

# 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.

<b>1. Committee Information</b>					
a. Full Name REELECT DAUGHTERY COMMITTEE		c. ID Number -8K1599--			
b. Mailing Address (include City, State and Zip Code) 125 OXFORD DRIVE GOLDSBORO, NC 27534		d. Date Filed 02/27/2024			
		e. Phone Number			
<b>2. Report Year</b> <b>3. Period Start Date (mm/dd/yy)</b> <b>4. Period End Date (mm/dd/yy)</b> <b>5. Treasurer Full Name</b>					
2024	01/01/2024	02/17/2024	MALORIE TARANGO		
<b>6. Type of Committee (Check One)</b>		<b>9. Type of Report</b> (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		<input type="checkbox"/> Municipal <input type="checkbox"/> State/County <input type="checkbox"/> Referendum <input type="checkbox"/> Organizational <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Quarterly <input type="checkbox"/> Pre-primary <input checked="" type="checkbox"/> First <input type="checkbox"/> Pre-election <input type="checkbox"/> Second <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Third <input type="checkbox"/> Semi-annual <input type="checkbox"/> Fourth <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 type="checkbox"/> Year End <input type="checkbox"/> Special <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	
<b>7. Type of Fund</b> (if applicable, check one)				<b>10. Special Report Name</b>	
<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:					
<b>8. Number of Fundraisers this Report</b> 0					
<b>3. Account Information</b>				<b>3. Account Information</b>	
a. Financial Institution Full Name FIRST BANK		a. Financial Institution Full Name RECEIVED WCBOE			
b. Purpose CHECKING ACCOUNT FOR COMMITTEE	c. Account Code 01	b. Purpose FEB 27 2024	c. Account Code BY		
d. Period Begin Balance \$ 3,005.65		d. Period Begin Balance \$			
<b>CERTIFICATION</b> 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					
<u>Malorie Tarango</u> Printed Name of Signer		<u>Malorie Tarango</u> Signature of Appointed Treasurer		02/27/2024 Date	
<b>FOR OFFICE USE ONLY</b>					
Date Received:	2/27/24	Employee:	AC	Delivery Method	<input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed
Date Postmarked:		Employee:		<input type="checkbox"/> Signer has not received mandatory training	
Date Scanned:		Employee:			
Date Data Entered:		Employee:			
<b>Please Note:</b> 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
REELECT DAUGHTERY COMMITTEE	2024 First Quarter	-8K1599-
Start of Election Cycle: January 1, 2023		Total this Reporting Period
4) Cash on Hand at Start		\$ 3,005.65 \$ 0.00
<b>RECEIPTS</b>		
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 50.00 \$ 50.00
6) Contributions from Individuals	(CRO-1210)	\$ 10,043.49 \$ 11,525.96
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)	\$ 10,000.00 \$ 15,000.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$ 0.00 \$ 0.00
11) Other Receipt Sources		
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0.00 \$ 0.00
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$ 0.00 \$ 0.00
11c) Outside Sources of Income	(CRO-1250)	\$ 0.00 \$ 0.00
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$ 0.00 \$ 0.00
11e) Exempt Purchase Price Sales	(CRO-1265)	\$ 0.00 \$ 0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 20,093.49 \$ 26,575.96
<b>EXPENDITURES</b>		
13) Disbursements		
13a) Operating Expenditures	(CRO-1310)	\$ 6,794.00 \$ 9,516.00
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)	\$ 49.65 \$ 72.00
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)	\$ 5,593.49 \$ 6,325.96
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 12,437.14 \$ 15,913.96
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 10,662.00 \$ 10,662.00
<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)	\$ 15,000.00
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**Page 1 of 1 Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b> REELECT DAUGHTERY COMMITTEE			<b>2. ID Number</b> -8K1599--		
<b>3. Contributor Information</b>					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		01/05/2024	\$ 50.00
<b>4. Total only this Page</b>				\$ \$50.00	
<b>5. Total of ALL CRO-1205 Pages</b> <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>				\$ \$50.00	

