

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	HK 1923
b. Mailing Address (include City, State and Zip Code)	d. Date Filed
3840 NAHUNTA ROAD PIKEVILLE, NC 27863	10/25/2022
	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
2022	07/01/2022	10/22/2022	CHRISTEN R WILSON

6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
☒ Candidate Campaign	☐ Party	Municipal	State/County	Referendum
☐ Joint Fundraiser	☐ PAC	☐ Organizational	☐ Organizational	☐ Organizational
☐ Referendum	☐ Legal Expense Fund	☐ Thirty-five day	☐ Quarterly	☐ Pre-referendum
7. Type of Fund (if applicable, check one)		☐ Pre-primary	☐ First	☐ Final
☐ "Booster Fund"		☐ Pre-election	☐ Second	☐ Supplemental Final
☐ Building Fund		☐ Pre-runoff	☒ Third	☐ Annual
☐ Presidential Election Year Candidates Fund		☐ Semi-annual	☐ Fourth	☐ Special
☐ NC Public Campaign Financing Fund		☐ Mid Year	☐ Semi-annual	
☐ Other:		☐ Year End	☐ Mid Year	10. Special Report Name
		☐ Final	☐ Year End	
		☐ Special	☐ Final	
			☐ Special	
8. Number of Fundraisers this Report				
1				

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	SB5650		
	d. Period Begin Balance		d. Period Begin Balance
	\$ 8,088.00		\$

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 Christen R Wilson 10/25/2022
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: _____ Employee: _____ **Delivery Method**

Date Postmarked: _____ Employee: _____ ☐ Normal Mail

Date Scanned: _____ Employee: _____ ☐ Registered Mail

Date Data Entered: _____ Employee: _____ ☐ 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	
COMMITTEE TO ELECT ROBIN RADFORD		2022 Third Quarter		HK1923	
Start of Election Cycle: January 1, 2021			Total this Reporting Period		Total this Election Cycle
4) Cash on Hand at Start			\$ 8,088.00		\$ 0.00
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 950.00		\$ 1,000.00	
6) Contributions from Individuals (CRO-1210)		\$ 25,834.41		\$ 39,792.41	
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00		\$ 0.00	
8) Contributions from Other Political Committees (CRO-1230)		\$ 500.00		\$ 500.00	
9) Loan Proceeds (CRO-1410)		\$ 0.00		\$ 1,000.00	
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)		\$ 400.00		\$ 400.00	
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)		\$ 27,684.41		\$ 42,692.41	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 22,558.46		\$ 28,270.46	
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)		\$ 10.00		\$ 10.00	
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)		\$ 3,944.41		\$ 5,152.41	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 26,512.87		\$ 33,432.87	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 9,259.54		\$ 9,259.54	
ADDITIONAL INFORMATION					
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	

Aggregated Contributions from Individuals

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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	
COMMITTEE TO ELECT ROBIN RADFORD				HK1923	
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	SB5650	Cash		08/17/2022	\$ 50.00
☐ Add ☐ Remove	SB5650	Cash		08/17/2022	\$ 50.00
☐ Add ☐ Remove	SB5650	Check		08/30/2022	\$ 50.00
☐ Add ☐ Remove	SB5650	Check		08/17/2022	\$ 50.00
☐ Add ☐ Remove	SB5650	Check		08/17/2022	\$ 50.00
☐ Add ☐ Remove	SB5650	Check		08/17/2022	\$ 50.00
☐ Add ☐ Remove	SB5650	Check		08/17/2022	\$ 50.00
☐ Add ☐ Remove	SB5650	Check		08/30/2022	\$ 50.00
☐ Add ☐ Remove	SB5650	Check		09/23/2022	\$ 50.00
☐ Add ☐ Remove	SB5650	Cash		08/17/2022	\$ 50.00
☐ Add ☐ Remove	SB5650	Cash		08/17/2022	\$ 50.00
☐ Add ☐ Remove	SB5650	Check		08/25/2022	\$ 50.00
☐ Add ☐ Remove	SB5650	Cash		10/06/2022	\$ 50.00
☐ Add ☐ Remove	SB5650	Cash		10/06/2022	\$ 50.00
☐ Add ☐ Remove	SB5650	Cash		08/25/2022	\$ 50.00
☐ Add ☐ Remove	SB5650	Check		08/18/2022	\$ 50.00
☐ Add ☐ Remove	SB5650	Check		09/06/2022	\$ 50.00
☐ Add ☐ Remove	SB5650	Check		08/17/2022	\$ 50.00
☐ Add ☐ Remove	SB5650	Check		08/17/2022	\$ 50.00
☐ Add ☐ Remove	SB5650	Check		08/30/2022	\$ 50.00
4. Total only this Page				\$ 950.00	
5. Total of ALL CRO-1205 Pages (This line must be on line 5 of Detailed Summary Page CRO-1100)				\$ 950.00	

