOV 0 2 202	d. Date Filed	
106 Beechtreest		BEAUFORT COUN	1 10/30/70	23
Washington, NC 27889		BOARD OF ELEC	IONS	e Petal
			252-558-	8183
2. Report Year 3. Period Start Date	(mm/dd/yy) 4. Period	End Date (mm/dd/yy)	5. Treasurer Full Name	
2023 9/27/2023	10/3	23/2023	Gary Aleres	
6. Type of Committee (Check One)	9. Type of Ro		type of report from one categor	y)
Candidate Campaign Party	Municipal	State/County	Referendum	
PAC Referendur				
Independent Expenditure I Joint Fund			Pre-referendum Final	
Legal Expense Fund	Pre-primary Pre-election	Seco		ıl
7. Type of Fund (if applicable, check		Thir		
Booster Fund	Semi-annua	I Four	th	
Building Fund	☐ Mid Y	ear Semi-ann	ıal	
	Year E	nd	Year 10. Special Repor	t Name
Other:	Final	1=	End	
8. Number of Fundraisers this Repo	rt Special	Final	1	
		L Special		
11. Account Information		11. Account Inform		
a. Financial Institution Full Name		a. Financial Institution	Full Name	
United Bank				
	count Code	b. Purpose	c. Account Code	
Campaign Contributions	3556			
	riod Begin Balance		d. Period Begin Balan	ce
\$ 6	63,74		\$	
CERTIFICATION	and the state of t			
I certify that the Committee or Fund is in	n compliance with all ap	plicable provisions of A	ticle 22A, 22B & 22D-22M of Cha	pter 163
of the NC General Statutes and that no f				that this
report is complete, true and correct and	that I have been trained	by the NC State Board o	Elections.	
Gary A Ceres		Day a Gas	10/30/200	23
Printed Name of Signer		ignature of Appointed Trea	surer Date	
FOR OFFICE USE ONLY	1 _	. I have	D. U Madad	
Date Received: 11/06	2/23 Empi	oyee:	Delivery Method Normal Mail	
Date Postmarked:	Empl	oyee:	Registered Mail Hand Delivered	
Date Scanned: 11 03	Empl	oyee:	☐ Electronically File	
Date Data Entered:	Emp	oyee:	Signer has not rece mandatory training	
	surer, custodian of boo	ks information, or acc		surer,

D	etail	ed	Sui	nm	arv
_	Ctui	Cu	Jui	ALLEA	un y

Amendment

Yes No

Use this form to summarize all disclosure reporting forms and						•
1. Committee Full Name (and Fund if applicable)	2. Type of			3. ID N	umber	
Gary Ceres for City Council	35-	Day				
Start of Election Cycle: January 1, 2023	3	Rei	Total this porting Period	,	Total this Election Cycle	
4) Cash on Hand at Start		\$		\$		
RECEIPTS						
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	0,00	\$	10.00	
6) Contributions from Individuals	(CRO-1210)	\$	225,0	0 \$	3,343,33	
7) Contributions from Political Party Committees	(CRO-1220)	\$		\$,	
8) Contributions from Other Political Committees	(CRO-1230)	\$		\$		
9) Loan Proceeds	(CRO-1410)	\$		\$	ο.	
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)	\$		\$		1
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$		\$		1
11e) Exempt Purchase Price Sales	(CRO-1265)	\$		\$		
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c	,11d and 11e)	\$		\$		
<u>EXPENDITURES</u>						
13) Disbursements						
13a) Operating Expenditures	(CRO-1310)	\$	1,092.13	\$	3,	349,12 De
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$,	\$	<i>y y</i>	
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)	\$	0	\$	793,93	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1	5, 16 and 17)	\$		\$	to a second	En la course o
19) Cash on Hand at End (Add lines 4 and 12 together, then su	btract line 18)	\$		\$		
ADDITIONAL INFORMATION		Γ.				
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)					4
25) Administrative Support	(CRO-1710)	\$		\$		_
26) Forgiven Loans	(CRO-1440)	\$		\$	RECEIVED	4
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$		\$	NOV a a	
28) Contributions to be Refunded	(CRO-1215)	\$		\$	NOV 0 2 2023	1

