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
PIERCE FOR SHERIFF	
b. Mailing Address (include City, State and Zip Code)	**d. Date Filed**
PO BOX 10528 GOLDSBORO, NC 27532	01/28/2022
	e. Phone Number

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2021	07/01/2021	12/31/2021	BRANDON GRAY

6. Type of Committee (Check One)

- ☒ Candidate Campaign
- ☐ Party
- ☐ Joint Fundraiser
- ☐ PAC
- ☐ Referendum
- ☐ Legal Expense Fund

7. Type of Fund *(if applicable, check one)*

- ☐ "Booster Fund"
- ☐ Building Fund
- ☐ Presidential Election Year Candidates Fund
- ☐ NC Public Campaign Financing Fund
- ☐ Other:

8. Number of Fundraisers this Report

1

9. Type of Report *(check only one type of report from one category)*

Municipal	State/County	Referendum
☐ Organizational	☐ Organizational	☐ Organizational
☐ Thirty-five day	Quarterly	☐ Pre-referendum
☐ Pre-primary	☐ First	☐ Final
☐ Pre-election	☐ Second	☐ Supplemental Final
☐ Pre-runoff	☐ Third	☐ Annual
Semi-annual	☐ Fourth	☐ Special
☐ Mid Year	Semi-annual	
☐ Year End	☑ Mid Year	**10. Special Report Name**
☐ Final	☐ Year End	
☐ Special	☐ Final	
	☐ Special	

3. Account Information

a. Financial Institution Full Name	
TUIST BANK	
b. Purpose	**c. Account Code**
TO RECEIVE CONTRINUTIONS AND PAY RELATED EXPENSES	001
	d. Period Begin Balance
	$ 106.00

3. Account Information

a. Financial Institution Full Name	
b. Purpose	**c. Account Code**
	d. Period Begin Balance
	$

RECEIVED
WAYNE BD OF ELECTIONS
JAN 28 2022
BY

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

Brandon Gray — Printed Name of Signer

Signature of Appointed Treasurer

01/28/2022 — Date

FOR OFFICE USE ONLY

Date Received: _____ Employee: _____

Date Postmarked: _____ Employee: _____

Date Scanned: _____ Employee: _____

Date Data Entered: _____ Employee: _____

Delivery Method
- ☐ Normal Mail
- ☐ Registered Mail
- ☐ Hand Delivered
- ☐ Electronically Filed

☐ 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.

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
PIERCE FOR SHERIFF	2021 Year End Semi-Annual	

Start of Election Cycle: January 1, 2019		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$ 106.00	$ 0.00
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	$ 3,220.00	$ 3,220.00
6) Contributions from Individuals	(CRO-1210)	$ 13,160.00	$ 13,160.00
7) Contributions from Political Party Committees	(CRO-1220)	$ 0.00	$ 0.00
8) Contributions from Other Political Committees	(CRO-1230)	$ 0.00	$ 0.00
9) Loan Proceeds	(CRO-1410)	$ 4,000.00	$ 4,000.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	$ 0.00	$ 0.00
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	$ 0.00	$ 0.00
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	$ 0.00	$ 0.00
11c) Outside Sources of Income	(CRO-1250)	$ 0.00	$ 0.00
11d) Legal Expense Fund - Other Sources	(CRO-1270)	$ 0.00	$ 0.00
11e) Exempt Purchase Price Sales	(CRO-1265)	$ 0.00	$ 0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		$ 20,380.00	$ 20,380.00
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	$ 2,953.97	$ 2,953.97
13b) Contributions to Candidates/Political Committees	(CRO-1310)	$ 0.00	$ 0.00
13c) Coordinated Party Expenditures	(CRO-1310)	$ 0.00	$ 0.00
14) Aggregated Non-Media Expenditures	(CRO-1315)	$ 34.00	$ 34.00
15) Loan Repayments	(CRO-1420)	$ 0.00	$ 0.00
16) Refunds/Reimbursements from the Committee	(CRO-1320)	$ 0.00	$ 0.00
17) In-Kind Contributions	(CRO-1510)	$ 0.00	$ 0.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		$ 2,987.97	$ 2,987.97
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		$ 17,498.03	$ 17,392.03
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	$ 4,000.00	
22) Debts and Obligations owed by the Committee	(CRO-1610)	$ 0.00	
23) Debts and Obligations owed to the Committee	(CRO-1620)	$ 0.00	
24) Account Transfers Within the Committee	(CRO-1720)	$ 0.00	
25) Administrative Support	(CRO-1710)	$ 0.00	$ 0.00
26) Forgiven Loans	(CRO-1440)	$ 0.00	$ 0.00
27) 48-Hour Notice Reports Sum	(CRO-2220)	$ 0.00	$ 0.00
28) Contributions to be Refunded	(CRO-1215)	$ 0.00	$ 0.00