CRO-1205

NC State Board of Elections

April 2007

# Contributions from Individuals

Pg 1 of 9  Yes  No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>											
REELECT DAUGHTERY COMMITTEE				-8K1599--											
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td><b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, &amp; zip)</td> <td><b>b. Job Title/Profession</b></td> <td><b>d. Comments</b></td> </tr> <tr> <td>GENE BAKER 4783 US HWY 70 E GOLDSBORO, NC 27534</td> <td>NO JOB TITLE/RETIRED</td> <td rowspan="3" style="vertical-align: middle;"> <b>e. Election Sum to Date</b>   \$ 100.00 </td> </tr> <tr> <td></td> <td>c. Employer's Name/Specific Field</td> </tr> <tr> <td></td> <td>NOT EMPLOYED/RETIRED</td> </tr> </table>						<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>b. Job Title/Profession</b>	<b>d. Comments</b>	GENE BAKER 4783 US HWY 70 E GOLDSBORO, NC 27534	NO JOB TITLE/RETIRED	<b>e. Election Sum to Date</b>  \$ 100.00		c. Employer's Name/Specific Field		NOT EMPLOYED/RETIRED
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>b. Job Title/Profession</b>	<b>d. Comments</b>													
GENE BAKER 4783 US HWY 70 E GOLDSBORO, NC 27534	NO JOB TITLE/RETIRED	<b>e. Election Sum to Date</b>  \$ 100.00													
	c. Employer's Name/Specific Field														
	NOT EMPLOYED/RETIRED														
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>										
<input type="checkbox"/>	01	Check		01/25/2024	\$ 100.00										
<input type="checkbox"/>					\$										
<input type="checkbox"/>					\$										
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td><b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, &amp; zip)</td> <td><b>b. Job Title/Profession</b></td> <td><b>d. Comments</b></td> </tr> <tr> <td>JOHN R BELL IV 501 HOLLAND HILL DRIVE GOLDSBORO, NC 27530</td> <td>POLITICIAN</td> <td rowspan="3" style="vertical-align: middle;"> <b>e. Election Sum to Date</b>   \$ 250.00 </td> </tr> <tr> <td></td> <td>c. Employer's Name/Specific Field</td> </tr> <tr> <td></td> <td>NC HOUSE OF REPS</td> </tr> </table>						<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>b. Job Title/Profession</b>	<b>d. Comments</b>	JOHN R BELL IV 501 HOLLAND HILL DRIVE GOLDSBORO, NC 27530	POLITICIAN	<b>e. Election Sum to Date</b>  \$ 250.00		c. Employer's Name/Specific Field		NC HOUSE OF REPS
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>b. Job Title/Profession</b>	<b>d. Comments</b>													
JOHN R BELL IV 501 HOLLAND HILL DRIVE GOLDSBORO, NC 27530	POLITICIAN	<b>e. Election Sum to Date</b>  \$ 250.00													
	c. Employer's Name/Specific Field														
	NC HOUSE OF REPS														
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>										
<input type="checkbox"/>	01	Electric Funds Tran		01/04/2024	\$ 250.00										
<input type="checkbox"/>					\$										
<input type="checkbox"/>					\$										
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td><b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, &amp; zip)</td> <td><b>b. Job Title/Profession</b></td> <td><b>d. Comments</b></td> </tr> <tr> <td>NEAL BENTON SR 608 MILL RD GOLDSBORO, NC 27534</td> <td>NO JOB TITLE/RETIRED</td> <td rowspan="3" style="vertical-align: middle;"> <b>e. Election Sum to Date</b>   \$ 200.00 </td> </tr> <tr> <td></td> <td>c. Employer's Name/Specific Field</td> </tr> <tr> <td></td> <td>NOT EMPLOYED/RETIRED</td> </tr> </table>						<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>b. Job Title/Profession</b>	<b>d. Comments</b>	NEAL BENTON SR 608 MILL RD GOLDSBORO, NC 27534	NO JOB TITLE/RETIRED	<b>e. Election Sum to Date</b>  \$ 200.00		c. Employer's Name/Specific Field		NOT EMPLOYED/RETIRED
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>b. Job Title/Profession</b>	<b>d. Comments</b>													
NEAL BENTON SR 608 MILL RD GOLDSBORO, NC 27534	NO JOB TITLE/RETIRED	<b>e. Election Sum to Date</b>  \$ 200.00													
	c. Employer's Name/Specific Field														
	NOT EMPLOYED/RETIRED														
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>										
<input type="checkbox"/>	01	Check		01/05/2024	\$ 200.00										
<input type="checkbox"/>					\$										
<input type="checkbox"/>					\$										
<b>4. Total only this Page</b>					\$ 550.00										
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 10,043.49										

