

# Statement of Organization - Candidate Committee

Is this statement:  
 New  Amended

Use this form to create a new or update an existing candidate committee.

This form must be accompanied by form CRO-3500. An amended form is required for each new election year.

## 1. Committee Information

a. Name of Committee	Committee to Elect Robin A. Radford		d. ID Number	HK1923
b. Mailing Address (include City, State and Zip Code)	3840 Nahunta Road, Pikeville, NC 27863		e. Date Organized	12/14/2021
c. Committee Website (Optional)			f. Phone Number	919-738-7803

## 2. Candidate Information

a. Full Name	Robin Aycock Radford		e. Party Affiliation	Democratic
b. Mailing Address (include City, State, and Zip Code)	3840 Nahunta Road, Pikeville, NC		f. Office Sought	Wayne County Clerk of Court
c. Phone Number	d. Email Address	27863	g. Next Election Year	2022
919-738-7803	radford4@embargmail.com		h. Jurisdiction	Wayne
<input checked="" type="checkbox"/> Email copy of report notices				

## 3. Treasurer Information

a. Full Name	Christen R. Wilson			
b. Mailing Address (include City, State, and Zip Code)	113 Ralph Dr. Pikeville, NC 27863			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address	
919-738-4181	cjradford14@gmail.com		BY	
<input checked="" type="checkbox"/> Send report notices by email		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Email copy of report notices

## 5. Custodian of Books Information (Keeper of Records)

a. Full Name	Robin A. Radford		
b. Mailing Address (include City, State, and Zip Code)	3840 Nahunta Rd, Pikeville, NC 27863		
c. Phone Number	d. Email Address	b. Account Code	c. Type
919-738-7803	radford4@embargmail.com	SB 5450	checking
<input checked="" type="checkbox"/> Email copy of report notices			

I certify that the Committee is in compliance with all applicable provisions of Article 22A 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.

Christen R. Wilson

Printed Name of Treasurer

Christen R. Wilson

Signature of Appointed Treasurer

12/16/2021

Date

I certify that the information above is correct, and I, as the candidate, appoint said treasurer to personally fulfill the duties and responsibilities imposed upon the appointed treasurer and subject to the penalties in Article 22A of Chapter 163 of the NC General Statutes.

Robin A. Radford

Printed Name of Candidate

Robin A. Radford

Signature of Candidate

12-16-2021

Date



# **NORTH CAROLINA STATE BOARD OF ELECTIONS**

## **Candidate Designation of Committee Funds**

This form is used by candidate committees only and allows the candidate to designate in the event of their death, how the committee's funds are to be disbursed using the eight allowable methods outlined in 163-278.16B(a).

**This Designation is filed at the Board of Elections office where the committee's campaign reports are filed.**

Candidate Name: Robin Aycock Radford

Committee Name: Committee to Elect Robin A. Radford

Treasurer Name: Christen R. Wilson

If Candidate is own treasurer, designate an agent to carry out designations: \_\_\_\_\_

Committee ID #: HK1923

Level Registered: [State] [County] If county, specify: Wayne

I, Robin A. Radford, hereby direct that in the event of my death or incapacity all  
(Name of Candidate)  
funds remaining in my Campaign Committee account(s) (after payment of permitted outstanding  
debts or reasonable expenses for winding up the Committee or closing office) be paid in the  
following manner as permitted by N.C. Gen. Stat. 163-278.16B(a).

Name of Entity  
*(Select from §163-278.16B(a))*

Plan for Disbursement (eg. Amount or %)

1. Mt. Carmel UMC  
PO Box 10, Pikeville, NC 27843
2. \_\_\_\_\_
3. \_\_\_\_\_

100%

By signing this form, I certify that the foregoing entities are eligible beneficiaries under N.C. Gen. Statute 163-278.16B(a). A copy of this form should be maintained with the Committee records.

Signature of Candidate:

Devin A Radford

Date:

12/16/2021

## **Nicholas Sullivan**

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**From:** Nicholas Sullivan  
**Sent:** Friday, December 17, 2021 8:54 AM  
**To:** 'radford4@embarqmail.com'  
**Subject:** Missing Campaign Finance Document

Ms. Radford,

You did not return a CRO-3600 Certification of Threshold in your campaign documents filed yesterday. This form is required and is due by Monday, December 20<sup>th</sup> at 5pm. The form can be found at the link below.