Aggregated Contributions from Individuals

Amendment ☐ Yes ☒ No

Optional form used to report NC Contributions From Individuals of $50 or less

1. Committee Full Name (and Fund if applicable)	2. ID Number
PIERCE FOR SHERIFF	

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Check		09/02/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Check		11/29/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00

4. Total only this Page	$ $660.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ $3,220.00

Aggregated Contributions from Individuals

Amendment ☐ Yes ☒ No

Optional form used to report NC Contributions From Individuals of $50 or less

1. Committee Full Name (and Fund if applicable)	2. ID Number
PIERCE FOR SHERIFF	

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Check		11/28/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00

4. Total only this Page	$ $640.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ $3,220.00

Aggregated Contributions from Individuals

Amendment ☐ Yes ☒ No

Optional form used to report NC Contributions From Individuals of $50 or less

1. Committee Full Name (and Fund if applicable)	2. ID Number
PIERCE FOR SHERIFF	

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Check		11/29/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Check		09/02/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00

4. Total only this Page	$ $680.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ $3,220.00

Aggregated Contributions from Individuals

Amendment ☐ Yes ☒ No

Optional form used to report NC Contributions From Individuals of $50 or less

1. Committee Full Name (and Fund if applicable)	2. ID Number
PIERCE FOR SHERIFF	

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove	001	Electric Funds Tran		11/30/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Check		10/21/2021	$ 40.00

4. Total only this Page	$ $660.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ $3,220.00

Aggregated Contributions from Individuals

Amendment ☐ Yes ☒ No

Optional form used to report NC Contributions From Individuals of $50 or less

1. Committee Full Name (and Fund if applicable)	2. ID Number
PIERCE FOR SHERIFF	

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 20.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00
☐ Add ☐ Remove	001	Cash		12/01/2021	$ 40.00

4. Total only this Page	$ $580.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ $3,220.00

Contributions from Individuals

Pg 1 of 31 — Amendment ☐ Yes ☒ No

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
PIERCE FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
DONALD ABRAMS 158 QUAIL DR DUDLEY, NC 28333	RET			$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/19/2021	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
GEORGE WAYNE AYCOCK HWY 581 N PIKEVILLE, NC 27863	RETIRED			$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/16/2021	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ROYCE AYCOCK 145 FIELDS RD PIKEVILLE, NC 27863	DUPTY	WCSO		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/24/2021	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 300.00
5. Total of ALL CRO-1210 Pages	$ 13,160.00

Contributions from Individuals

Amendment ☐ Yes ☒ No

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
PIERCE FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
KENNETH ALLEN BEST 109 VALLEY RD MT OLIVE, NC 28365	RETIRED			$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/30/2021	$ 200.00
☐					$
☐					$

☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
RICHARD BLIZZARD 918 MC ARTHUR POND RD MT OLIVE, NC 28365	DEPUTY	WCSO		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/30/2021	$ 100.00
☐					$
☐					$

☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
FRANK BOVA 808 OBERRY RD DUDLEY, NC 28333	MANAGER	KICK KLEEN CAR WASH		$ 220.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/27/2021	$ 220.00
☐					$
☐					$

4. Total on this Page	$ 520.00
5. Total of ALL CRO-1210 Pages (This Amount Carries Forward to the Next Regularly Scheduled Report) Page CRO-1210 1	$ 13,160.00

Contributions from Individuals

Amendment ☐ Yes ☒ No

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
PIERCE FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
RAY BROGDEN PO BOX 821 MT OLIVE, NC 28365	DEPUTY SHERIFF	WCSO		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/25/2021	$ 100.00
☐					$
☐					$

[illegible] ☐ [illegible] ☐ [illegible]

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ELLEN BROGEN P0 BOX 299 MT OLIVE, NC 28365	PHYSICIAN	SELF		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/25/2021	$ 100.00
☐					$
☐					$

[illegible] ☐ [illegible] ☐ [illegible]

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JEFF CANNON 207 AVALON DR GOLDSBORO, NC 27530	CLUB MANAGER	LANE TREE		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/16/2021	$ 100.00
☐					$
☐					$

[illegible] Page	$ 300.00
[illegible] ALL CRO-1210 Pages [illegible]	$ 13,160.00

Contributions from Individuals

Amendment ☐ Yes ☒ No

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
PIERCE FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MORRIS CARMACK 4483 INDIAN SPRINGS RD SEVEN SPRINGS, NC	SPX			$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/12/2021	$ 100.00
☐					$
☐					$

