

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		c. ID Number	
a. Full Name		COMMITTEE TO ELECT TINA ARNDER REGISTER OF DEEDS	9K186R
b. Mailing Address (include City, State and Zip Code)		d. Date Filed	
102 RACOON PL PIKEVILLE, NC 27863		02/20/2024	
		e. Phone Number	
		(919) 252-2288	

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name	
2024	01/01/2024	02/17/2024	MALORIE TARANGO	
6. Type of Committee (Check One)		9. Type of Report	<i>(check only one type of report from one category)</i>	
<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 <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	State/County <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input checked="" 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	Referendum
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		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 RECEIPTS & DISBURSEMENTS	1	RECEIVED WCBOE	
	d. Period Begin Balance	FEB 21 2024	d. Period Begin Balance
	\$ 100.00		\$

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

Malorie Tarango
Printed Name of Signer

Malorie Tarango
Signature of Appointed Treasurer

02/20/2024

Date

FOR OFFICE USE ONLY

Date Received:	2/21/24	Employee:	181	Delivery Method
Date Postmarked:		Employee:		<input type="checkbox"/> Normal Mail
Date Scanned:		Employee:		<input type="checkbox"/> Registered Mail
Date Data Entered:		Employee:		<input checked="" type="checkbox"/> Hand Delivered
				<input type="checkbox"/> Electronically Filed
				<input type="checkbox"/> Signer has not received mandatory training

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

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 TINA ARNDER REGISTER OF DEEDS	2024 First Quarter	9K186R	
Start of Election Cycle: January 1, 2023		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 100.00	\$ 0.00
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 0.00	\$ 0.00
6) Contributions from Individuals	(CRO-1210)	\$ 1,000.00	\$ 1,100.00
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)	\$ 0.00	\$ 668.18
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$ 0.00	\$ 0.00
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0.00	\$ 0.00
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$ 0.00	\$ 0.00
11c) Outside Sources of Income	(CRO-1250)	\$ 0.00	\$ 0.00
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$ 0.00	\$ 0.00
11e) Exempt Purchase Price Sales	(CRO-1265)	\$ 0.00	\$ 0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		\$ 1,000.00	\$ 1,768.18
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 101.13	\$ 769.31
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)	\$ 0.00	\$ 0.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 101.13	\$ 769.31
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 998.87	\$ 998.87
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 668.18	
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 Yes No

Amendment
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 TINA ARNDER REGISTER OF DEEDS				2. ID Number <i>9K186R</i>							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Job Title/Profession NO JOB TITLE/RETIRED</td> <td>d. Comments</td> </tr> <tr> <td>LINDA JORDAN 1104 E MULBERRY ST GOLDSBORO, NC 27530 919-738-0254</td> <td>c. Employer's Name/Specific Field NOT EMPLOYED/RETIRED</td> <td>e. Election Sum to Date \$ 500.00</td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession NO JOB TITLE/RETIRED	d. Comments	LINDA JORDAN 1104 E MULBERRY ST GOLDSBORO, NC 27530 919-738-0254	c. Employer's Name/Specific Field NOT EMPLOYED/RETIRED	e. Election Sum to Date \$ 500.00
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LINDA JORDAN 1104 E MULBERRY ST GOLDSBORO, NC 27530 919-738-0254	c. Employer's Name/Specific Field NOT EMPLOYED/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						
<input type="checkbox"/>	1	Check		02/01/2024	\$ 500.00						
<input type="checkbox"/>					\$						
<input type="checkbox"/>					\$						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Job Title/Profession NO JOB TITLE/RETIRED</td> <td>d. Comments</td> </tr> <tr> <td>LOIS MOORING 2141 NC 111 N GOLDSBORO, NC 27534 (919) 738-5139</td> <td>c. Employer's Name/Specific Field NOT EMPLOYED/RETIRED</td> <td>e. Election Sum to Date \$ 500.00</td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession NO JOB TITLE/RETIRED	d. Comments	LOIS MOORING 2141 NC 111 N GOLDSBORO, NC 27534 (919) 738-5139	c. Employer's Name/Specific Field NOT EMPLOYED/RETIRED	e. Election Sum to Date \$ 500.00
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LOIS MOORING 2141 NC 111 N GOLDSBORO, NC 27534 (919) 738-5139	c. Employer's Name/Specific Field NOT EMPLOYED/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						
<input type="checkbox"/>	1	Check		02/01/2024	\$ 400.00						
<input type="checkbox"/>					\$						
<input type="checkbox"/>					\$						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td>b. Job Title/Profession LAWYER</td> <td>d. Comments</td> </tr> <tr> <td>DAVID ROUSE PO BOX 1816 GOLDSBORO, NC 27533</td> <td>c. Employer's Name/Specific Field SELF-EMPLOYED</td> <td>e. Election Sum to Date \$ 100.00</td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession LAWYER	d. Comments	DAVID ROUSE PO BOX 1816 GOLDSBORO, NC 27533	c. Employer's Name/Specific Field SELF-EMPLOYED	e. Election Sum to Date \$ 100.00
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession LAWYER	d. Comments									
DAVID ROUSE PO BOX 1816 GOLDSBORO, NC 27533	c. Employer's Name/Specific Field SELF-EMPLOYED	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						
<input type="checkbox"/>	1	Check		01/19/2024	\$ 100.00						
<input type="checkbox"/>					\$						
<input type="checkbox"/>					\$						
4. Total only this Page					\$ 1,000.00						
5. Total of All CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 1,000.00						