CRO-1100

NC State Board of Elections

BEAUFORT COUNTY NC BOARD OF ELECTIONS

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

Amendment

Yes No

1. Committee Full Name (and Fund if applicable)	2. Type of	Rep	ort	3. ID N	umber	1
Gary Ceres for City Council	Pre-El	lect	rion			
Start of Election Cycle: January 1, 2023			Total this Reporting Period	1	Total this Election Cycle	
4) Cash on Hand at Start	¥1663,7	-	048004	\$	Design O	.00gc
RECEIPTS						10.00 D ~
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	0 9e 5400	0 \$	3,7	10.00 20-
6) Contributions from Individuals	(CRO-1210)		540.0	0 \$	3,748.33	
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)	\$	540.00	\$	3,758.33	
11) Other Receipt Sources						
11a) Interest on Bank Accounts	(CRO-1250)	\$		\$		
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$		\$		1
11c) Outside Sources of Income	(CRO-1250)	\$		\$		
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$		\$		1
11e) Exempt Purchase Price Sales	(CRO-1265)	\$		\$		Ī
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c	,11d and 11e	\$	540,00	\$	3,758,33	
<u>EXPENDITURES</u>						
13) Disbursements						
13a) Operating Expenditures	(CRO-1310)	\$	1,092,13	\$	3,349, /2	
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)	\$		\$		1
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$		\$		
17) In-Kind Contributions	(CRO-1510)	\$	0	\$	793,93	1
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1	15, 16 and 17)	\$	1,092,13	\$	4, 143.05	and the second
19) Cash on Hand at End (Add lines 4 and 12 together, then su	btract line 18	\$	111.61	\$	860,40 000	-384,72
ADDITIONAL INFORMATION						¥c
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)	\$		\$	RECEIVE	D
26) Forgiven Loans	(CRO-1440)	\$		\$		
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$		\$	NOV 0 2 202	
28) Contributions to be Refunded	(CRO-1215)	\$		\$	DEALEONE	

CRO-1100

NC State Board of Elections

BOARD OF ELECTIONS

Cont	ributions fr	om Individua	ıls	Pg	of	🗆 5	des No	
and the second second	THE RESERVE THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO I	ndividual contributio	CONTRACTOR OF THE PARTY OF THE	ontributions und	er \$50 if form CF			ı
_		ne (and Fund if app	licable)			2. ID Nu		
6	ary A Cere	25				25	56	
	ributor Informa				move	1		
	ame, Mailing Addre e city, state, & zip)	ess & Phone		b. Job Title/Profe		d. Commer		
		-		Housev	Ye.	Squ	are tribution	
	irla Fields			c. Employer's Na	ne/Specific Field	con	144 20160	
79	52-947-10	69				e. Election	Sum to Date	
1	narla rita @	outlock.com				\$ 5	0.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy	y) k. Am	ount	
	3556	Online donation			10/6/2023	3 8	50.00	
					107	\$		
						\$		
3. Cont	ributor Informa	ation		Add Rei	move			
	ame, Mailing Addre	ess & Phone		b. Job Title/Profe		d. Commer		
	e city, state, & zip)			Retired		Che	ck donation	
Jan	iet Knigh	5.		c. Employer's Na				
50	Knight B	ridge Kd		Speech Pa	athologist	e Election	Sum to Date	
		K, NC27814					25.00	
f. Prior		h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy			
	3556	Check			10/19/202	3 8	175,00	
						\$		
						\$		
3. Cont	ributor Informa	ation		Add Re	move			
a. Full Na	ame, Mailing Addre			b. Job Title/Profe	ssion	d. Commer	nts	
(includ	e city, state, & zip)					Z.		
				c. Employer's Na	me/Specific Field			
						e. Election	Sum to Date	
						\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yyy	y) k. Am	ount	
						\$		
				**************************************		\$	RECEIVE	D
						\$	NOV 02 292	
4. Tot	al only this P	age				\$	BEAUFORT COUNT	/ NC
5. Tot	al of ALL CI	RO-1210 Pages				\$	BOARD OF ELECT	ONS