# Contributions from Individuals

Pg 2 of 9  Yes  No

Amendment

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>			
REELECT DAUGHTERY COMMITTEE		-8K1599--			
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b> EXECUTIVE CHAIRMAN	<b>d. Comments</b>	
WILLIAM H BRYAN 701 HILLCREST DRIVE MOUNT OLIVE, NC 28365			<b>c. Employer's Name/Specific Field</b> MT OLIVE PICKLE COMPANY, INC	<b>e. Election Sum to Date</b> \$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	01	Check		01/05/2024	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b> REAL ESTATE BROKER	<b>d. Comments</b>	
CHRISTOPHER COX 104 TWIN OAKS PLACE GOLDSBORO, NC 27530			<b>c. Employer's Name/Specific Field</b> Real Estate	<b>e. Election Sum to Date</b> \$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	01	Check		01/05/2024	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b> GENERAL CONTRACTOR	<b>d. Comments</b>	
CHARLES DANIELS PO BOX 10337 GOLDSBORO, NC 27532			<b>c. Employer's Name/Specific Field</b> DANIELS & DANIELS	<b>e. Election Sum to Date</b> \$ 250.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	01	Electric Funds Tran		01/19/2024	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>4. Total only this Page</b>					\$ 650.00
<b>5. Total of All CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 10,043.49

# Contributions from Individuals

Pg 3 of 9  Yes  No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
REELECT DAUGHTERY COMMITTEE				-8K1599--	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>	<b>d. Comments</b>	
KATE DANIELS 111 HILLCREST LN GOLDSBORO, NC 27534			MARKETING		
			<b>c. Employer's Name/Specific Field</b>		
			DANIELS & DANIELS		
<b>e. Election Sum to Date</b>					
\$ 200.00					
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	01	Electric Funds Tran		01/18/2024	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>	<b>d. Comments</b>	
JOE DAUGHTERY 125 OXFORD DRIVE GOLDSBORO, NC 27534			NO JOB TITLE/RETIRED		
			<b>c. Employer's Name/Specific Field</b>		
			NOT EMPLOYED/RETIRED		
<b>e. Election Sum to Date</b>					
\$ 20,875.96					
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	01	In-Kind	GRAVIS MARKETING FOR GOTV	01/01/2024	\$ 650.00
<input type="checkbox"/>	01	In-Kind	VOTTIV FOR VOTER CONTACT	01/03/2024	\$ 149.00
<input type="checkbox"/>	01	In-Kind	MAILCHIMP FOR GOTV	01/07/2024	\$ 100.00
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>	<b>d. Comments</b>	
JOE DAUGHTERY 125 OXFORD DRIVE GOLDSBORO, NC 27534			NO JOB TITLE/RETIRED		
			<b>c. Employer's Name/Specific Field</b>		
			NOT EMPLOYED/RETIRED		
<b>e. Election Sum to Date</b>					
\$ 20,875.96					
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	01	In-Kind	WEBSITE	01/12/2024	\$ 32.00
<input type="checkbox"/>	01	In-Kind	POLLMAKERS FOR GOTV CALLS	01/12/2024	\$ 647.50
<input type="checkbox"/>	01	In-Kind	FACEBOOK ADVERTISEMENT	01/18/2024	\$ 229.00
<b>4. Total only this Page</b>					\$ 2,007.50
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 10,043.49

# Contributions from Individuals

Pg 4 of 9  Yes  No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b> REELECT DAUGHTERY COMMITTEE	<b>2. ID Number</b> -8K1599--
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<b>3. Contributor Information</b>		<input type="checkbox"/> Add <input type="checkbox"/> Remove
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  JOE DAUGHTERY 125 OXFORD DRIVE GOLDSBORO, NC 27534	<b>b. Job Title/Profession</b> NO JOB TITLE/RETIRED	<b>d. Comments</b>
	<b>c. Employer's Name/Specific Field</b> NOT EMPLOYED/RETIRED	
		<b>e. Election Sum to Date</b> \$ 20,875.96

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	In-Kind	NEW OLD NORTH ADVERTISEMENT	01/18/2024	\$ 400.00
<input type="checkbox"/>	01	In-Kind	VOTTIV FOR TEXTING SERVICE	01/31/2024	\$ 500.00
<input type="checkbox"/>	01	In-Kind	VOTTIV FOR VOTER CONTACT	02/03/2024	\$ 149.00

<b>3. Contributor Information</b>		<input type="checkbox"/> Add <input type="checkbox"/> Remove
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  JOE DAUGHTERY 125 OXFORD DRIVE GOLDSBORO, NC 27534	<b>b. Job Title/Profession</b> NO JOB TITLE/RETIRED	<b>d. Comments</b>
	<b>c. Employer's Name/Specific Field</b> NOT EMPLOYED/RETIRED	
		<b>e. Election Sum to Date</b> \$ 20,875.96