[redacted] ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ROGER CASEY 600 HANDLEY ACRES DR GOLDSBORO, NC 27534	KEEN PLUMBING	OWNER		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/30/2021	$ 100.00
☐					$
☐					$

[redacted] ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
KELVIN COLES 102 POPLAR KNOLL RD PIKEVILLE, NC 27863	RETIRED			$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Electric Funds Tran		10/22/2021	$ 100.00
☐					$
☐					$

[redacted]	$ 300.00
[redacted]	$ 13,160.00

Contributions from Individuals

Amendment ☐ Yes ☒ No

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
PIERCE FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
KYLE CORBETT 300 EW LN GOLDSBORO, NC 27534	CORBETT CLEARING AND DEMO	OWNER		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/30/2021	$ 200.00
☐					$
☐					$

☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JAMES DAVIS 2710 LANGSTON DR GOLDSBORO, NC 27534	RETIRED			$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/30/2021	$ 100.00
☐					$
☐					$

☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JOHN DAVIS 101 RAMBLEWOOD DR MT OLIVE, NC 28365	RET			$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/19/2021	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 400.00
5. Total of All CRO-1210 Pages (This total must be the same as Schedule Summary Page Grand Total)	$ 13,160.00

Contributions from Individuals

Amendment ☐ Yes ☒ No

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
PIERCE FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JOSH DAVIS 677 HWY 581 N GOLDSBORO, NC 27530	NAHUNTA PORK CENTER			$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/30/2021	$ 200.00
☐					$
☐					$

3. ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
LAUREN DAVIS 677 HWY 581 N GOLDSBOEO, NC 27530	BOOKKEEPER	NAHUNTA PORK CENTER		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/30/2021	$ 200.00
☐					$
☐					$

3. ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MICHAEL DAWSON 108 DOBBS PLACE GOLDSBORO, NC 27530	CAPTAIN-DEPUTY SHERIFF	COUNTY OF WAYNE		$ 60.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Electric Funds Tran		11/30/2021	$ 60.00
☐					$
☐					$

4. Total This Page	$ 460.00
5. Total of All CRO-1210 Pages (This total must equal Line 3 of Summary Page CRO-1200)	$ 13,160.00

Contributions from Individuals

Amendment ☐ Yes ☒ No

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
PIERCE FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MICHAEL DAWSON 108 DOBBS PLACE GOLDSBORO, NC 27530	CAPT SHERIFF DEPUTY	WCSO		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/24/2021	$ 100.00
☐					$
☐					$

☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
DONNA DENNING 117 MYRNA DR GOLDSBORO, NC 27530	BDI	OWNER		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/28/2021	$ 100.00
☐					$
☐					$

☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
DANNY EDWARDS 130 PROVIDENCE CHURCH RD GOLDSBORO, NC 27530	RET			$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/06/2021	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 300.00
5. Total of ALL CRO-1210 Pages (This Total should be the Sum of All Previous Summary Page CRO-1240)	$ 13,160.00

Contributions from Individuals

Amendment ☐ Yes ☒ No

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
PIERCE FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
PAULS EDWARDS 188 RAYNER MILL RD MT OLIVE, NC 28365		BDI		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/24/2021	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ANTHONY GRADY 1393 N BREAZEALE AVE MT OLIVE, NC 28365	TONY'S SERVICE CENTER	OWNER		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/28/2021	$ 200.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
KELLY GRADY 575 BEAUTARCUS RD MT OLIVE, NC 28365 (919) 738-2287		TOWN OF MT OLIVE		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/29/2021	$ 100.00
☐					$
☐					$

4. Total on this Page	$ 400.00
5. Total of ALL CRO-1210 Pages (Total from Summary Page CRO-1100)	$ 13,160.00

Contributions from Individuals

Amendment ☐ Yes ☒ No

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
PIERCE FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
BRANDON GRAY 1343 N BESTON RD LAGRANGE, NC 28551	CPA	BGC		$ 720.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Cash		07/30/2021	$ 10.00
☐	001	Electric Funds Tran		09/02/2021	$ 100.00
☐	001	Electric Funds Tran		09/07/2021	$ 300.00

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
BRANDON GRAY 1343 N BESTON RD LAGRANGE, NC 28551	CPA	BGC		$ 720.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Electric Funds Tran		10/04/2021	$ 10.00
☐	001	Electric Funds Tran		10/25/2021	$ 100.00
☐	001	Electric Funds Tran		11/30/2021	$ 200.00