Contributions from Individuals

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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. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
GEORGE W AYCOCK JR 2236 NC HWY 581 PIKEVILLE, NC 27863 (919) 222-4646				COUNTY COMMISSIONER			
				c. Employer's Name/Specific Field			
				WAYNE COUNTY			
						e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Check		08/17/2022		\$ 100.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
PHILIP A BADDOUR JR 208 S WILLIAM STREET GOLDSBORO, NC 27530 (919) 735-7275				ATTORNEY			
				c. Employer's Name/Specific Field			
				BADDOUR, PARKER, HINE & HALE, PC			
						e. Election Sum to Date	
						\$ 1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Check		08/17/2022		\$ 1,000.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
DOLAN & TERESA BAKER 566 PRINCETON ROAD PRINCETON, NC 27569 (919) 736-2727				MANAGING MEMBER			
				c. Employer's Name/Specific Field			
				BAKER PIPE & PARTS LLC			
						e. Election Sum to Date	
						\$ 300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Check		09/30/2022		\$ 300.00	
☐						\$	
☐						\$	
4. Total only this Page						\$ 1,400.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 25,834.41	

Contributions from Individuals

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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) COMMITTEE TO ELECT ROBIN RADFORD						2. ID Number HK1923	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) BARTON W BALDWIN P.O. BOX 999 MOUNT OLIVE, NC 28365 (919) 758-9999				b. Job Title/Profession ACCOUNTANT		d. Comments	
				c. Employer's Name/Specific Field BALDWIN & HODGE, LLP			
						e. Election Sum to Date \$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	SB5650	Check		09/09/2022	\$ 500.00		
☐					\$		
☐					\$		
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) GLENN ALTON & RONDA BAILEY BARFIELD 308 BREEZEWOOD DR GOLDSBORO, NC 27534 (919) 920-4639				b. Job Title/Profession ATTORNEY		d. Comments	
				c. Employer's Name/Specific Field HAITHCOCK, BARFIELD, HULSE & KING, PLLC			
						e. Election Sum to Date \$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	SB5650	Check		08/30/2022	\$ 500.00		
☐					\$		
☐					\$		
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) SHELBY & NEAL BENTON 608 MILL ROAD GOLDSBORO, NC 27534 (919) 738-7802				b. Job Title/Profession ATTORNEY		d. Comments	
				c. Employer's Name/Specific Field BENTON FAMILY LAW			
						e. Election Sum to Date \$ 3,456.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	SB5650	In-Kind	ADVERTISING/CAMPAIGN PROMOTION TO	07/01/2022	\$ 3,000.00		
☐	SB5650	In-Kind	STAMPS, ENVELOPES, FOLD AND PAPER	08/16/2022	\$ 456.00		
☐					\$		
4. Total only this Page						\$ 4,456.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 25,834.41	

Contributions from Individuals

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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. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JASON M. & ALEXANDRA C. BLACKBURN 202 LEAFWOOD DRIVE GOLDSBORO, NC 27534 (919) 734-8515				ATTORNEY			
				c. Employer's Name/Specific Field			
				JASON M BLACKBURN ATTORNEY AT LAW			
						e. Election Sum to Date	
						\$ 750.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Check		09/15/2022		\$ 750.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JASON M BLACKBURN 112 S JOHN STREET GOLDSBORO, NC 27530 (919) 734-8515				ATTORNEY			
				c. Employer's Name/Specific Field			
				JASON M BLACKBURN ATTORNEY AT LAW			
						e. Election Sum to Date	
						\$ 750.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Check		08/18/2022		\$ 750.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
E J BLAND 602 BROOKWOOD LN GOLDSBORO, NC 27534 (919) 734-1808				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
						e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Check		08/17/2022		\$ 100.00	
☐						\$	
☐						\$	
4. Total only this Page						\$ 1,600.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 25,834.41	

Contributions from Individuals

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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) COMMITTEE TO ELECT ROBIN RADFORD						2. ID Number HK 1923	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) HAROLD D. & JODY J. BRASHEAR 119 FAIRWAY DRIVE GOLDSBORO, NC 27534 (919) 759-9923				b. Job Title/Profession ACCOUNTANT		d. Comments	
				c. Employer's Name/Specific Field NUNN, BRASHEAR & UZZELL, LLP		e. Election Sum to Date \$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	SB5650	Check		08/17/2022	\$ 250.00		
☐					\$		
☐					\$		
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) JERRY BRASWELL 305 W. CHESTNUT STREET GOLDSBORO, NC 27530 (919) 736-4262				b. Job Title/Profession ATTORNEY		d. Comments	
				c. Employer's Name/Specific Field		e. Election Sum to Date \$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	SB5650	Check		08/18/2022	\$ 150.00		
☐					\$		
☐					\$		
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) WILLIAM W. BROADAWAY 1903 E. WALNUT STREET GOLDSBORO, NC 27530 (919) 580-0924				b. Job Title/Profession RETIRED		d. Comments	
				c. Employer's Name/Specific Field RETIRED		e. Election Sum to Date \$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	SB5650	Check		08/17/2022	\$ 250.00		
☐					\$		
☐					\$		
4. Total only this Page						\$ 650.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 25,834.41	