<https://www.ncsbe.gov/campaign-finance/reporting-forms/certifications>

Thanks,

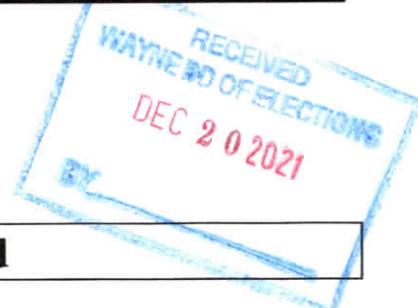
**Nicholas G. Sullivan | Deputy Director**  
Wayne County Board of Elections  
309 E. Chestnut Street  
Goldsboro, NC 27530  
919.731.1410 office | 919.731.1409 fax

*\*E-mail correspondence to/from this address may be subject to the North Carolina Public Records Law and may be disclosed to third parties.*



# NORTH CAROLINA

## STATE BOARD OF ELECTIONS



### Certification of Threshold

This Certification is used to declare or withdraw a committee's intent to raise or spend \$1,000 or less in the current election cycle.

**This Certification is only valid for political party committees and candidates for a county office, municipal office, local school board office, soil & water conservation district board of supervisors, or sanitary district board.**

**This Certification is filed at the Board of Elections office where the committee's campaign reports are filed.**

#### FILED BY:

Committee Name:

Committee to Elect Robin A. Radford

Treasurer Name:

Christen R. Wilson

Treasurer Address:

113 Ralph Drive

(include city, state, & zip)

Pikeville, NC 27863

Treasurer Phone:

919-738-4181

#### Check One:

I certify that this committee intends to neither receive nor expend more than \$1,000 during the current election cycle under the procedures set forth in G.S. 163-278.10A. This certification will remain in effect until the end of the election cycle for this committee. If this committee exceeds \$1,000 in contributions or expenditures during this election cycle, I understand that I must immediately notify the appropriate board of elections and file required campaign finance reports.

**THIS DECLARATION CAN ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE.**

I am withdrawing my Certification to remain at or under the \$1,000 threshold. I will now be required to file the next scheduled report for all contributions and expenditures that have not been previously reported from the beginning of the current election cycle. I further agree to file all future reports required.

12/17/2021

Date Signed

Christen R. Wilson  
Signature

## **Nicholas Sullivan**

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**From:** Nicholas Sullivan  
**Sent:** Monday, December 20, 2021 1:55 PM  
**To:** 'radford4@embarqmail.com'  
**Subject:** Certification of Threshold

Ms. Radford,

The CRO-3600 you returned today indicates your committee intends to stay under the \$1,000.00 threshold. However, your filing fee alone was over \$1,000.00. You'll need to submit another CRO-3600 with the correct box checked. The forms, reporting schedules, and other campaign finance resources are available on the state board's website: <https://www.ncsbe.gov/campaign-finance>

Thanks,

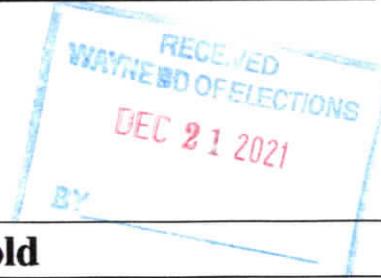
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#### FILED BY:

Committee Name:

Committee to Elect Robin A. Radford

Treasurer Name:

Christen R. Wilson

Treasurer Address:

113 Ralph Drive

(include city, state, & zip)

Aikenville, NC 27863

Treasurer Phone:

919-738-4181

#### Check One:

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**THIS DECLARATION CAN ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE.**

I am withdrawing my Certification to remain at or under the \$1,000 threshold. I will now be required to file the next scheduled report for all contributions and expenditures that have not been previously reported from the beginning of the current election cycle. I further agree to file all future reports required.

