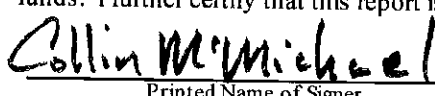
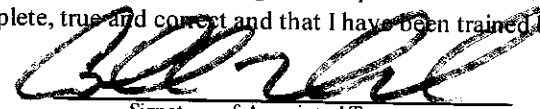


Disclosure Report Cover

Amendment

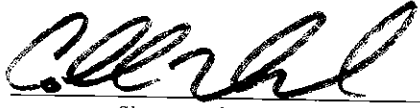
Yes No

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			c. ID Number	
NORTH CAROLINA HOUSE REPUBLICAN CAMPAIGN COMMITTEE - BUILDING FUND				
b. Mailing Address (include City, State and Zip Code)			d. Date Filed	
PO BOX 97275 RALEIGH, NC 27624			03/12/2020	
			e. Phone Number	
			(919) 889-1817	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name	
2020	03/12/2020	03/12/2020	COLLIN MCMICHAEL	
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
<input type="checkbox"/> Candidate Campaign <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> Referendum <input checked="" type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Legal Expense Fund		Municipal <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 type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special		
7. Type of Fund (if applicable, check one)		State/County		
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:		<input checked="" type="checkbox"/> Organizational Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth 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		10. Special Report Name		
0				
3. Account Information		3. Account Information		
a. Financial Institution Full Name		a. Financial Institution Full Name		
BB&T				
b. Purpose	c. Account Code	b. Purpose	c. Account Code	
CHECKING	01			
	d. Period Begin Balance		d. Period Begin Balance	
	\$		\$	
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				
				03/12/2020
Printed Name of Signer		Signature of Appointed Treasurer		Date
FOR OFFICE USE ONLY				
Date Received:	3/16/20	Employee:	CW	
Date Postmarked:	03/12/20	Employee:	CW	
Date Scanned:	3/17/20	Employee:	AR	
Date Data Entered:		Employee:		
Delivery Method				
<input type="checkbox"/> Normal Mail <input checked="" type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input checked="" type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training				
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. You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.				

Additional Committee Funds

Use this form to notify the Election Board that the Candidate or Party Committee has set up an additional fund.

1. Committee Full Name		2. Set-up Date	3. ID Number
North Carolina House Republican Campaign Committee		3/12/2020	STA-YJ7Z59-C-001
4. Fund Information			
a. Name of Fund		b. ID Number	
North Carolina House Republican Campaign Committee - Building Fund			
c. Type		e. Account Information (incl. CRO-3500)	
<input type="checkbox"/> "Booster" or "Support" Fund <input checked="" type="checkbox"/> Building Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> NC Political Party Financing Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> Other:		<input type="checkbox"/> Add <input type="checkbox"/> Remove	
		i. Financial Institution Full Name	
		BB&T	
		ii. Purpose	
		Checking	
d. Fund Manager Full Name		iii. Account Code	iv. Type
Collin McMichael <input type="checkbox"/> Treasurer <input type="checkbox"/> Assistant		1	Checking
4. Fund Information			
a. Name of Fund		b. ID Number	
c. Type		e. Account Information (incl. CRO-3500)	
<input type="checkbox"/> "Booster" or "Support" Fund <input type="checkbox"/> Building Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> NC Political Party Financing Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> Other:		<input type="checkbox"/> Add <input type="checkbox"/> Remove	
		i. Financial Institution Full Name	
		ii. Purpose	
d. Fund Manager Full Name		iii. Account Code	iv. Type
4. Fund Information			
a. Name of Fund		b. ID Number	
c. Type		e. Account Information (incl. CRO-3500)	
<input type="checkbox"/> "Booster" or "Support" Fund <input type="checkbox"/> Building Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> NC Political Party Financing Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> Other:		<input type="checkbox"/> Add <input type="checkbox"/> Remove	
		i. Financial Institution Full Name	
		ii. Purpose	
d. Fund Manager Full Name		iii. Account Code	iv. Type
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 undisclosed funds. I further certify that this report is complete, true and correct.			
Collin McMichael			
Printed Name of Signer		Signature of Appointed Treasurer	
		3/12/2020	
		Date	

PERMITTED MAIL

PO Box 97275
Raleigh, NC 27624

RALEIGH
NC 27601
12 MAR 20
PM 11



7018 2290 0002 1340 0249

U.S. POSTAGE
\$4.10
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03/12/20 92
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CPU

North Carolina State Board of Elections
Campaign Finance Reporting
PO Box 27255
Raleigh, NC 27611-7255

27611-72555