Contributions from Individuals

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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. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
TOM BROWN 306 S CLAIBORNE STREET GOLDSBORO, NC 27530 (919) 920-1317				RETIRED ATTORNEY			
				c. Employer's Name/Specific Field			
				RETIRED		e. Election Sum to Date	
						\$ 750.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Check		08/17/2022		\$ 500.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
RICHARD T. & KAY F. COOKE 205 CASHWELL DRIVE GOLDSBORO, NC 27534 (919) 731-2839				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED		e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Check		08/17/2022		\$ 100.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
GLORIA CRUMPLER P.O. BOX 847 528 STONEY CREEK CHURCH ROAD GOLDSBORO, NC 27530 (919) 734-1313				HEALTH CARE WORKER			
				c. Employer's Name/Specific Field			
				CHERRY HOSPITAL		e. Election Sum to Date	
						\$ 400.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Check		08/17/2022		\$ 100.00	
☐						\$	
☐						\$	
4. Total only this Page						\$ 700.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 25,834.41	

Contributions from Individuals

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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. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
JOHN WOODWARD DEES 707 E MULBERRY STREET GOLDSBORO, NC 27530 (919) 735-8311			ATTORNEY			
			c. Employer's Name/Specific Field			
			DEES, SMITH, POWELL, JARR ETT, DEES & JONES, LLP			
					e. Election Sum to Date	
					\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SB5650	Check		08/05/2022	\$ 250.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
DONALD W. & KAYE G. FAIRCLOTH 1684 ROSEWOOD ROAD GOLDSBORO, NC 27530 (919) 736-3835			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED			
					e. Election Sum to Date	
					\$ 75.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SB5650	Check		08/17/2022	\$ 75.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
JIMMIE E. & PRISCILLA S. FORD 111 HOMESTEAD DR GOLDSBORO, NC 27530			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED			
					e. Election Sum to Date	
					\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SB5650	Check		08/17/2022	\$ 250.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 575.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 25,834.41	

Contributions from Individuals

Amendment
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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) COMMITTEE TO ELECT ROBIN RADFORD						2. ID Number HK1923	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) E THOMAS FRANKLIN JR 705 BEECH STREET GOLDSBORO, NC 27530 (919) 736-0478				b. Job Title/Profession RETIRED		d. Comments	
				c. Employer's Name/Specific Field RETIRED		e. Election Sum to Date \$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Check		08/12/2022		\$ 150.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) J CHRISTOPHER GARRISON 1604 E MULBERRY STREET GOLDSBORO, NC 27530 (919) 734-9865				b. Job Title/Profession Member/Manager		d. Comments	
				c. Employer's Name/Specific Field JC Garrison & Assoc.		e. Election Sum to Date \$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Check		08/17/2022		\$ 100.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) JUDY & JERRY GOODMAN 402 AIRLE PLACE GOLDSBORO, NC 27530 (919) 222-5286				b. Job Title/Profession RETIRED		d. Comments	
				c. Employer's Name/Specific Field RETIRED		e. Election Sum to Date \$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Check		08/25/2022		\$ 100.00	
☐						\$	
☐						\$	
4. Total only this Page						\$ 350.00	
5. Total of ALL CRO 1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 25,834.41	

Contributions from Individuals

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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. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
BRENDA GRANTHAM 3062 OLD GRANTHAM ROAD GOLDSBORO, NC 27530 (919) 689-2175				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
						e. Election Sum to Date	
						\$ 350.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Check		08/17/2022		\$ 150.00	
☐	SB5650	Check		10/21/2022		\$ 200.00	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
MARK J. & CHARLOTTE D. HALE JR 429 DOGWOOD TRAIL GOLDSBORO, NC 27534 (919) 735-7275				ATTORNEY			
				c. Employer's Name/Specific Field			
				BADDOUR, PARKER, HINE & HALE, PC			
						e. Election Sum to Date	
						\$ 1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Check		08/17/2022		\$ 1,000.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
GREGORY & JACKIE A. HARE 1145 PIKEVILLE PRINCETON ROAD PIKEVILLE, NC 27863				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
						e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Check		08/12/2022		\$ 100.00	
☐						\$	
☐						\$	
4. Total only this Page						\$ 1,450.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 25,834.41	

Contributions from Individuals

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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. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
REX W HARRIS P.O. BOX 328 GOLDSBORO, NC 27533 (919) 734-4330				INSURANCE AGENT		
				c. Employer's Name/Specific Field		
				HARRIS INSURANCE AGENCY		e. Election Sum to Date
						\$ 100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SB5650	Check		09/28/2022	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
SARAH L HEEKIN 114 PINERIDGE LN GOLDSBORO, NC 27534				ATTORNEY		
				c. Employer's Name/Specific Field		
						e. Election Sum to Date
						\$ 500.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SB5650	Check		08/17/2022	\$ 500.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
LINDA HOLLIS 167 BERTIE PIERCE ROAD PIKEVILLE, NC 27863 (919) 242-4134				INSURANCE		
				c. Employer's Name/Specific Field		
				THE INSURANCE MARKET		e. Election Sum to Date
						\$ 100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SB5650	Check		07/12/2022	\$ 100.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 700.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 25,834.41	