12/20/2021

Date Signed

Christen R. Wilson

Signature

# 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		
COMMITTEE TO ELECT ROBIN A. RADFORD	HB1923		
b. Mailing Address (include City, State and Zip Code)	d. Date Filed		
3840 NAHUNTA ROAD PIKEVILLE, NC 27863	01/28/2022		
	e. Phone Number		
	919-738-7803		

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2021	12/06/2021	12/31/2021	CHRISTEN R. WILSON

6. Type of Committee (Check One)	9. Type of Report (check only one type of report from one category)																																																	
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent <input type="checkbox"/> Expenditure <input type="checkbox"/> Legal Expense Fund	<table border="1"> <tr> <td>Municipal</td> <td colspan="2">State/County</td> <td>Referendum</td> </tr> <tr> <td><input type="checkbox"/> Organizational</td> <td><input type="checkbox"/> Organizational</td> <td><input type="checkbox"/> Organizational</td> </tr> <tr> <td><input type="checkbox"/> Thirty-five day</td> <td colspan="2">Quarterly</td> <td><input type="checkbox"/> Pre-referendum</td> </tr> <tr> <td><input type="checkbox"/> Joint Fundraiser</td> <td colspan="3"></td> </tr> <tr> <td><input type="checkbox"/> Pre-primary</td> <td><input type="checkbox"/> First</td> <td><input type="checkbox"/> Final</td> </tr> <tr> <td><input type="checkbox"/> Pre-election</td> <td><input type="checkbox"/> Second</td> <td><input type="checkbox"/> Supplemental Final</td> </tr> <tr> <td><input type="checkbox"/> Pre-runoff</td> <td><input type="checkbox"/> Third</td> <td><input type="checkbox"/> Annual</td> </tr> <tr> <td><input type="checkbox"/> Semi-annual</td> <td><input type="checkbox"/> Fourth</td> <td><input type="checkbox"/> Special</td> </tr> <tr> <td><input type="checkbox"/> Mid Year</td> <td><input type="checkbox"/> Semi-annual</td> <td colspan="2"></td> </tr> <tr> <td><input type="checkbox"/> Year End</td> <td><input type="checkbox"/> Mid Year</td> <td colspan="2"></td> </tr> <tr> <td><input type="checkbox"/> Final</td> <td><input checked="" type="checkbox"/> Year End</td> <td colspan="2"></td> </tr> <tr> <td><input type="checkbox"/> Special</td> <td><input type="checkbox"/> Final</td> <td colspan="2"></td> </tr> <tr> <td></td> <td><input type="checkbox"/> Special</td> <td colspan="2"></td> </tr> </table>			Municipal	State/County		Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Thirty-five day	Quarterly		<input type="checkbox"/> Pre-referendum	<input type="checkbox"/> Joint Fundraiser				<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final	<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final	<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual	<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special	<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual			<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year			<input type="checkbox"/> Final	<input checked="" type="checkbox"/> Year End			<input type="checkbox"/> Special	<input type="checkbox"/> Final				<input type="checkbox"/> Special		
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	<input type="checkbox"/> Special																																																	
7. Type of Fund (if applicable, check one)	10. Special Report Name																																																	
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund  <input type="checkbox"/> Other:																																																		
8. Number of Fundraisers this Report																																																		
0																																																		

## 11. Account Information

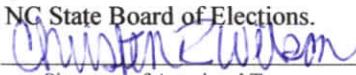
a. Financial Institution Full Name	11. Account Information		
SOUTHERN BANK	a. Financial Institution Full Name	RECEIVED WAYNE BOE OF ELECTIONS	
b. Purpose	c. Account Code	b. Purpose	c. Account Code
CAMPAIGN	SB5650	JAN 28 2022	
	d. Period Begin Balance	BY	d. Period Begin Balance
	\$ 0		\$

## CERTIFICATION

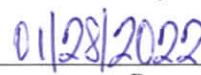
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.