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
TIFFANY GRIFFIN 479 RALPH DAIL RD MT OLIVE, NC 28365	NURSE	SAMPSON CC		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/27/2021	$ 100.00
☐					$
☐					$

4. Total on this Page	$ 820.00
5. Total (ALL CRO-1210 Pages)	$ 13,160.00

Contributions from Individuals

Amendment ☐ Yes ☒ No

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
PIERCE FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
PHILIP R GRUBB 605 ADLER LN GOLDSBORO, NC 27530	FASTNERS SUPPLUY	OWNER		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/30/2021	$ 200.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
KENNETH GURGANUS 107 CHRIS RD MT OLIVE, NC 28365	LANDSCAPING	SELF		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Electric Funds Tran		11/24/2021	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MICHELLE GURLEY 169 EAST WAYNE RD GOLDSBORO, NC 27534	COUNSELOR	WCPS		$ 600.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/30/2021	$ 600.00
☐					$
☐					$

4. Total for this Page	$ 900.00
5. Total for All CRO-1210 Pages (This Election Cycle - If Filing Separately, Page 1 Only)	$ 13,160.00

Contributions from Individuals

Amendment ☐ Yes ☒ No

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
PIERCE FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MATTHEW HARRISON 144 WATERVIEW DR PIKEVILLE, NC 27683	RED SHED	OWNER		$ 300.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/30/2021	$ 300.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
GLADYS HILL 1181 HWY 581 N GOLDSBORO, NC 27530	RET			$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/06/2021	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
RICKY HOOKS 895 FRIENDLY DR GOLDSBORO, NC 27530	DEPUTY SHERIFF	WCSO		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/29/2021	$ 200.00
☐					$
☐					$

4. Total on this Page	$ 600.00
5. Total of ALL CRO-1210 Pages (This Amount Must Be Carried Forward to the Next Report)	$ 13,160.00

Contributions from Individuals

Amendment ☐ Yes ☒ No

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
PIERCE FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
STEPHEN HOWELL 100 CHANCERY DR GOLDSBOEO, NC 27530	HOWELL FUNREL HOME	OWNER		$ 500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/09/2021	$ 500.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JASON HUGHES 483 HARRELLS HILLS RD MT OLIVE, NC 28365	PLICE CHIEF	TOWN OF MT OLIVE		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/29/2021	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JOHN HUNTER 99 WOOD DUCK CT GOLDSBORO, NC 27534	VP	T.A. LOVING		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/29/2021	$ 100.00
☐					$
☐					$

4. Total Amt This Page	$ 700.00
5. Total of All CRO-1210 Pages (This Election Cycle Only)	$ 13,160.00

Contributions from Individuals

Amendment ☐ Yes ☒ No

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
PIERCE FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MEREDITH JACKSON 105 W APRIL LANE GOLDSBORO, NC 27530	NURSR	WAYNE UNC		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/30/2021	$ 200.00
☐					$
☐					$

[redacted] ☐ ☐

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JOSEPH JENNETTE 619 KERMIT WARREN RD MT OLIVE, NC 28365	FARMER	SELF		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/24/2021	$ 100.00
☐					$
☐					$

[redacted] ☐ ☐

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
KRISTAL JONES 1889 COKE STORE RD MT OLIVE, NC 28365	FARMER	SELF		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/28/2021	$ 200.00
☐					$
☐					$

[redacted]	$ 500.00
[redacted]	$ 13,160.00

Contributions from Individuals

Amendment ☐ Yes ☒ No

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
PIERCE FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
STEVE JONES P0 BOX 385 CALPSO, NC	RETIRED			$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/27/2021	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MICHAEL KABLER 519 POTTS RD DUDLEY, NC 28333	RET			$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/13/2021	$ 200.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
RANDY KING PO BOX 302 MT OLIVE, NC 28365	RET,			$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/24/2021	$ 100.00
☐					$
☐					$

4. Total this Page	$ 400.00
5. Total of ALL CRO-1210 Pages (This amount must also be reported on Campaign Summary Page CRO-1100)	$ 13,160.00

Contributions from Individuals

Amendment ☐ Yes ☒ No

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
PIERCE FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
DAVID KORNEGAY 147 CREST DR MT OLIVE, NC 28365	REALTOR	KORNEGAY REALTY INC.		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/29/2021	$ 100.00
☐					$
☐					$

☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JAMES KORNEGAY 162 CRICKET RIDGE RD MT OLIVE, NC 28365	AGENT	FARM BUR		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/21/2021	$ 100.00
☐					$
☐					$

☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
PAMELA LEE 465 BAKER CHAPLE CHURCH RD MT OLIVE, NC 28365	CO OF WAYNE			$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/25/2021	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 300.00
5. Total of ALL CRO-1210 Pages (This Amount to be Reported on Most Recent Report CRO-1100)	$ 13,160.00

Contributions from Individuals

Amendment ☐ Yes ☒ No

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
PIERCE FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
RICHARD LEWIS 300 BIG DADDYS RDD PIKEVILLE, NC 27863	DEPUTY	WCSO		$ 500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/16/2021	$ 500.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MARTIN MC ALDUFF 1102 BRAWELL RD GOLDSBORO, NC 27530	DEPUTY	WCSO		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/29/2021	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
DREW MCKMIGHT 911 MILL RD GOLDSBORO, NC 27530	PA	UNC ORTHO		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Electric Funds Tran		09/02/2021	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 700.00
5. Total of ALL CRO-1210 Pages (This Amount Must Be Reported on Your Campaign Report)	$ 13,160.00

Contributions from Individuals

Amendment ☐ Yes ☒ No

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
PIERCE FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
SHARON MOHISER 103 BENELLI CIR. GOLDSBORO, NC 27530	TEACHER	JOHNSTON CO.		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/30/2021	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
BELA NAGYPAL 405 WALNUT CREEK GOLDSBORO, NC 27530	HERITAGE FARMS	OWNER		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Electric Funds Tran		09/02/2021	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
WILLIAM OUTLAW 102 CREST RD MT OLIVE, NC 28365	SALESMAN	BEST USED CARS		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/30/2021	$ 100.00
☐					$
☐					$

4. Total for This Page	$ 300.00
5. Total for ALL CRO-1210 Pages (This Election Cycle Only)	$ 13,160.00

Contributions from Individuals

Amendment ☐ Yes ☒ No

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
PIERCE FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
DARYLL OVEERTON 3178 HWY 13 S GOLDSBORO, NC 27530	RET			$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/21/2021	$ 100.00
☐					$
☐					$

[illegible] ☐ [illegible] ☐ [illegible]

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JOHN PARKER 210 MALLOY ST GOLDSBORO, NC 27534	CPA	PARKER & PARKER		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/28/2021	$ 100.00
☐					$
☐					$

[illegible] ☐ [illegible] ☐ [illegible]

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
TROY PATE 1601 EVERGREEN AVE GOLDSBORO, NC 27530	RETIRED			$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/15/2021	$ 100.00
☐					$
☐					$

4. Total [illegible]	$ 300.00
5. Total of All CRO-1210 Pages *[illegible]*	$ 13,160.00

Contributions from Individuals

 Amendment ☐ Yes ☒ No

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
PIERCE FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
AMY PIERCE 109 MISTY LN GOLDSBORO, NC 27530	NURSE	WAYNE UNC		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/26/2021	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JAMES PITTMAN 258 BILLY PRICE RD SEVEN SPRINGS, NC 28578	DEPTY SHERIFF	WCSO		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/24/2021	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JAMES POWELL 105 LAKE RIDGE DR GOLDBORO, NC 27530	PLUMBER	KEEN PLUMING		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/30/2021	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 300.00
5. Total of ALL CRO-1210 Pages (This line used for ... Detailed Summary Page CRO-1100)	$ 13,160.00

Contributions from Individuals

Amendment ☐ Yes ☒ No

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
PIERCE FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MIKE PRICE P0 BOX 1019 MT OLIVE, NC 28365	FRIENDLY MART	OWNER		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/27/2021	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
NEIL PRICE PO BPX 1019 MT OLIVE, NC 28365	FRIENDLY MART	OWNER		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/24/2021	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
GREGORY ROUSE 4777 LIDDELL RD SEVEN SPRINGS, NC 28578	FARMER SELF			$ 400.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/29/2021	$ 400.00
☐					$
☐					$

4. Total only this Page	$ 600.00
5. Total of ALL CRO-1210 Pages (This Election Cycle Only)	$ 13,160.00

Contributions from Individuals

Amendment ☐ Yes ☒ No

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
PIERCE FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JAMES SASSER 108 HOOD DR GOLDSBORO, NC 27530	SASSER CONSTRUCTION	SELF		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/29/2021	$ 100.00
☐					$
☐					$

[illegible] ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
RICHARD SASSER 750 PINKNEY RD KENLY, NC 27542	FARMER	SELF		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/30/2021	$ 100.00
☐					$
☐					$