Contributions from Individuals

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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. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments
VICKI L. & N. BRUCE HOWELL 118 OAK HEIGHTS RD GOLDSBORO, NC 27530			FARMER		
			c. Employer's Name/Specific Field		
			HOWELL FARMS, INC.		
					e. Election Sum to Date
					\$ 500.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	SB5650	Check		09/30/2022	\$ 500.00
☐					\$
☐					\$
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments
B GEOFFREY & LEE E HULSE 1513 E MULBERRY STREET GOLDSBORO, NC 27530 (919) 273-1765			ATTORNEY		
			c. Employer's Name/Specific Field		
			HAITHCOCK, BARFIELD, HULSE & KING		
					e. Election Sum to Date
					\$ 450.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	SB5650	Check		08/12/2022	\$ 250.00
☐					\$
☐					\$
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments
NINA F. & KEITH A. JACKSON 301 E. APRIL LANE GOLDSBORO, NC 27530 (919) 920-0220			ATTORNEY		
			c. Employer's Name/Specific Field		
			NINA FIELDS JACKSON, ATTORNEY AT LAW		
					e. Election Sum to Date
					\$ 723.41
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	SB5650	Check		08/05/2022	\$ 500.00
☐	SB5650	In-Kind	FOOD FOR RECEPTION ON 8/16/2022	08/16/2022	\$ 223.41
☐					\$
4. Total only this Page					\$ 1,473.41
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 25,834.41

Contributions from Individuals

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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. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
TOMMY W JARRETT 1607 EVERGREEN AVENUE GOLDSBORO, NC 27530 (919) 735-8377				ATTORNEY			
				c. Employer's Name/Specific Field			
				DEES, SMITH, POWELL, JARRETT, DEES & JONES, LLP			
						e. Election Sum to Date	
						\$ 1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Check		08/10/2022		\$ 750.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
LINDA K JORDAN 1104 E MULBERRY ST GOLDSBORO, NC 27530-5118 (919) 738-0254				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
						e. Election Sum to Date	
						\$ 800.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Cash		08/17/2022		\$ 50.00	
☐	SB5650	Check		10/06/2022		\$ 250.00	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JOYCE ANN KELLER 710 PARK AVENUE GOLDSBORO, NC 27530				RETIRED ATTORNEY			
				c. Employer's Name/Specific Field			
				RETIRED			
						e. Election Sum to Date	
						\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Check		08/18/2022		\$ 150.00	
☐						\$	
☐						\$	
4. Total only this Page						\$ 1,200.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 25,834.41	

Contributions from Individuals

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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. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
M. BRYAN & ELIZABETH M. KING 204 WESTBROOK CHURCH ROAD MOUNT OLIVE, NC 28365 (919) 735-6420				ATTORNEY		
				c. Employer's Name/Specific Field		e. Election Sum to Date
				HAITHCOCK, BARFIELD, HULSE & KING, PLLC		
						\$ 1,000.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SB5650	Check		08/17/2022	\$ 1,000.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
RANDY Q KING P.O. BOX 302 MOUNT OLIVE, NC 28365 (919) 223-3303				RETIRED		
				c. Employer's Name/Specific Field		e. Election Sum to Date
				RETIRED		
						\$ 100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SB5650	Check		10/21/2022	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
REBECCA B KINSEY 104 HILDALE LN GOLDSBORO, NC 27534 (919) 734-8911				ATTORNEY		
				c. Employer's Name/Specific Field		e. Election Sum to Date
						\$ 200.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SB5650	Check		08/19/2022	\$ 100.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 1,200.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 25,834.41	

Contributions from Individuals

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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						HK 1913	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
BARBARA KORNEGAY 118 WHITLEY STREET MOUNT OLIVE, NC 28365 (919) 738-0962				ADMINISTRATOR			
				c. Employer's Name/Specific Field			
				MOUNT OLIVE COLLEGE			
						e. Election Sum to Date	
						\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Check		08/17/2022		\$ 500.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
DEBBIE GREEN LASSITER 386 TURNER SWAMP ROAD FREMONT, NC 27830				MANAGER			
				c. Employer's Name/Specific Field			
				GREEN'S AUTO SALVAGE INC			
						e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Check		10/07/2022		\$ 100.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
MARK D. & LAUREN R. METZLER 376 W. TOMMYS ROAD GOLDSBORO, NC 27530 (919) 242-8256				VICE PRESIDENT			
				c. Employer's Name/Specific Field			
				LANDSCAPE DESIGN			
						e. Election Sum to Date	
						\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Check		09/06/2022		\$ 500.00	
☐						\$	
☐						\$	
4. Total only this Page						\$ 1,100.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 25,834.41	

Contributions from Individuals

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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. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
AMANDA MINSHIEW 307 FRIENDSWOOD DRIVE GOLDSBORO, NC 27530 (909) 709-9023				TEACHER		
				c. Employer's Name/Specific Field		
				WAYNE COUNTY PUBLIC SCHOOLS		
				e. Election Sum to Date		
				\$ 250.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SB5650	Check		08/19/2022	\$ 250.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
KENNY L. & PAMELA B. MINSHIEW 300 PRINCETON ROAD PRINCETON, NC 27569 (919) 738-1087				RETIRED		
				c. Employer's Name/Specific Field		
				RETIRED		
				e. Election Sum to Date		
				\$ 250.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SB5650	Check		08/17/2022	\$ 250.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
LOIS J MOORING 2141 NC 111 HWY N GOLDSBORO, NC 27534-9001 (919) 738-5139				RETIRED		
				c. Employer's Name/Specific Field		
				RETIRED		
				e. Election Sum to Date		
				\$ 490.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SB5650	Cash		08/17/2022	\$ 40.00	
☐	SB5650	Check		10/06/2022	\$ 250.00	
☐					\$	
4. Total only this Page					\$ 790.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 25,834.41	