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	In-Kind	FACEBOOK ADVERTISEMENT	02/12/2024	\$ 120.00
<input type="checkbox"/>	01	In-Kind	CAMPAIGNRED ADVERTISEMENT	02/12/2024	\$ 2,166.99
<input type="checkbox"/>					\$

<b>3. Contributor Information</b>		<input type="checkbox"/> Add <input type="checkbox"/> Remove
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  JOSEPH W DEMOCKO 120 BRISBAYNE CIRCLE LAGRANGE, NC 28551	<b>b. Job Title/Profession</b> CHIROPRACTOR	<b>d. Comments</b>
	<b>c. Employer's Name/Specific Field</b> DEMOCKO CHIROPRACTIC	
		<b>e. Election Sum to Date</b> \$ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	Check		01/28/2024	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>	\$ 3,585.99
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<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 10,043.49
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# Contributions from Individuals

Pg 5 of 9  Yes  No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b> REELECT DAUGHTERY COMMITTEE				<b>2. ID Number</b> -8K1599--							
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  VEN FAULK 104 JILL ST DUDLEY, NC 28333</td> <td><b>b. Job Title/Profession</b> FUNERAL DIRECTOR</td> <td><b>d. Comments</b></td> </tr> <tr> <td></td> <td><b>c. Employer's Name/Specific Field</b> SHUMATE FAULK FUNERAL HOME</td> <td><b>e. Election Sum to Date</b> \$ 450.00</td> </tr> </table>						<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  VEN FAULK 104 JILL ST DUDLEY, NC 28333	<b>b. Job Title/Profession</b> FUNERAL DIRECTOR	<b>d. Comments</b>		<b>c. Employer's Name/Specific Field</b> SHUMATE FAULK FUNERAL HOME	<b>e. Election Sum to Date</b> \$ 450.00
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  VEN FAULK 104 JILL ST DUDLEY, NC 28333	<b>b. Job Title/Profession</b> FUNERAL DIRECTOR	<b>d. Comments</b>									
	<b>c. Employer's Name/Specific Field</b> SHUMATE FAULK FUNERAL HOME	<b>e. Election Sum to Date</b> \$ 450.00									
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>						
<input type="checkbox"/>	01	In-Kind	BILLBOARD ADVERTISEMENT	02/05/2024	\$ 450.00						
<input type="checkbox"/>					\$						
<input type="checkbox"/>					\$						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  ANTHONY HAMM 117 LONGLEAF LANE GOLDSBORO, NC 27534</td> <td><b>b. Job Title/Profession</b> CHIROPRACTOR</td> <td><b>d. Comments</b></td> </tr> <tr> <td></td> <td><b>c. Employer's Name/Specific Field</b> HAMM CHIROPRACTIC</td> <td><b>e. Election Sum to Date</b> \$ 200.00</td> </tr> </table>						<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  ANTHONY HAMM 117 LONGLEAF LANE GOLDSBORO, NC 27534	<b>b. Job Title/Profession</b> CHIROPRACTOR	<b>d. Comments</b>		<b>c. Employer's Name/Specific Field</b> HAMM CHIROPRACTIC	<b>e. Election Sum to Date</b> \$ 200.00
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  ANTHONY HAMM 117 LONGLEAF LANE GOLDSBORO, NC 27534	<b>b. Job Title/Profession</b> CHIROPRACTOR	<b>d. Comments</b>									
	<b>c. Employer's Name/Specific Field</b> HAMM CHIROPRACTIC	<b>e. Election Sum to Date</b> \$ 200.00									
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>						
<input type="checkbox"/>	01	Check		01/11/2024	\$ 200.00						
<input type="checkbox"/>					\$						
<input type="checkbox"/>					\$						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  SHERWIN HERRING 614 WALNUT CREEK DRIVE GOLDSBORO, NC 27534</td> <td><b>b. Job Title/Profession</b> CEO</td> <td><b>d. Comments</b></td> </tr> <tr> <td></td> <td><b>c. Employer's Name/Specific Field</b> SOUTHCO DISTRIBUTING CO</td> <td><b>e. Election Sum to Date</b> \$ 200.00</td> </tr> </table>						<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  SHERWIN HERRING 614 WALNUT CREEK DRIVE GOLDSBORO, NC 27534	<b>b. Job Title/Profession</b> CEO	<b>d. Comments</b>		<b>c. Employer's Name/Specific Field</b> SOUTHCO DISTRIBUTING CO	<b>e. Election Sum to Date</b> \$ 200.00
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  SHERWIN HERRING 614 WALNUT CREEK DRIVE GOLDSBORO, NC 27534	<b>b. Job Title/Profession</b> CEO	<b>d. Comments</b>									
	<b>c. Employer's Name/Specific Field</b> SOUTHCO DISTRIBUTING CO	<b>e. Election Sum to Date</b> \$ 200.00									
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>						
<input type="checkbox"/>	01	Check		01/05/2024	\$ 200.00						
<input type="checkbox"/>					\$						
<input type="checkbox"/>					\$						
<b>4. Total only this Page</b>				\$ 850.00							
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>				\$ 10,043.49							