CHRISTEN R. WILSON

Printed Name of Signer



Signature of Appointed Treasurer



Date

## FOR OFFICE USE ONLY

Date Received:	Employee:	Delivery Method
		<input type="checkbox"/> Normal Mail
Date Postmarked:	Employee:	<input type="checkbox"/> Registered Mail
		<input type="checkbox"/> Hand Delivered
Date Scanned:	Employee:	<input type="checkbox"/> Electronically Filed
		<input type="checkbox"/> Signer has not received mandatory training
Date Data Entered:	Employee:	

**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
COMMITTEE TO ELECT ROBIN A. RADFORD	YEAR-END SEMI-ANNUAL	HK1923
<b>Start of Election Cycle:</b> January 1, 2021		<b>Total this Reporting Period</b>
<b>4) Cash on Hand at Start</b>	\$ 0	\$ 0
<b>5) Aggregated Contributions from Individuals</b> (CRO-1205)	\$ 0	\$ 0
<b>6) Contributions from Individuals</b> (CRO-1210)	\$ 1208.00	\$ 1208.00
<b>7) Contributions from Political Party Committees</b> (CRO-1220)	\$ 0	\$ 0
<b>8) Contributions from Other Political Committees</b> (CRO-1230)	\$ 0	\$ 0
<b>9) Loan Proceeds</b> (CRO-1410)	\$ 1000.00	\$ 1000.00
<b>10) Refunds/Reimbursements To the Committee</b> (CRO-1240)	\$ 0	\$ 0
<b>11) Other Receipt Sources</b>		
<b>11a) Interest on Bank Accounts</b> (CRO-1250)	\$ 0	\$ 0
<b>11b) Contributions from Not-for-Profit Organizations</b> (CRO-1250)	\$ 0	\$ 0
<b>11c) Outside Sources of Income</b> (CRO-1250)	\$ 0	\$ 0
<b>11d) Legal Expense Fund – Other Sources</b> (CRO-1270)	\$ 0	\$ 0
<b>11 e) Exempt Purchase Price Sales</b> (CRO-1265)	\$ 0	\$ 0
<b>12) TOTAL RECEIPTS</b> (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$ 2208.00	\$ 2208.00
<b>13) Disbursements</b>		
<b>13a) Operating Expenditures</b> (CRO-1310)	\$ 1208.00	\$ 1208.00
<b>13b) Contributions to Candidates/Political Committees</b> (CRO-1310)	\$ 0	\$ 0
<b>13c) Coordinated Party Expenditures</b> (CRO-1310)	\$ 0	\$ 0
<b>14) Aggregated Non-Media Expenditures</b> (CRO-1315)	\$ 0	\$ 0
<b>15) Loan Repayments</b> (CRO-1420)	\$ 0	\$ 0
<b>16) Refunds/Reimbursements From the Committee</b> (CRO-1320)	\$	\$
<b>17) In-Kind Contributions</b> (CRO-1510)	\$	\$
<b>18) TOTAL EXPENDITURES</b> (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 1208.00	\$ 1208.00
<b>19) Cash on Hand at End</b> (Add lines 4 and 12 together, then subtract line 18)	\$ 1000.00	\$ 1000.00
<b>20) Non-Monetary Gifts Given to Other Committees</b> (CRO-1330)	\$ 0	
<b>21) Outstanding Loans (incl. ones from other campaigns)</b> (CRO-1430)	\$ 0	
<b>22) Debts and Obligations owed By the Committee</b> (CRO-1610)	\$ 0	
<b>23) Debts and Obligations owed To the Committee</b> (CRO-1620)	\$ 0	
<b>24) Account Transfers Within the Committee</b> (CRO-1720)	\$ 0	
<b>25) Administrative Support</b> (CRO-1710)	\$ 0	\$ 0
<b>26) Forgiven Loans</b> (CRO-1440)	\$ 0	\$ 0
<b>27) 48-Hour Notice Reports Sum</b> (CRO-2220)	\$ 0	\$ 0
<b>28) Contributions to be Refunded</b> (CRO-1215)	\$ 0	\$ 0