Contributions from Individuals

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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) COMMITTEE TO ELECT ROBIN RADFORD						2. ID Number HK 1923	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) PAUL L. & PATRICIA W. NUNN 606 LAKE SHORE DRIVE GOLDSBORO, NC 27534 (919) 778-1000				b. Job Title/Profession ACCOUNTANT		d. Comments	
				c. Employer's Name/Specific Field NUNN, BRASHEAR & UZZELL, PA		e. Election Sum to Date \$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Check		08/17/2022		\$ 250.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) GLENN ODOM 310 TADLOCK RD MOUNT OLIVE, NC 28365 (919) 738-8517				b. Job Title/Profession RETIRED		d. Comments	
				c. Employer's Name/Specific Field RETIRED		e. Election Sum to Date \$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Check		09/15/2022		\$ 100.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) WORTH OVERMAN JR 1606 NAHUNTA ROAD PIKEVILLE, NC 27863				b. Job Title/Profession FUNERAL ASST		d. Comments	
				c. Employer's Name/Specific Field SEYMOUR FUNERAL HOME AND CREMATION SERVICE INC.		e. Election Sum to Date \$ 400.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Check		09/28/2022		\$ 400.00	
☐						\$	
☐						\$	
4. Total only this Page						\$ 750.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 25,834.41	

Contributions from Individuals

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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) COMMITTEE TO ELECT ROBIN RADFORD					2. ID Number HK1923	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
RANDY PARRISH 161 PERKINS ROAD GOLDSBORO, NC 27530				RETIRED		
				c. Employer's Name/Specific Field RETIRED		
				e. Election Sum to Date \$ 300.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SB5650	Check		08/10/2022	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
RITA W. & RICHARD A. PATE 136 JEFFREY DRIVE LAGRANGE, NC 28551 (919) 738-9701				RETIRED		
				c. Employer's Name/Specific Field RETIRED		
				e. Election Sum to Date \$ 100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SB5650	Check		09/01/2022	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
HELEN & LESLIE POTTS 116 TREY DRIVE GOLDSBORO, NC 27530 (919) 735-7255				RETIRED		
				c. Employer's Name/Specific Field RETIRED		
				e. Election Sum to Date \$ 100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SB5650	Check		09/15/2022	\$ 100.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 300.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 25,834.41	

Contributions from Individuals

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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. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
RICHARD S. & JAY M. PROCTOR 144 HOOD DRIVE GOLDSBORO, NC 27530 (919) 920-5769				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
						e. Election Sum to Date	
						\$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Check		08/17/2022		\$ 150.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
DANIEL A RADFORD 3840 NAHUNTA ROAD PIKEVILLE, NC 27863 (919) 222-4782				DEVELOPMENT ASSISTANT			
				c. Employer's Name/Specific Field			
				NC STATE UNIVERSITY			
						e. Election Sum to Date	
						\$ 275.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Check		09/01/2022		\$ 275.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
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	
						\$ 265.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	In-Kind	PROFESSIONAL HEADSHOTS FOR	08/26/2022		\$ 265.00	
☐						\$	
☐						\$	
4. Total only this Page						\$ 690.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 25,834.41	

Contributions from Individuals

Pg 18 of 23

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. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
GREGORY T. RILEY 1230 N NC 581 HWY PIKEVILLE, NC 27863			ATTORNEY			
			c. Employer's Name/Specific Field			
			AQUITY SOLUTIONS, LLC			
					e. Election Sum to Date	
					\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SB5650	Check		08/12/2022	\$ 500.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
JOANNE J ROBERTS 2903 MCCLAIN STREET GOLDSBORO, NC 27530 (919) 778-2921			OWNER/REALTOR			
			c. Employer's Name/Specific Field			
			PRIDE HOUSE REALTY			
					e. Election Sum to Date	
					\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SB5650	Check		08/17/2022	\$ 250.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
CHARLES & HANNAH W. ROUSE 228 RIDGEWOOD DRIVE GOLDSBORO, NC 27534 (919) 735-7306			MATH INSTRUCTOR			
			c. Employer's Name/Specific Field			
			WAYNE COMMUNITY COLLEGE			
					e. Election Sum to Date	
					\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SB5650	Check		08/17/2022	\$ 500.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 1,250.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 25,834.41	

Contributions from Individuals

Pg 19 of 23

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. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
DAVID M ROUSE P O BOX 1816 GOLDSBORO, NC 27533 (919) 736-2440			ATTORNEY			
			c. Employer's Name/Specific Field			
			ROUSE LAW OFFICE		e. Election Sum to Date	
				\$ 1,000.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SB5650	Check		09/15/2022	\$ 500.00	
☐	SB5650	Check		10/19/2022	\$ 200.00	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
HENRY C. & KIMBERLY R. SMITH 126 PINERIDGE LANE GOLDSBORO, NC 27534 (919) 734-1841			ATTORNEY			
			c. Employer's Name/Specific Field			
			WARREN, KERR, WALSTON, TAYLOR & SMITH, LLP		e. Election Sum to Date	
				\$ 500.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SB5650	Check		08/17/2022	\$ 500.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
J MARSHALL SMITH P O BOX 1057 GOLDSBORO, NC 27530 (919) 778-5531			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
				\$ 100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SB5650	Check		09/06/2022	\$ 100.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 1,300.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 25,834.41	