[illegible] ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
GREGORY SAULS 3400 US HWY 13 N GOLDSBORO, NC 27534	4 SEASONS	OWNER		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/30/2021	$ 100.00
☐					$
☐					$

[illegible] Page	$ 300.00
[illegible] CRO-1210 Pages	$ 13,160.00

Contributions from Individuals

Amendment ☐ Yes ☒ No

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
PIERCE FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MATT SCOTT 1776 HOODSWAMP RD LA GRANGE, NC 28551	BODY SHOP			$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/15/2021	$ 200.00
☐					$
☐					$

☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
LARRY SHIVAR 363 BILLY PRICE RD SEVEN SPRINGS, NC 28578	SALES	HELENA CHEMICAL		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/26/2021	$ 100.00
☐					$
☐					$

☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ROYCE SHIVAR PO BOX 979 MT OLIVE, NC 28365		FARM BUREAU		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/30/2021	$ 100.00
☐					$
☐					$

4. Total for this Page	$ 400.00
5. Total of All CRO-1210 Pages (This Amount Must Match Total Amount From CRO-1205)	$ 13,160.00

Contributions from Individuals

Amendment ☐ Yes ☒ No

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
PIERCE FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MARTY SMITH 176 BILL CLIFTON RD FAISON, NC 28341	CLERK	JONES TRUE VALUE		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/21/2021	$ 100.00
☐					$
☐					$

[illegible] ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MIKE SMITH NC	RET			$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/24/2021	$ 200.00
☐					$
☐					$

[illegible] ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ED SPENCE 350 DAVIS STREET EXT FREMONT, NC 27830	FINANCIAL ADVISOR	SPENCE AGENCY LLC		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/11/2021	$ 100.00
☐					$
☐					$

4. Total this Page	$ 400.00
5. Total of ALL CRO-1210 Pages (This Summary Total Page and All Pages)	$ 13,160.00

Contributions from Individuals

Amendment ☐ Yes ☒ No

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
PIERCE FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JAMES STACKHOUSE 710 PARK AVE GOLDSBORO, NC 27530	RETIRED MD			$ 60.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/21/2021	$ 60.00
☐					$
☐					$

[redacted] ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MAX STRAP 546 SUTTON RD LAGRANGE, NC 28551	DEPUTY	WCSO		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/01/2021	$ 100.00
☐					$
☐					$

[redacted] ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
KIM SULLIVAN 114 NEAL DR GOLDSBORO, NC 27530	NOT FOR PROFIT MANG	SKILL CREATIONS INC		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/10/2021	$ 100.00
☐					$
☐					$

[redacted]	$ 260.00
[redacted]	$ 13,160.00

Contributions from Individuals

Amendment ☐ Yes ☒ No

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
PIERCE FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JERRY SUTTON 245 CROCUS LN LA GRANGE, NC 28551	FARMER SELF			$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/21/2021	$ 100.00
☐					$
☐					$

[illegible] ☐ [illegible] ☐ [illegible]

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JOHNNY SUTTON 982 BAKER CHAPEL CHURCH RD MT OLIVE, NC 28365	SELF			$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/30/2021	$ 100.00
☐					$
☐					$

[illegible] ☐ [illegible] ☐ [illegible]

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
NANNETTE SUTTON 320 RODELL BARROW RD GOLDSBORO, NC 27534	EMS	COUNTY OF WAYNE		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/30/2021	$ 100.00
☐					$
☐					$

[illegible]	$ 300.00
[illegible]	$ 13,160.00

Contributions from Individuals

Amendment ☐ Yes ☒ No

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
PIERCE FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
WAYNE SUTTON 265 CROCUS LN LA GRANGE, NC 28551	FARMER SELF			$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/21/2021	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
CHRISTOPHER SYKES 306 E STATION ST. MT OLIVE, NC 28365	LIVESTOCK DEALER	MT OLIVE LIVESTOCK		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/08/2021	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JAMES MARION SYKES 1210 COUNTRY CLUB RD MT OLIVE, NC 28365	LIVESTOCK DEALER	MT OLIVE LIVESTOCK		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/18/2021	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 300.00
5. Total of ALL CRO-1210 Pages (This Election Cycle Only)	$ 13,160.00

Contributions from Individuals

Amendment ☐ Yes ☒ No

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
PIERCE FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JAMES TAYLOR 142 KINSEY MILL RD MT OLIVE, NC 28365	SELF			$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/29/2021	$ 100.00
☐					$
☐					$

☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
SAMUEL TAYOR 845 BAKER CHAPEL CHURCH RD MT OLIVE, NC 28365	SELF			$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/30/2021	$ 100.00
☐					$
☐					$

☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JEREMY THOMPSON 205 MILL STONE DR GOLDSBORO, NC 27530	BROKER	EAST ATLANTIC REAL ESTATE		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/20/2021	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 300.00
5. Total of ALL CRO-1210 Pages (Attach Total from the last CRO-1210 Page)	$ 13,160.00

Contributions from Individuals

Amendment ☐ Yes ☒ No

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
PIERCE FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
WILLIE TOMMY 106 ADLER LN GOLDSBORO, NC 27530	PLUMBER	KEEN PLUMBING		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/30/2021	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
DANA TUCKER 2087 NAHUNTA RD PIKEVILLE, NC 27863	CRAWFORD FURNITURE	OWNER		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/23/2021	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
BRANDON VINSON 822 RODELL BARROW RD LA GRANGE, NC 28551	ELECTRION	VINSON ELECTRIC		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/30/2021	$ 200.00
☐					$
☐					$

4. Total this Page	$ 400.00
5. Total All CRO-1210 Pages (This Amount Must Be Carried Forward to Any Subsequent Page for This Filing)	$ 13,160.00

Contributions from Individuals

Amendment ☐ Yes ☒ No

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
PIERCE FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
AMY WALSTON 177 BARTLETT RE NE PIKEVILLE, NC 27863	DEPUTY	WCSO		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/24/2021	$ 100.00
☐					$
☐					$

☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
DAVID WEEKS 3119 HWY 13N GOLDSBORO, NC 27534	RETIRED			$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/24/2021	$ 200.00
☐					$
☐					$

☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JONATHON WHITLEY 211 WESTWOOD DR GOLDSBORO, NC 27530	RET			$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/07/2021	$ 100.00
☐					$
☐					$

Total only this Page	$ 400.00
Total of All CRO-1210 Pages	$ 13,160.00

Contributions from Individuals

Amendment ☐ Yes ☒ No

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
PIERCE FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
CHRISTIE WIGGINS 137 MEADOWLARK RD GOLDSBORO, NC 27534	BYCYCLE WORLD OWNER			$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/29/2021	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ED WILLIAMS 318 RAYNOR MILL RD MT OLIVE, NC 28365	SELF			$ 300.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/29/2021	$ 300.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
CHRISTEN WILSON 113 RALPH DR PIKEVILLE, NC 27863	BANKER	STATE EMP CR UNION		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/11/2021	$ 100.00
☐					$
☐					$

4. Total for This Page	$ 500.00
5. Total for All CRO-1210 Pages (This Page plus previous pages)	$ 13,160.00

Contributions from Individuals

Amendment ☐ Yes ☒ No

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
PIERCE FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
BRICE WORDSWORTH 616 VASSER RD GREENVILLE, NC	POLICE OFFICER	CITY OF GREENVILLE		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Electric Funds Tran		11/29/2021	$ 100.00
☐					$
☐					$

[redacted] ☐ ☐

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
CHRISTOPHER WORTH 107 RAMBLEWOOD DR MT OLIVE, NC 28365	DEPTUY SHERIFF	WCSO		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		11/03/2021	$ 100.00
☐					$
☐					$

[redacted]	$ 200.00
[redacted]	$ 13,160.00

Loan Proceeds

Amendment ☐ Yes ☒ No

Use this form to report proceeds from a loan and loan endorser's information
A loan proceeds statement must accompany each loan that is from an individual

1. Committee Full Name (and Fund if applicable)	2. ID Number
PIERCE FOR SHERIFF	

3. Lender Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
LAWRENCE PIERCE 101 LIVINGSTON DR GOLDSBORO, NC 27530	SHERIFF	
	c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
	WAYNE COUNTY	07/30/2021
		f. End Date (mm/dd/yyyy)

g. Rate	h. Security Pledged	i. Account Code	j. Form of Payment	k. Amount
%		001	Cash	$ 4,000.00

l. Full Name of Lending Institution	m. Loan Number

4. Loan Endorser (Required for Business Loans)

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field
	d. Percentage	e. Amount
	%	$

Total of All CRO-1410 Forms	$ 4,000.00

Disbursements

Amendment ☐ Yes ☒ No

Pg 1 of 2

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
PIERCE FOR SHERIFF	

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
BANKS, GRAY & CRUMPLER, PLLC 2719 GRAVES DR SUITE 15 GOLDSBORO, NC 27534 (919) 735-6300		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 533.74

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	E	12/21/2021	$ 533.74	
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
BICYCLE WORLD 137 N CENTER ST GOLDSBORO, NC 27530 (919) 735-2964		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 533.76