Amendment

		rom Individua		Pg	of _	_ .	Yes No
		ndividual contributions 1e (and Fund if app					205 is not used D Number
I. Com	immee Pun 14an	е (ани Рини и арр	ucabie		<u></u>	4. 1	D Mumber
2 Cont	ributor Inform	réion		Add \square Rep		<u> </u>	The state of the s
	ributor informa ame, Mailing Addre		<u> </u>	b. Job Title/Profes	nove	d. C	omments
	le city, state, & zip)			A ,		<u> </u>	eck to help
1	anet Mnis	ht		Retived			with signs
				c. Employer's Nar		•	with signs
	o Knight!			Speech P	athologist	e. El	lection Sum to Date
	3 lount's Grea	eK, NC 27811	1			\$	525.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yyy	y)	k. Amount
	3556	Check			10/2012023	3	\$ 200
							\$
							\$
3. Cont	ributor Informa	ation		Add 🔲 Ren	nove		
	ame, Mailing Addro	ess & Phone		b. Job Title/Profes	ssion	d. C	omments
	e city, state, & zip)			RealEsta	to		
	teve Fichs	_		c. Employer's Nan			
10	Honey Po	d Farms		Self		_	
·	ashington, N	Y 2 7 900		3011		e. El	ection Sum to Date
	ashington, 1					\$	250.06
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy	y)	k. Amount
	3556	Cash			10/2/202	3_	\$ 50.00
							\$
							\$
	ributor Inform				nove		
	ame, Mailing Addre	ess & Phone		b. Job Title/Profes	ssion	_	omments
_	le city, state, & zip)			Barista		70	wards Signs
	ry Ceres			c. Employer's Nan	ne/Specific Field		·
10	6 Beechtse	e 5 1		Washington	Cafe	<u> </u>	
l. h.	A noterial ca	11-2000		0043)(0		 	ection Sum to Date
		·	1		l. 5 4 4 0 V	\$	65.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yyy	(y)	k. Amount
	3226	Cash		<u></u>	10/2/2023		\$ 65.00
							\$
							\$
4. Tot	al only this P	age				\$	
		RO-1210 Pages				\$	
(This li	ine must be on line (of Detailed Summary P	age CRO-1100)			Ľ	