# 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

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT ROBIN A. RADFORD		<b>2. ID Number</b> HK1923																																						
<b>3. Lender Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</td> <td>b. Job Title/Profession WAYNE COUNTY CLERK OF COURT</td> <td colspan="3">d. Comments</td> </tr> <tr> <td>ROBIN A. RADFORD 3840 NAHUNTA ROAD PIKEVILLE, NC 27863</td> <td></td> <td colspan="3">e. Start Date (mm/dd/yyyy) 12/06/2021</td> </tr> <tr> <td></td> <td>c. Employer's Name/Specific Field STATE OF NORTH CAROLINA</td> <td colspan="3">f. End Date (mm/dd/yyyy)</td> </tr> <tr> <td>g. Rate 0 %</td> <td>h. Security Pledged</td> <td>i. Account Code SNB5650</td> <td>j. Form of Payment CHECK</td> <td>k. Amount \$ 1000.00</td> </tr> </table>					a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession WAYNE COUNTY CLERK OF COURT	d. Comments			ROBIN A. RADFORD 3840 NAHUNTA ROAD PIKEVILLE, NC 27863		e. Start Date (mm/dd/yyyy) 12/06/2021				c. Employer's Name/Specific Field STATE OF NORTH CAROLINA	f. End Date (mm/dd/yyyy)			g. Rate 0 %	h. Security Pledged	i. Account Code SNB5650	j. Form of Payment CHECK	k. Amount \$ 1000.00																
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g. Rate 0 %	h. Security Pledged	i. Account Code SNB5650	j. Form of Payment CHECK	k. Amount \$ 1000.00																																				
<b>l. Full Name of Lending Institution</b>			<b>m. Loan Number</b>																																					
<b>4. Endorsers/Makers</b> <i>(The people who guarantee the loan.)</i> <table border="1"> <tr> <td>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</td> <td>b. Job Title/Profession</td> <td>c. Employer's Name/Specific Field</td> </tr> <tr> <td></td> <td>d. Percentage</td> <td>e. Amount</td> </tr> <tr> <td></td> <td>%</td> <td>\$</td> </tr> <tr> <td>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</td> <td>b. Job Title/Profession</td> <td>c. Employer's Name/Specific Field</td> </tr> <tr> <td></td> <td>d. Percentage</td> <td>e. Amount</td> </tr> <tr> <td></td> <td>%</td> <td>\$</td> </tr> <tr> <td>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</td> <td>b. Job Title/Profession</td> <td>c. Employer's Name/Specific Field</td> </tr> <tr> <td></td> <td>d. Percentage</td> <td>e. Amount</td> </tr> <tr> <td></td> <td>%</td> <td>\$</td> </tr> <tr> <td>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</td> <td>b. Job Title/Profession</td> <td>c. Employer's Name/Specific Field</td> </tr> <tr> <td></td> <td>d. Percentage</td> <td>e. Amount</td> </tr> <tr> <td></td> <td>%</td> <td>\$</td> </tr> </table>					a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field		d. Percentage	e. Amount		%	\$	a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field		d. Percentage	e. Amount		%	\$	a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field		d. Percentage	e. Amount		%	\$	a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field		d. Percentage	e. Amount		%	\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field																																						
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	d. Percentage	e. Amount																																						
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	d. Percentage	e. Amount																																						
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	d. Percentage	e. Amount																																						
	%	\$																																						
<b>5. Total of ALL CRO-1410 Pages</b> (This line must be on line 9 of Detailed Summary Page CRO-1100)			\$ 1000.00																																					

# Disbursements

Pg \_\_\_\_\_ of \_\_\_\_\_  Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
COMMITTEE TO ELECT ROBIN A. RADFORD					HK1923	
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  ROBIN A. RADFORD 3840 NAHUNTA ROAD PIKEVILLE, NC 27863			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
			<b>c. Level Registered (Specify)</b>			
			<input type="checkbox"/> Federal	<input checked="" type="checkbox"/> County:	<b>e. Election Sum to Date</b>	
			<input type="checkbox"/> State	<input type="checkbox"/> Municipality:	\$ 1208.00	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>	
	CHECK	O	12/06/2021	\$1208.00	FILING FEE	
				\$		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
			<b>c. Level Registered (Specify)</b>			
			<input type="checkbox"/> Federal	<input type="checkbox"/> County:	<b>e. Election Sum to Date</b>	
			<input type="checkbox"/> State	<input type="checkbox"/> Municipality:	\$	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>	
				\$		
				\$		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
			<b>c. Level Registered (Specify)</b>			
			<input type="checkbox"/> Federal	<input type="checkbox"/> County:	<b>e. Election Sum to Date</b>	
			<input type="checkbox"/> State	<input type="checkbox"/> Municipality:	\$	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>	
				\$		
				\$		
<b>5. Total only this Page</b> \$ 1208.00						
<b>6. Total of ALL CRO-1310 Pages</b>						
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>						
<i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>						
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>						
<b>7. Purpose Codes</b> (List detailed expenditure code in (h.) above)						
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						
<b>* Codes require detailed explanation in required remarks field (k)</b>						