Contributions from Individuals

Pg 20 of 23

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. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
J. HARDY & KIMBERLY SULLIVAN JR 114 NEAL DRIVE GOLDSBORO, NC 27530 (919) 734-3773			RETIRED			
			c. Employer's Name/Specific Field			
			WAYNE COUNTY PUBLIC SCHOOLS		e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SB5650	Check		07/21/2022	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
STEVEN G. & CYNTHIA SURRATT 1191 KINGSMILL COURT SUNSET BEACH, NC 28468			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SB5650	Check		08/10/2022	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
DAVID T. & DENISE G. TAYLOE JR 1406 E MULBERRY ST GOLDSBORO, NC 27530 (919) 735-2552			PEDIATRICIAN			
			c. Employer's Name/Specific Field			
			GOLDSBORO PEDIATRICS		e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SB5650	Check		08/30/2022	\$ 100.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 300.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 25,834.41	

Contributions from Individuals

Pg 21 of 23

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. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
L.E. & RHONDA TAYLOR 107 LONG LEAF LN GOLDSBORO, NC 27534 (919) 734-1841				ATTORNEY			
				c. Employer's Name/Specific Field			
				WARREN, KERR, WALSTON, TAYLOR & SMITH, LLP			
						e. Election Sum to Date	
						\$ 1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Check		08/17/2022		\$ 1,000.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JIMMY R. & JUDY D. VERNON 624 ROSEWOOD ROAD GOLDSBORO, NC 27530				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
						e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Check		09/01/2022		\$ 100.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JOHN TURNER & JANE BOWMAN WALSTON 2503 PINENEEDLES RD GOLDSBORO, NC 27534				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
						e. Election Sum to Date	
						\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Check		08/17/2022		\$ 500.00	
☐						\$	
☐						\$	
4. Total only this Page						\$ 1,600.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 25,834.41	

Contributions from Individuals

Pg 22 of 23

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) COMMITTEE TO ELECT ROBIN RADFORD						2. ID Number HK 1923	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
RONALD E WATERS 165 PERKINS ROAD GOLDSBORO, NC 27530				FARMER			
				c. Employer's Name/Specific Field			
				RONALD E WATERS FARMS			
						e. Election Sum to Date	
						\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Check		09/28/2022		\$ 200.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
H. H. WEAVER P.O. BOX 10186 GOLDSBORO, NC 27532 (919) 731-2409				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
						e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Check		08/17/2022		\$ 100.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
DAVID & EMILY WEIL P.O. BOX 2063 GOLDSBORO, NC 27530				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
						e. Election Sum to Date	
						\$ 1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	SB5650	Check		08/17/2022		\$ 500.00	
☐	SB5650	Check		08/19/2022		\$ 500.00	
☐						\$	
4. Total only this Page						\$ 1,300.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 25,834.41	

Contributions from Individuals

Pg 23 of 23

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					HK 1923	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
L.R. & GLENDA WELLS 100 KELWAY DRIVE GOLDSBORO, NC 27530 (919) 734-8814			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SB5650	Check		09/01/2022	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
ABBIE I WILLIAMS 142 CREST DRIVE MOUNT OLIVE, NC 28365 (919) 722-6200			ASST DISTRICT ATTY			
			c. Employer's Name/Specific Field			
			WAYNE COUNTY DISTRICT ATTORNEY'S OFFICE			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SB5650	Check		10/06/2022	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
JAMES D. & MARGARET M. WOMBLE JR 207 CASHWELL DRIVE GOLDSBORO, NC 27534			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED			
					e. Election Sum to Date	
					\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	SB5650	Check		08/17/2022	\$ 500.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 700.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 25,834.41	

Contributions from Other Political Committees Pg 1 of 1 Amendment ☐ Yes ☒ No

Use this form to report contributions from other candidate, referendum or PAC committees

1. Committee Full Name (and Fund if applicable)			2. ID Number	
COMMITTEE TO ELECT ROBIN RADFORD			HK1923	
3. Contributor Information ☐ Add ☐ Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee		d. Comments
PIERCE FOR SHERIFF PO BOX 10528 GOLDSBORO, NC 27532 (919) 222-5657		☒ Candidate ☐ PAC		
		☐ Referendum		
		c. Level Registered (Specify)		
		☐ Federal ☒ County:		e. Election Sum to Date
		☐ State ☐ Municipality:		
		Wayne		\$ 500.00
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
SB5650	Check		08/19/2022	\$ 500.00
				\$
				\$
4. Total only this Page				\$ 500.00
5. Total of ALL CRO-1230 Pages (This line must be on line 8 of Detailed Summary Page CRO-1100)				\$ 500.00

CRO-1230

NC State Board of Elections

April 2007

Other Receipt Sources

Amendment
Pg 1 of 1 ☐ Yes ☒ No

Use this form to report income not reported on another form, i.e. interest income, not for profit contributions etc.