Amendment

Disl	oursements	:
A LUI	our scincing	,

1			Amendment	
Pg	of	2	☐ Yes	≥ No

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

	'ull Name (and Fun						2. ID Number
Gary Ce	eres for Cit	y Council					
3. Type of Disb	ursement (Please	use separate CK	20-1310	forms for e	ach type of D	isburse	ment.)
Operating Expe	enses	tributions to Candida	ates/Politic	al Committees		Coordina	ted Party Expenditures
4. Payee Inform				Add	Remove		
a. Full Name, M	lailing Address & Ph	one		b. Coordinate	ed Committee N	ame	d. Comments
(include city, state,							Signs, Door Hangers
HTM De	SIGNE			a Lavel Pagi	stered (Specify)		Business Cards
6000 11	MICH			Federal	Count	tv:	5037 11835 00110
	Main St			State		cipality:	e. Election Sum to Date
Williams	ston, NC 2788	9					\$ 903.03
f. Account Code	g. Form of Payment	h. Purpose Code		mm/dd/yyyy)		k. R	equired Remarks
3556	Check	B	10/	3/2027	\$ 561.91	Doo	Hangers, Business Cards, Signs
33 3.0			101.	5/00-5	\$	+	7.17
4 D I C	L.,			A d a	Damaria		
4. Payee Inform				Add	Remove ed Committee N	omo	d. Comments
a. Full Name, Mail (include city, stat	ing Address & Phone			b. Coordinate	ed Committee N	ame	d. Comments
(include city, state	ie, & zip)						
Antico	THE C			c. Level Regis	stered (Specify)		
2				Federal	Coun	ty:	
				State	Muni	cipality:	e. Election Sum to Date
							s
	The state of the s	T			I	1. 5	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	K. K	equired Remarks
-	Quita e	#	100	17023	\$ 77.16		
					\$		
4. Payee Inforn	nation			Add \square	Remove		
	ing Address & Phone				ed Committee N	ame	d. Comments
(include city, stat							Gasto Elpert
01 .							
Sheetz				c. Level Regi	stered (Specify)		1
							1 #
	264			Federal	Coun		
Route à	264				Coun Muni		e. Election Sum to Date
Route à	264 01, NC 27889			Federal			e. Election Sum to Date
Rate à Washingto	01, NC 27889	h. Purpose Code	i. Date (Federal State		cipality:	
Route ? Washingto f. Account Code	g. Form of Payment	h. Purpose Code		Federal State mm/dd/yyyy)	j. Amount	cipality:	\$ 14,13 equired Remarks
Rate à Washingto	01, NC 27889	h. Purpose Code		Federal State	j. Amount \$ 19,13	cipality:	\$ 14,13 equired Remarks
Route a Washington f. Account Code 3556	g. Form of Payment	h. Purpose Code		Federal State mm/dd/yyyy)	j. Amount	cipality:	\$ 14.13 equired Remarks
Route a Washington	g. Form of Payment	h. Purpose Code		Federal State mm/dd/yyyy)	j. Amount \$ 19,13	cipality:	\$ 14,13 equired Remarks
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Rote of Washington f. Account Code 3556 5. Total only th 6. Total of ALL (This line goes in (This line goes in (This line goes in 7. Purpose Code A* - Media	g. Form of Payment Gard is Page CRO-1310 Pages i line 13a of Detailed Sun i line 13b of Detailed Sun i line 13c of Detailed Sun tine 13c of Detailed Sun odes (List detailed B* - Printi	nmary Page CRO-11 nmary Page CRO-11 nmary Page CRO-11 expenditure coding	100 if Ope 100 if Con 100 if Coo de in (h.) C* - F	Federal State State mm/dd/yyyy) 5-2023 rating Expensitrib to Candidardinated Party above) undraising	j. Amount \$ 1413 \$ es) ates/Political Con Expenditures)	k. R	\$ 14.13 equired Remarks \$ 917 PECEIVE \$ NOV 0 2 2013 BEAUFURI COUNT BOARD OF FLECT ther Candidate
f. Account Code 3555 5. Total only th 6. Total of ALL (This line goes in (This line goes in (This line goes in 7. Purpose Code A* - Media E - Salaries	g. Form of Payment Gard dis Page CRO-1310 Pages a line 13a of Detailed Survey line 13b of Detailed Survey line 13c of Detailed Survey line 13c of Detailed Survey line 13c of Pages CList detailed B* - Printi F* - Equip	nmary Page CRO-11 nmary Page CRO-11 nmary Page CRO-11 l expenditure coding	100 if Ope 100 if Con 100 if Coo 100 if Coo 100 if Coo 100 if Coo	Federal State State mm/dd/yyyy) 5-2023 rating Expensitib to Candidardinated Party above) undraising litical Party	j. Amount \$ 1913 \$ es) ates/Political Co. Expenditures)	k. R R R R R R R R R R R R R	\$ 14.13 equired Remarks \$ 917 PECEIVE \$ NOV 0 2 2013 BEAUFORT GOON BOARD OF FIECT ther Candidate ng Public Office Expenses
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Dial		4-
DISD	ursem	ents