Disbursements

Amendment
Pg 1 of 1 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 TINA ARNDER REGISTER OF DEEDS		2. ID Number <i>9K186R</i>																			
3. Type of Disbursement <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																					
4. Payee Information <table border="1"><tr><td colspan="2">a. Full Name, Mailing Address & Phone (include city, state, & zip) DELUXE 801 S MARQUETTE AVE MINNEAPOLIS, MN 55402</td><td>b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:</td><td>d. Comments e. Election Sum to Date \$ 101.13</td></tr></table>			a. Full Name, Mailing Address & Phone (include city, state, & zip) DELUXE 801 S MARQUETTE AVE MINNEAPOLIS, MN 55402		b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	d. Comments e. Election Sum to Date \$ 101.13															
a. Full Name, Mailing Address & Phone (include city, state, & zip) DELUXE 801 S MARQUETTE AVE MINNEAPOLIS, MN 55402		b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	d. Comments e. Election Sum to Date \$ 101.13																		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks																
1	Debit <i>acct.</i>	K	02/02/2024	\$ 101.13	CHECKS																
				\$																	
5. Total only this Page				\$	101.13																
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>				\$	101.13																
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i> <table><tr><td>A* - Media</td><td>B* - Printing</td><td>C* - Fundraising</td><td>D - To Another Candidate</td></tr><tr><td>E - Salaries</td><td>F* - Equipment</td><td>G - Political Party</td><td>H* - Holding Public Office Expenses</td></tr><tr><td>I - Postage</td><td>J - Penalties</td><td>K* - Office Expenses</td><td>Q* - Donation to Legal Expense Fund</td></tr><tr><td>O* Other</td><td></td><td></td><td></td></tr></table> * Codes require detailed explanation in required remarks field (k)						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			
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																					

Outstanding Loans

Pg 1 of 1 Yes No

Amendment

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) COMMITTEE TO ELECT TINA ARNDER REGISTER OF DEEDS		2. ID Number 9K186R	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip) TINA ARNDER 102 RACOON PL PIKEVILLE, NC 27863 (919) 252-2288		b. Job Title/Profession ASST ESTIMATOR	d. Comments
		c. Employer's Name/Specific Field LANDSCAPE DESIGN OF GOLDSBORO	e. Start Date (mm/dd/yyyy) 12/07/2023
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$ 668.18	\$ 668.18
k. Full Name of Lending Institution			
l. Loan Number			
4. Total only this Page \$ 668.18			
5. Total of ALL CRO-1430 Pages \$ 668.18 <i>(This line must be on line 21 of Detailed Summary Page CRO-1430)</i>			

CRO-1430

NC State Board of Elections

December 2007