# Contributions from Individuals

Pg 6 of 9  Yes  No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b> REELECT DAUGHTERY COMMITTEE	<b>2. ID Number</b> -8K1599--
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<b>3. Contributor Information</b>		<input type="checkbox"/> Add <input type="checkbox"/> Remove
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  CURTIS HINTON JR 300 E APRIL LANE GOLDSBORO, NC 27530		<b>b. Job Title/Profession</b> PRESIDENT
		<b>c. Employer's Name/Specific Field</b> GEOGRAPHIC TECHNOLOGIES GROUP, INC
		<b>e. Election Sum to Date</b> \$ 200.00

<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	01	Check		01/16/2024	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b>		<input type="checkbox"/> Add <input type="checkbox"/> Remove
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  SAM HUNTER 770 LAKE WACKENA ROAD GOLDSBORO, NC 27534		<b>b. Job Title/Profession</b> CEO
		<b>c. Employer's Name/Specific Field</b> TA LOVING
		<b>e. Election Sum to Date</b> \$ 200.00

<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	01	Check		01/11/2024	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b>		<input type="checkbox"/> Add <input type="checkbox"/> Remove
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  ROBERT C JACKSON 109 AURORA LANE GOLDSBORO, NC 27530		<b>b. Job Title/Profession</b> RETIRED
		<b>c. Employer's Name/Specific Field</b> RETIRED
		<b>e. Election Sum to Date</b> \$ 500.00

<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	01	Electric Funds Tran		01/06/2024	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>	\$ 900.00
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<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 10,043.49
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# Contributions from Individuals