# NORTH CAROLINA

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## STATE BOARD OF ELECTIONS

### Loan Proceeds Statement

This Statement is used to report detailed information about a new loan and is required to accompany the Loan Proceeds Form in the report for which the loan is initially disclosed. If the loan is from an individual, the lender's signature is required on this form.

This Statement is to be filed with the Election Board where the committee's reports are filed.

- Name of committee to receive loan:** Committee to Elect Robin A. Radford
- Person or committee to make loan:** Robin A. Radford
- Date of loan to committee:** 12/15/2021
- Name of lending institution (source):**  
Robin A. Radford
- Amount of loan:** \$1,000.00
- Description (if in-kind loan):** \_\_\_\_\_
- Names of all parties responsible for payment of loan (guarantors):**  
Robin A. Radford
- Period of loan:** 1 year
- Rate of interest of loan:** 0%
- Security pledged for loan:** n/a

I, Robin A. Radford, acknowledge that all of the information  
(Person lending money to committee) provided is complete, true, and accurate. I further understand I may not forgive a loan that has an outstanding balance to any source.

Robin A. Radford

Signature of Lender

1-28-2022

Date Signed

Christen R. Wilson

Signature of Treasurer of Committee

1-28-2022

Date Signed

## **Nicholas Sullivan**

---

**From:** Nicholas Sullivan  
**Sent:** Wednesday, February 2, 2022 11:02 AM  
**To:** 'radford4@embarqmail.com'  
**Subject:** Audit Completed: Committee to Elect Robin A. Radford

Good morning,

Your Organizational Report audit has been completed. The following discrepancies were noted and require amendment:

- Your report type should be Organizational, not Year End. Please refer to the reporting schedule for this election cycle at: <https://www.ncsbe.gov/campaign-finance/reporting-schedules>;
- Your report indicates Contributions from individuals in the amount of \$1208.00 but there is no corresponding CRO-1210 included with the report;
- Your CRO-1310 requires an account code in Box F;
- Your CRO-1410 requires Boxes F, H & L to be completed.

Please amend your report and resubmit to our office. As a reminder, our office is responsible for auditing all campaign finance reports so we may not assist you with completing your reports. It is required that all Treasurers complete the Campaign Finance training, but it is also highly recommended that all candidates complete it as they are ultimately responsible for their own candidate committees.

**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

*\*E-mail correspondence to/from this address may be subject to the North Carolina Public Records Law and may be disclosed to third parties.*

# Disclosure Report Cover

Amendment  
 Yes  No

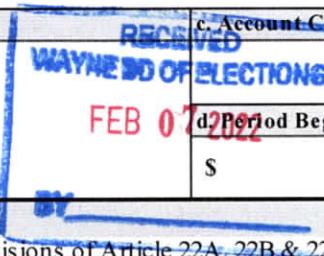
Use this form for general report and committee information, must be signed and submitted along with other detailed forms.  
 Do not use this form to update information.

## 1. Committee Information

a. Full Name	c. ID Number		
COMMITTEE TO ELECT ROBIN RADFORD	HK1923		
b. Mailing Address (include City, State and Zip Code)	d. Date Filed		
3840 NAHUNTA ROAD PIKEVILLE, NC 27863	02/05/2022		
	e. Phone Number (919) 738-7803		

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2021	12/06/2021	12/31/2021	CHRISTEN R WILSON

6. Type of Committee (Check One)	9. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund	Municipal	State/County	Referendum
	<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	<input checked="" type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special
7. Type of Fund (if applicable, check one)	10. Special Report Name		
<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:			
8. Number of Fundraisers this Report			
0			