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	C	09/03/2021	$ 533.76	COOLERS FOR DRAWING
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
KORNEGAY PRINTING 2309 NORWOOD AVE GOLDSBORO, NC 27534 (919) 734-9262		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 385.79

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	B	08/31/2021	$ 385.79	ADVERTISING
				$	

5. Total this Page	$ 1,453.29
6. Total of ALL CRO-1310 Pages	$ 2,953.97

(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 explanation for each item marked with an *)

A* - Media	**B* - Printing**	**C* - Fundraising**	**D** - To Another Candidate
E - Salaries	**F* - Equipment**	**G** - Political Party	**H* - Holding Public Office Expenses**
I - Postage	**J** - Penalties	**K* - Office Expenses**	**Q* - Donation to Legal Expense Fund**
O* Other			

*** Codes require detailed explanation in required remarks field.**

Disbursements

 Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
PIERCE FOR SHERIFF	

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
SIGNS FROM THE FARM 373 VANN SMITH RD SEVEN SPRINGS, NC 28578 (919) 658-6190	c. Level Registered (Specify) ☐ Federal ☐ County ☐ State ☐ Municipality	e. Election Sum to Date $ 864.68

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	A	09/24/2021	$ 864.68	ADVERTISING
				$	

☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
WAYNE COUNTY BOARD OF ELECTIONS 309 EAST CHESTNUT ST GOLDSBORO, NC 27530 (919) 731-1411	c. Level Registered (Specify) ☐ Federal ☐ County ☐ State ☐ Municipality	e. Election Sum to Date $ 636.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	H	12/07/2021	$ 636.00	FILING FEE
				$	

	$ 1,500.68
(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)*	$ 2,953.97

A* - Media	**B* - Printing**	**C* - Fundraising**	D - To Another Candidate
E - Salaries	**F* - Equipment**	G - Political Party	**H* - Holding Public Office Expenses**
I - Postage	J - Penalties	**K* - Office Expenses**	**Q* - Donation to Legal Expense Fund**
O* Other			

Aggregated Non-Media Expenditures

Amendment ☐ Yes ☒ No

Optional form used to report NC Non-Media Expenditures of $50 or less.

PIERCE FOR SHERIFF	

3. Payee Information

a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
☐ Add ☐ Remove	001	Draft	O	07/21/2021	$ 4.00	BANK SERVICE CHARGES
☐ Add ☐ Remove	001	Draft	O	08/23/2021	$ 4.00	BANK SERVICE CHARGES
☐ Add ☐ Remove	001	Check	O	07/30/2021	$ 10.00	REIMBURSEMENT FOR FILING FEES
☐ Add ☐ Remove	001	Draft	O	09/21/2021	$ 4.00	BANK SERVICE CHARGES
☐ Add ☐ Remove	001	Draft	O	10/21/2021	$ 4.00	BANK SERVICE CHARGES
☐ Add ☐ Remove	001	Draft	O	11/22/2021	$ 4.00	BANK SERVICE CHARGES
☐ Add ☐ Remove	001	Draft	O	12/21/2021	$ 4.00	BANK SERVICE CHARGES
[redacted]					$	34.00
[redacted]					$	34.00

B* - Printing

D - To Another Candidate

E - Salaries

G - Political Party

J - Penalties

Q* - Donations to Legal Expense Fund

O* - Other

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

Outstanding Loans

Amendment ☐ Yes ☒ No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable)	2. ID Number
PIERCE FOR SHERIFF	

3. Lender Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
LAWRENCE PIERCE 101 LIVINGSTON DR GOLDSBORO, NC 27530	SHERIFF	
	c. Employer's Name/Specific Field	**e. Start Date (mm/dd/yyyy)**
	WAYNE COUNTY	07/30/2021
		f. End Date (mm/dd/yyyy)

g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		$ 4,000.00	$ 4,000.00

k. Full Name of Lending Institution	l. Loan Number

4. Total [illegible]	$ 4,000.00
5. Total [illegible]	$ 4,000.00

Nicholas Sullivan

From: Nicholas Sullivan
Sent: Wednesday, February 2, 2022 11:08 AM
To: Brandon Gray
Subject: Audit Completed: Pierce for Sheriff

Good Afternoon,

The audit of the Pierce for Sheriff committee's Year End Report has been completed and no discrepancies were found.

Thanks,

Nicholas G. Sullivan | Deputy Director
Wayne County Board of Elections
309 E. Chestnut Street
Goldsboro, NC 27530
919.731.1410 office | 919.731.1409 fax