Pg 7 of 9  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)			2. ID Number																																								
REELECT DAUGHTERY COMMITTEE			-8K1599--																																								
<b>3. Contributor 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</td> <td colspan="4">d. Comments</td> </tr> <tr> <td rowspan="3">STEVE KEEN 412 NC HWY 581 S GOLDSBORO, NC 27530</td> <td>NO PROFESSION</td> <td colspan="4" rowspan="3"> <b>e. Election Sum to Date</b>   \$ 100.00 </td> </tr> <tr> <td>c. Employer's Name/Specific Field</td> </tr> <tr> <td>NOT EMPLOYED</td> </tr> <tr> <td>f. Prior</td> <td>g. Account Code</td> <td>h. Form of Payment</td> <td>i. In-Kind Description</td> <td>j. Date (mm/dd/yyyy)</td> <td>k. Amount</td> </tr> <tr> <td><input type="checkbox"/></td> <td>01</td> <td>Check</td> <td></td> <td>01/18/2024</td> <td>\$ 100.00</td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td>\$</td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td>\$</td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments				STEVE KEEN 412 NC HWY 581 S GOLDSBORO, NC 27530	NO PROFESSION	<b>e. Election Sum to Date</b>  \$ 100.00				c. Employer's Name/Specific Field	NOT EMPLOYED	f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	<input type="checkbox"/>	01	Check		01/18/2024	\$ 100.00	<input type="checkbox"/>					\$	<input type="checkbox"/>					\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments																																									
STEVE KEEN 412 NC HWY 581 S GOLDSBORO, NC 27530	NO PROFESSION	<b>e. Election Sum to Date</b>  \$ 100.00																																									
	c. Employer's Name/Specific Field																																										
	NOT EMPLOYED																																										
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount																																						
<input type="checkbox"/>	01	Check		01/18/2024	\$ 100.00																																						
<input type="checkbox"/>					\$																																						
<input type="checkbox"/>					\$																																						
<b>3. Contributor 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</td> <td colspan="4">d. Comments</td> </tr> <tr> <td rowspan="3">DALE LEATHAM 304 TONYA DRIVE GOLDSBORO, NC 27534</td> <td>BOARD OF EDUCATION</td> <td colspan="4" rowspan="3"> <b>e. Election Sum to Date</b>   \$ 250.00 </td> </tr> <tr> <td>c. Employer's Name/Specific Field</td> </tr> <tr> <td>WCPS</td> </tr> <tr> <td>f. Prior</td> <td>g. Account Code</td> <td>h. Form of Payment</td> <td>i. In-Kind Description</td> <td>j. Date (mm/dd/yyyy)</td> <td>k. Amount</td> </tr> <tr> <td><input type="checkbox"/></td> <td>01</td> <td>Electric Funds Tran</td> <td></td> <td>01/04/2024</td> <td>\$ 250.00</td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td>\$</td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td>\$</td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments				DALE LEATHAM 304 TONYA DRIVE GOLDSBORO, NC 27534	BOARD OF EDUCATION	<b>e. Election Sum to Date</b>  \$ 250.00				c. Employer's Name/Specific Field	WCPS	f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	<input type="checkbox"/>	01	Electric Funds Tran		01/04/2024	\$ 250.00	<input type="checkbox"/>					\$	<input type="checkbox"/>					\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments																																									
DALE LEATHAM 304 TONYA DRIVE GOLDSBORO, NC 27534	BOARD OF EDUCATION	<b>e. Election Sum to Date</b>  \$ 250.00																																									
	c. Employer's Name/Specific Field																																										
	WCPS																																										
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount																																						
<input type="checkbox"/>	01	Electric Funds Tran		01/04/2024	\$ 250.00																																						
<input type="checkbox"/>					\$																																						
<input type="checkbox"/>					\$																																						
<b>3. Contributor 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</td> <td colspan="4">d. Comments</td> </tr> <tr> <td rowspan="3">DAVID PERRY 1906 E WALNUT STREET GOLDSBORO, NC 27530</td> <td>CEO</td> <td colspan="4" rowspan="3"> <b>e. Election Sum to Date</b>   \$ 250.00 </td> </tr> <tr> <td>c. Employer's Name/Specific Field</td> </tr> <tr> <td>GOLDSBORO BUILDERS SUPPLY</td> </tr> <tr> <td>f. Prior</td> <td>g. Account Code</td> <td>h. Form of Payment</td> <td>i. In-Kind Description</td> <td>j. Date (mm/dd/yyyy)</td> <td>k. Amount</td> </tr> <tr> <td><input type="checkbox"/></td> <td>01</td> <td>Check</td> <td></td> <td>01/16/2024</td> <td>\$ 250.00</td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td>\$</td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td>\$</td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments				DAVID PERRY 1906 E WALNUT STREET GOLDSBORO, NC 27530	CEO	<b>e. Election Sum to Date</b>  \$ 250.00				c. Employer's Name/Specific Field	GOLDSBORO BUILDERS SUPPLY	f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	<input type="checkbox"/>	01	Check		01/16/2024	\$ 250.00	<input type="checkbox"/>					\$	<input type="checkbox"/>					\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments																																									
DAVID PERRY 1906 E WALNUT STREET GOLDSBORO, NC 27530	CEO	<b>e. Election Sum to Date</b>  \$ 250.00																																									
	c. Employer's Name/Specific Field																																										
	GOLDSBORO BUILDERS SUPPLY																																										
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount																																						
<input type="checkbox"/>	01	Check		01/16/2024	\$ 250.00																																						
<input type="checkbox"/>					\$																																						
<input type="checkbox"/>					\$																																						
<b>4. Total only this Page</b> <input type="checkbox"/> \$ 600.00																																											
<b>5. Total of ALL CRO-1210 Pages</b> <input type="checkbox"/> \$ 10,043.49 <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>																																											

# Contributions from Individuals

Pg 8 of 9  Yes  No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b> REELECT DAUGHTERY COMMITTEE		<b>2. ID Number</b> -8K1599--			
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  JUDSON POPE III 1092 N BREAZEALE AVE MOUNT OLIVE, NC 28365 (919) 658-6566		<b>b. Job Title/Profession</b> PRESIDENT			
		<b>c. Employer's Name/Specific Field</b> EJ POPE & SONS			
		<b>e. Election Sum to Date</b> \$ 200.00			
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	01	Check		01/20/2024	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  DAVID ROUSE PO BOX 1816 GOLDSBORO, NC 27533		<b>b. Job Title/Profession</b> LAWYER	<b>d. Comments</b>		
		<b>c. Employer's Name/Specific Field</b> SELF-EMPLOYED	<b>e. Election Sum to Date</b> \$ 100.00		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	01	Check		02/13/2024	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  BEN SEEGARS 230 RIDGEWOOD DRIVE GOLDSBORO, NC 27534		<b>b. Job Title/Profession</b> OWNER	<b>d. Comments</b>		
		<b>c. Employer's Name/Specific Field</b> SEEGARS FENCE	<b>e. Election Sum to Date</b> \$ 200.00		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	01	Check		01/19/2024	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>4. Total only this Page</b>			\$ 500.00		
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>			\$ 10,043.49		