3. Account Information		3. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
SOUTHERN BANK			
b. Purpose	c. Account Code	b. Purpose	c. Account Code
CAMPAIGN - TO RECEIVE INCOME AND PAY EXPENSES	SB5405		d. Period Begin Balance
	\$ 0		\$

## 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

Christen R Wilson

Printed Name of Signer

Christen R Wilson

Signature of Appointed Treasurer

02/05/2022

Date

## FOR OFFICE USE ONLY

Date Received:	Employee:	Delivery Method
		<input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed
Date Postmarked:	Employee:	
Date Scanned:	Employee:	
Date Data Entered:	Employee:	<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.

## Detailed Summary

Amendment  
 Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT ROBIN RADFORD	<b>2. Type of Report</b> 2021 Organizational	<b>3. ID Number</b> HK 1923	
<b>Start of Election Cycle: January 1, 2021</b>		<b>Total this Reporting Period</b>	<b>Total this Election Cycle</b>
4) Cash on Hand at Start		\$ 0.00	\$ 0.00
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 0.00	\$ 0.00	
6) Contributions from Individuals (CRO-1210)	\$ 1,208.00	\$ 1,208.00	
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)	\$ 1,000.00	\$ 1,000.00	
10) Refunds/Reimbursements to the Committee (CRO-1240)	\$ 0.00	\$ 0.00	
<b>11) Other Receipt Sources</b>			
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	
<b>12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)</b>	\$ 2,208.00	\$ 2,208.00	
<b>EXPENDITURES</b>			
<b>13) Disbursements</b>			
13a) Operating Expenditures (CRO-1310)	\$ 0.00	\$ 0.00	
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)	\$ 0.00	\$ 0.00	
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)	\$ 1,208.00	\$ 1,208.00	
<b>18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)</b>	\$ 1,208.00	\$ 1,208.00	
<b>19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)</b>	\$ 1,000.00	\$ 1,000.00	
<b>ADDITIONAL INFORMATION</b>			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$ 0.00		
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$ 1,000.00		
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	

# Contributions from Individuals

Pg 1 of 1

**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			
COMMITTEE TO ELECT ROBIN RADFORD		HK1923			
3. Contribution Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
ROBIN RADFORD 3840 NAHUNTA ROAD PIKEVILLE, NC 27863		CLERK OF COURT			
		c. Employer's Name/Specific Field			
		State of NC			
e. Election Sum to Date					
\$ 1,208.00					
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	SB5405	In-Kind	FILING FEE	12/06/2021	\$ 1,208.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page				\$ 1,208.00	
5. Total of ALL CRO-1210 Pages <i>(This page may be one line of a Detailed Summary Page CRO-1100)</i>				\$ 1,208.00	

CRO-1210

NC State Board of Elections

April 2007

# In-Kind Contributions

Pg 1 of 1Amendment  
 Yes  No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.

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

1. Committee/Political Fund Name (and Fund Identification #)		2. ID Number	
COMMITTEE TO ELECT ROBIN RADFORD		HK1923	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
ROBIN RADFORD 3840 NAHUNTA ROAD PIKEVILLE, NC 27863		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
<b>d. Election Sum to Date</b>			
\$ 1,208.00			
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
FILING FEE		12/06/2021	\$ 1,208.00
			\$
			\$
<b>4. Total only this Page</b> \$ 1,208.00			
<b>5. Total of ALL CRO-1510 Pages</b> \$ 1,208.00 <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>			

CRO-1510

NC State Board of Elections

December 2007

# Outstanding Loans

Pg 1 of 1Amendment  
 Yes  No

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

f. Committee/Full Name (and Fund if applicable)		2. ID Number	
COMMITTEE TO ELECT ROBIN RADFORD		1HK1923	
3. Lender information			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
ROBIN RADFORD 3840 NAHUNTA ROAD PIKEVILLE, NC 27863		CLERK OF COURT	e. Start Date (mm/dd/yyyy)
		c. Employer's Name/Specific Field <i>State of NC</i>	12/06/2021
		f. End Date (mm/dd/yyyy)	
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
0 %	None	\$ 1,000.00	\$ 1,000.00
k. Full Name of Lending Institution		l. Loan Number	
4. Total only this Page		\$ 1,000.00	
5. Total of ALL GRO-1430 Pages <i>(This page is part of one, 11 detailed Summary of GRO-1430)</i>		\$ 1,000.00	