1. Committee Full Name (and Fund if applicable)				2. ID Number	
COMMITTEE TO ELECT ROBIN RADFORD				H1K1923	
3. Type of Receipt Source <i>(Please use separate CRO-1250 forms for each type of Receipt Source.)</i>					
☐ Interest ☐ Contributions from Not-for-Profit Organizations ☒ Outside Sources of Income					
4. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #		d. Comments
WAYNE COUNTY DEMOCRATIC WOMEN 117 S CENTER ST GOLDSBORO, NC 27530			c. Outside Source Explanation		
			e. Election Sum to Date		
			\$		100.00
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
SB5650	Check		09/23/2022	\$ 100.00	
				\$	
4. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #		d. Comments
WAYNE COUNTY SENIOR DEMOCRATS P O BOX 11234 GOLDSBORO, NC 27534			c. Outside Source Explanation		
			e. Election Sum to Date		
			\$		300.00
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
SB5650	Check		07/20/2022	\$ 300.00	
				\$	
5. Total only this Page				\$ 400.00	
6. Total of ALL CRO-1250 Pages				\$ 400.00	
<i>(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest)</i> <i>(This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution)</i> <i>(This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)</i>					

CRO-1250

NC State Board of Elections

December 2007

Disbursements

Amendment
Pg 1 of 4 ☐ 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) COMMITTEE TO ELECT ROBIN RADFORD						2. ID Number HK1923	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
☒ 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	
ACCU COPY LLC 322 NORTH JOHN STREET GOLDSBORO, NC 27530 (919) 751-2400							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 74.73	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
SB5650	Check	B	08/29/2022	\$ 74.73	PRINTING BUSINESS		
				\$	CARDS		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
JASON M BLACKBURN 112 S JOHN STREET GOLDSBORO, NC 27530 (919) 734-8515							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 750.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
SB5650	Check	O	08/29/2022	\$ 750.00	RETURN CAMPAIGN		
				\$	CONTRIBUTION		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
GOOGLE, LLC 1600 AMPLI THEATRE PKWY MOUNTAIN VIEW, CA 94043							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 30.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
SB5650	Debit Card	A	08/07/2022	\$ 6.00	WORKSPACE ON		
SB5650	Debit Card	A	09/07/2022	\$ 6.00	RADFORD FOR WEBSITE/WORKSPACE		
					FOR RADFORD FOR		
5. Total only this Page						\$ 836.73	
6. Total of ALL CRO-1310 Pages							
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)							
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)							
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						\$ 22,558.46	
7. Purpose Codes (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							
*Codes require detailed explanation in required remarks field (k)							

Disbursements

Amendment
Pg 2 of 4 ☐ 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) COMMITTEE TO ELECT ROBIN RADFORD						2. ID Number HK1923	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i> ☒ 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) GOOGLE, LLC 1600 AMPHITHEATRE PKWY MOUNTAIN VIEW, CA 94043				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ 30.00	
f. Account Code SB5650	g. Form of Payment Debit Card	h. Purpose Code A	i. Date (mm/dd/yyyy) 10/07/2022	j. Amount \$ 6.00	k. Required Remarks WEBSITE/WORKSPACE FOR RADFORD FOR		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) LIMELIGHT INK P O BOX 496 GOLDSBORO, NC 27533 (919) 922-2449				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ 795.29	
f. Account Code SB5650	g. Form of Payment Check	h. Purpose Code A	i. Date (mm/dd/yyyy) 08/31/2022	j. Amount \$ 258.34	k. Required Remarks ADVERTISING - T-SHIRTS		
f. Account Code SB5650	g. Form of Payment Check	h. Purpose Code A	i. Date (mm/dd/yyyy) 09/29/2022	j. Amount \$ 269.01	k. Required Remarks ADVERTISING - T-SHIRTS		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) MADELINE CRONE CREATIVE 509 N EAST STREET RALEIGH, NC 27604 (919) 946-5791				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ 13,629.74	
f. Account Code SB5650	g. Form of Payment Check	h. Purpose Code A	i. Date (mm/dd/yyyy) 09/27/2022	j. Amount \$ 13,629.74	k. Required Remarks ADVERTISING & CAMPAIGN PROMOTION		
5. Total only this Page					\$ 14,163.09		
6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)					\$ 22,558.46		
7. Purpose Codes (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							
* Codes require detailed explanation in required remarks field (k)							

Disbursements

Amendment
Pg 3 of 4 ☐ 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) COMMITTEE TO ELECT ROBIN RADFORD						2. ID Number HK1923	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i> ☒ 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) MEDIA PUBLISHING, LLC (THE BUZZ) 122 S BERKELEY BLVD SUITE 3 GOLDSBORO, NC 27534 (919) 273-0488				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 440.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
SB5650	Check	A	07/21/2022	\$ 60.00	POLITICAL AD IN THE		
SB5650	Check	A	08/20/2022	\$ 60.00	BUZZ FOR AUGUST POLITICAL AD IN THE		

BUZZ FOR SEPTEMBER

4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) MEDIA PUBLISHING, LLC (THE BUZZ) 122 S BERKELEY BLVD SUITE 3 GOLDSBORO, NC 27534 (919) 273-0488				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 440.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
SB5650	Check	A	09/21/2022	\$ 160.00	POLITICAL AD IN THE		
SB5650	Check	A	10/19/2022	\$ 160.00	BUZZ FOR OCTOBER POLITICAL AD IN THE		