# Contributions from Individuals

Pg 9 of 9  Yes  No

Amendment

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>			
REELECT DAUGHTERY COMMITTEE		-8K1599--			
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b> INVESTMENT ADVISOR	<b>d. Comments</b>		
GRANT WEBBER 737 DOLLAR TOWN ROAD GOLDSBORO, NC 27534		<b>c. Employer's Name/Specific Field</b> EDWARD JONES	<b>e. Election Sum to Date</b> \$ 200.00		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	01	Check		01/20/2024	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b> NO JOB TITLE/RETIRED	<b>d. Comments</b>		
GEORGE WOLFE 276 LESLIE RD GOLDSBORO, NC 27530		<b>c. Employer's Name/Specific Field</b> NOT EMPLOYED/RETIRED	<b>e. Election Sum to Date</b> \$ 200.00		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	01	Electric Funds Tran		01/04/2024	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>4. Total only this Page</b>					
\$ 400.00					
<b>5. Total of ALL CRO-1210 Pages</b>					
(\$This line must be on line 6 of Detailed Summary Page CRO-1100) <b>\$ 10,043.49</b>					

**Loan Proceeds**Pg 1 of 1  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>		<b>2. ID Number</b>		
REELECT DAUGHTERY COMMITTEE		-8K1599--		
<b>3. Lender Information</b>		<input type="checkbox"/> Add <input type="checkbox"/> Remove		
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  JOE DAUGHTERY 125 OXFORD DRIVE GOLDSBORO, NC 27534		<b>b. Job Title/Profession</b>  NO JOB TITLE/RETIRED		<b>d. Comments</b>
				<b>e. Start Date (mm/dd/yyyy)</b>  01/03/2024
				<b>f. End Date (mm/dd/yyyy)</b>  _____
<b>g. Rate</b>	<b>h. Security Pledged</b>	<b>i. Account Code</b>	<b>j. Form of Payment</b>	<b>k. Amount</b>
%		01	Check	\$ 10,000.00
<b>l. Full Name of Lending Institution</b>				<b>m. Loan Number</b>
<b>4. Endorsers/Makers (The people who guarantee the loan.)</b>				
<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>				
\$ 10,000.00				

CRO-1410

NC State Board of Elections

April 2007

# Disbursements

Amendment

Pg 1 of 2  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> REELECT DAUGHTERY COMMITTEE		<b>2. ID Number</b> -8K1599--	
<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	
a. Full Name, Mailing Address & Phone (include city, state, & zip)  CLIFTON BROADHURST 101 ROSEMARY COURT DUDLEY, NC 28333		b. Coordinated Committee Name  c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:  e. Election Sum to Date  \$ 2,000.00	
f. Account Code <input type="checkbox"/> g. Form of Payment <input type="checkbox"/> h. Purpose Code <input type="checkbox"/> i. Date (mm/dd/yyyy) <input type="checkbox"/> j. Amount <input type="checkbox"/> k. Required Remarks  01 Check O 01/04/2024 \$ 2,000.00 GOTV  \$			
<b>4. Payee Information</b>		<input type="checkbox"/> Add <input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip)  CAMPAIGNRED 1629 K ST NW SUITE 300-C WASHINGTON, DC 20006 (877) 275-9700		b. Coordinated Committee Name  c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:  e. Election Sum to Date  \$ 4,419.00	
f. Account Code <input type="checkbox"/> g. Form of Payment <input type="checkbox"/> h. Purpose Code <input type="checkbox"/> i. Date (mm/dd/yyyy) <input type="checkbox"/> j. Amount <input type="checkbox"/> k. Required Remarks  01 Debit Card O 01/31/2024 \$ 1,903.20 ADVERTISEMENT  01 Debit Card O 02/15/2024 \$ 2,515.80 ADVERTISEMENT			
<b>4. Payee Information</b>		<input type="checkbox"/> Add <input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip)  MALORIE TARANGO PO BOX 10553 GOLDSBORO, NC 27532		b. Coordinated Committee Name  c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:  e. Election Sum to Date  \$ 225.00	
f. Account Code <input type="checkbox"/> g. Form of Payment <input type="checkbox"/> h. Purpose Code <input type="checkbox"/> i. Date (mm/dd/yyyy) <input type="checkbox"/> j. Amount <input type="checkbox"/> k. Required Remarks  01 Check O 01/30/2024 \$ 225.00 CAMPAIGN FINANCE  \$			
<b>5. Total only this Page</b>		\$ 6,644.00	
<b>6. Total of ALL CRO-1310 Pages</b>		\$ 6,794.00	
<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> <i>(List detailed expenditure code in (h.) above)</i>			
A* - Media		B* - Printing	
E - Salaries		F* - Equipment	
I - Postage		J - Penalties	
O* Other		C* - Fundraising	
		G - Political Party	
		K* - Office Expenses	
		D - To Another Candidate	
		H* - Holding Public Office Expenses	
		Q* - Donation to Legal Expense Fund	