CRO-1430

NC State Board of Elections

December 2007

## **Loan Proceeds**

Pg 5 of 10

1

**Amendment**

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

5. Pledge Information				<input type="checkbox"/> Add	<input type="checkbox"/> Remove	HK1923
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments		
ROBIN RADFORD 3840 NAHUNTA ROAD PIKEVILLE, NC 27863		CLERK OF COURT				
		e. Employer's Name/Specific Field		e. Start Date (mm/dd/yyyy)		
		State of NC		12/06/2021		
				f. End Date (mm/dd/yyyy)		
g. Rate	h. Security Pledged	i. Account Code	j. Form of Payment	k. Amount		
0 %	None	SB5405	Check	\$ 1,000.00		
l. Full Name of Lending Institution				m. Loan Number		
4. Endorsements/Comments (May add additional lines if needed)						
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field		
		d. Percentage		e. Amount		
		%		\$		
5. Total of ALL CRO-1410 Pages						
This line must be on line 9 of Detailed Summary Page CRO-1180						
\$ 1,000.00						

**CRO-1410**

NC State Board of Elections

April 2007

## **Nicholas Sullivan**

---

**From:** Nicholas Sullivan  
**Sent:** Wednesday, February 9, 2022 2:52 PM  
**To:** 'radford4@embarqmail.com'  
**Subject:** Audit Completed: Committee to Elect Robin A. Radford

Good afternoon,

Your amended Organizational Report audit has been completed. The following discrepancies were noted and require amendment:

- Your CRO-1410 requires Boxes F & L to be completed.

**Nicholas G. Sullivan | Deputy Director**  
Wayne County Board of Elections  
309 E. Chestnut Street  
Goldsboro, NC 27530  
919.731.1411 office | 919.731.1409 fax

*\*E-mail correspondence to/from this address may be subject to the North Carolina Public Records Law and may be disclosed to third parties.*

# Loan Proceeds

Pg 1 of 1 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

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT ROBIN RADFORD		<b>2. ID Number</b> HK1923	
<b>3. Lender Information</b> <span style="float: right;"><input type="checkbox"/> Add <input type="checkbox"/> Remove</span>			
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  ROBIN RADFORD 3840 NAHUNTA ROAD PIKEVILLE, NC 27863		<b>b. Job Title/Profession</b> CLERK OF COURT	<b>d. Comments</b>
		<b>c. Employer's Name/Specific Field</b> State of NC	<b>e. Start Date (mm/dd/yyyy)</b> 12/06/2021
			<b>f. End Date (mm/dd/yyyy)</b> n/a
<b>g. Rate</b> 0 %	<b>h. Security Pledged</b> None	<b>i. Account Code</b> SB5405	<b>j. Form of Payment</b> Check
			<b>k. Amount</b> \$ 1,000.00
<b>l. Full Name of Lending Institution</b> Robin A. Radford			
<b>4. Endorsers/Makers</b> <i>(The people who guarantee the loan.)</i>			
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>		<b>b. Job Title/Profession</b>	<b>c. Employer's Name/Specific Field</b>
		<b>d. Percentage</b>	<b>e. Amount</b>
		%	\$
<b>5. Total of ALL CRO-1410 Pages</b> <i>(This line must be on line 9 of Detailed Summary Page CRO-1100)</i>			
<b>CRO-1410</b>		NC State Board of Elections	
		April 2007	

BY

FEB 11 2022

RECEIVED  
WCBOE

## **Nicholas Sullivan**

---

**From:** Nicholas Sullivan  
**Sent:** Wednesday, February 16, 2022 1:46 PM  
**To:** 'radford4@embarqmail.com'  
**Subject:** Audit Completed: Committee to Elect Robin Radford

Good Afternoon,

The Audit of the Committee to Elect Robin Radford's amended organizational 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

*\*E-mail correspondence to/from this address may be subject to the North Carolina Public Records Law and may be disclosed to third parties.*