	_			Amendment	t
Pg	2	of	2	☐ Yes	No No

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

1. Committee F	ull Name (a	nd Fun	d if applicable)					2. ID Number
Gary A	Ceres							
3. Type of Disb	ursement	(Please	use separate Cl	20-1310	forms for e	each type of D	isburs	ement.)
Operating Exp	enses	☐ Con	tributions to Candid	ates/Politi	cal Committees		Coordina	ated Party Expenditures
4. Payee Inform					Add	Remove		
a. Full Name, M	lailing Addre	ss & Ph	one	3	b. Coordinate	ed Committee N	ame	d. Comments
(include city, state,	& zip)							Text messaging
In Poin	+ Blank	Polit	ical		c Level Pegi	stered (Specify)		Text messaging Votes
330 Cr	a dak	Cat	α ħ .		Federal	Count	·v·	1 .0.63
_			(t D)		State		cipality:	e. Election Sum to Date
Longwood	d, FL 32	750						
						·		1 13
f. Account Code	g. Form of Pay		h. Purpose Code	-	mm/dd/yyyy)			Required Remarks
3556	Online-	Card	0	101	23/2023	\$ 175	Te	xtmessaging service
July His						\$,
4. Payee Inform	nation			П	Add \square	Remove		
a. Full Name, Mail		Phone				ed Committee Na	ame	d. Comments
(include city, sta								
					-	stered (Specify)		
					Federal	Count		El C C L D
					State	Munic	cipality:	e. Election Sum to Date
								\$
. Account Code	g. Form of Pa	vment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. I	Required Remarks
						s		
						-	_	
						\$		
4. Payee Inform	nation				Add	Remove		
a. Full Name, Mail	ing Address &	Phone			b. Coordinat	ed Committee N	ame	d. Comments RECEIVE
(include city, sta	te, & zip)							
					a Lavel Pagi	stered (Specify)		NOV O II .
						Count	tv:	NOV 0 2 2 7
					State	☐ Muni		e. Election Sum to Ablation T COUNT
								BOARD OF ELECT
		Table 15						
f. Account Code	g. Form of Pa	yment	h. Purpose Code	i. Date ((mm/dd/yyyy)	j. Amount	k. I	Required Remarks
		-21				\$		
						\$		
5. Total only th	is Page							\$ 175
6. Total of ALI		Pages						
			nmary Page CRO-1	100 if Ope	erating Expens	es)		s 1 102 12
			nmary Page CRO-1				mm)	\$ 1,092,13
			nmary Page CRO-1					
7. Purpose C	odes (List	detailed	expenditure cod	le in (h.)	above)			
A* - Media		- Printi			undraising	D - '	Го Апс	other Candidate
E - Salaries	F*	- Equip	ment	G - Po	litical Party			ing Public Office Expenses
I - Postage	J -	Penalti	ies	K* - C	Office Exper	ises Q*-	Dona	tion to Legal Expense Fund
O* Other								
* Codes requi	re detailed e	xnlanat	ion in required	remark	s field (k)			

Gary Ceres 106 Beechtlee St Washington, NCZ7889

\$0.00 US POSTAGE 10/30/2023 062512263872 27858 000057123

US POSTAGE AND FEES PAID GROUND ADVANTAGE Oct 31 2023 Mailed from ZIP 27858 4 OZ GROUND ADVANTAGE RATE 10580954 Commercial Plus Pricing



06280014949946

USPS GROUND ADVANTAGE

Gary Ceres 106 BEECHTREE ST **WASHINGTON NC 27889** C011

Shipped using PostalMate

SHIP TO:

Beaufort County Elections Board 1308 HIGHLAND DR STE 104-103 **WASHINGTON NC 27889 - 3486**

Beaufort County Elections Board

1308 Highlands Sur Washington, NC 27

USPS TRACKING #



9400 1112 0620 9320 3724 06