BUZZ FOR NOVEMBER

4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) PATRIOT OUTDOOR, INC. P O BOX 1433 KINSTON, NC 28503 (252) 521-7666				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 2,240.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
SB5650	Check	A	08/21/2022	\$ 2,240.00	BILLBOARD		
				\$	ADVERTISING		

5. Total only this Page					\$ 2,680.00		
6. Total of ALL CRO-1310 Pages <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>					\$ 22,558.46		

7. Purpose Codes <i>(List detailed expenditure code in (h) above)</i>							
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 (k)							

Disbursements

Amendment
Pg 4 of 4 ☐ 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) COMMITTEE TO ELECT ROBIN RADFORD						2. ID Number HK1923	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
☒ 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) POLITICAL LAWN SIGNS 916 BYRD AVENUE NEENAH, WI 54956 (888) 414-1776				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ 443.45	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
SB5650	Debit Card	A	09/26/2022	\$ 443.45	10 (32X48) SIGNS		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) AILEEN ROWE 913 E ELM STREET GOLDSBORO, NC 27530				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ 700.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
SB5650	Check	O	10/19/2022	\$ 700.00	POLL WORKER/EARLY		
				\$	VOTING 10/20-26, 10/30 -		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) SIGNS FROM THE FARM, INC. 373 VANN SMITH ROAD SEVEN SPRINGS, NC 28578 (919) 658-6190				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ 8,061.77	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
SB5650	Check	A	09/22/2022	\$ 1,585.24	300 18X24 SIGNS		
SB5650	Check	A	10/05/2022	\$ 2,149.95	4X8 SIGN, 2 (3X4) SIGNS, 300 (18X24) SIGNS		
5. Total only this Page						\$ 4,878.64	
6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						\$ 22,558.46	
7. Purpose Codes (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							
* Codes require detailed explanation in required remarks field (k)							

Aggregated Non-Media Expenditures

Page 1 of 1
Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable) COMMITTEE TO ELECT ROBIN RADFORD					2. ID Number HK 1923	
3. Payee Information						
a. Amend ☐ Add ☐ Remove	b. Account Code SB5650	c. Form of Payment Draft	d. Purpose Code ()	e. Date (mm/dd/yyyy) 08/19/2022	f. Amount \$ 10.00	g. Required Remarks CHARGE BACK FEE
4. Total only this Page					\$ 10.00	
5. Total of ALL CRO-1315 Pages (This line must be on line 14 of Detailed Summary Page CRO-1100)					\$ 10.00	
6. Purpose Codes (List detailed expenditure code in (d) above)						
B* - Printing		C* - Fundraising		D - To Another Candidate		
E - Salaries		F* - Equipment		G - Political Party		
I - Postage		J - Penalties		H* - Holding Public Office Expenses		
O* - Other		K* - Office Expenses		Q* - Donations to Legal Expense Fund		
* Codes require detailed explanation in required remarks field (g)						

CRO-1315

NC State Board of Elections

December 2009

In-Kind Contributions

Pg 1 of 1 Amendment ☐ 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 Full Name (and Fund if applicable)		2. ID Number	
COMMITTEE TO ELECT ROBIN RADFORD		HK 1923	
3. Contributor Information ☐ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
SHELBY & NEAL BENTON 608 MILL ROAD GOLDSBORO, NC 27534 (919) 738-7802		☒ Individual	
		☐ Candidate	
		☐ Party	
		☐ PAC	
		☐ Referendum	
		☐ Other Receipt Source	
		d. Election Sum to Date	
		\$ 3,456.00	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
ADVERTISING/CAMPAIGN PROMOTION TO CAMPAIGN CONNECTIONS - CHECK #5071		07/01/2022	\$ 3,000.00
STAMPS, ENVELOPES, FOOD AND PAPER PRODUCTS FOR FUNDRAISER		08/16/2022	\$ 456.00
			\$
3. Contributor Information ☐ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
NINA F. & KEITH A. JACKSON 301 E. APRIL LANE GOLDSBORO, NC 27530 (919) 920-0220		☒ Individual	
		☐ Candidate	
		☐ Party	
		☐ PAC	
		☐ Referendum	
		☐ Other Receipt Source	
		d. Election Sum to Date	
		\$ 723.41	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
FOOD FOR RECEPTION ON 8/16/2022		08/16/2022	\$ 223.41
			\$
			\$
3. Contributor Information ☐ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
ROBIN RADFORD 3840 NAHUNTA ROAD PIKEVILLE, NC 27863		☒ Individual	
		☐ Candidate	
		☐ Party	
		☐ PAC	
		☐ Referendum	
		☐ Other Receipt Source	
		d. Election Sum to Date	
		\$ 265.00	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
PROFESSIONAL HEADSHOTS FOR ADVERTISING & STAMPS		08/26/2022	\$ 265.00
			\$
			\$
4. Total only this Page		\$ 3,944.41	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 3,944.41	

Outstanding Loans

Pg 1 of 1

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	
COMMITTEE TO ELECT ROBIN RADFORD		HK1923	
3. Lender Information ☐ Add ☐ Remove			
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	e. Start Date (mm/dd/yyyy)
		STATE OF NC	12/06/2021
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$ 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 CRO-1430 Pages (This line must be on line 21 of Detailed Summary Page CRO-1100)			\$ 1,000.00

CRO-1430

NC State Board of Elections

December 2007