\* Codes require detailed explanation in required remarks field (k)

# Disbursements

Amendment

Pg 2 of 2  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> REELECT DAUGHTERY COMMITTEE		<b>2. ID Number</b> -8K1599--			
<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			
a. Full Name, Mailing Address & Phone (include city, state, & zip) THE BUZZ 122 S BERKELEY BOULEVARD STE 3 GOLDSBORO, NC 27534		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 \$ 150.00		
<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>
01	Check	O	01/24/2024	\$ 150.00	ADVERTISEMENT
				\$	
<b>5. Total only this Page</b>				\$	150.00
<b>6. Total of ALL CRO-1310 Pages</b>		(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)		\$	6,794.00
<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	* 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.

REELECT DAUGHTERY COMMITTEE						-8K1599--																																									
<b>3. Payee Information</b>																																															
<b>a. Amend</b>	<b>b. Account Code</b>	<b>c. Form of Payment</b>	<b>d. Purpose Code</b>	<b>e. Date (mm/dd/yyyy)</b>	<b>f. Amount</b>	<b>g. Required Remarks</b>																																									
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Electric Funds Tran	O	02/17/2024	\$ 49.65	STRIPE FEES																																									
<b>4. Total only this Page</b>						\$ 49.65																																									
<b>5. Total of ALL CRO-1315 Pages</b> <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>						\$ 49.65																																									
<table border="0"><tr><td colspan="2"><b>B* - Printing</b></td><td colspan="4"></td><td colspan="2"><b>D - To Another Candidate</b></td></tr><tr><td colspan="2">E - Salaries</td><td colspan="4">G - Political Party</td><td colspan="2"></td></tr><tr><td colspan="2"></td><td colspan="4"></td><td colspan="2"></td></tr><tr><td colspan="2"><b>J - Penalties</b></td><td colspan="4"></td><td colspan="2"><b>Q* - Donations to Legal Expense Fund</b></td></tr><tr><td colspan="2"><b>O* - Other</b></td><td colspan="4"></td><td colspan="2"></td></tr></table>								<b>B* - Printing</b>						<b>D - To Another Candidate</b>		E - Salaries		G - Political Party														<b>J - Penalties</b>						<b>Q* - Donations to Legal Expense Fund</b>		<b>O* - Other</b>							
<b>B* - Printing</b>						<b>D - To Another Candidate</b>																																									
E - Salaries		G - Political Party																																													
<b>J - Penalties</b>						<b>Q* - Donations to Legal Expense Fund</b>																																									
<b>O* - Other</b>																																															
<b>* Codes require detailed explanation in required remarks field (g)</b>																																															

# In-Kind Contributions

Amendment  
Pg 1 of 2  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.

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
REELECT DAUGHTERY COMMITTEE		-8K1599--	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  JOE DAUGHTERY 125 OXFORD DRIVE GOLDSBORO, NC 27534	<b>b. Type of Contributor</b> <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>c. Comments</b>  <b>d. Election Sum to Date</b> \$ 20,875.96
<b>e. Description</b> GRAVIS MARKETING FOR GOTV  VOTTIV FOR VOTER CONTACT  MAILCHIMP FOR GOTV	<b>f. Date (mm/dd/yyyy)</b> 01/01/2024  01/03/2024  01/07/2024	<b>g. Fair Market Amount</b> \$ 650.00  \$ 149.00  \$ 100.00	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  JOE DAUGHTERY 125 OXFORD DRIVE GOLDSBORO, NC 27534	<b>b. Type of Contributor</b> <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>c. Comments</b>  <b>d. Election Sum to Date</b> \$ 20,875.96
<b>e. Description</b> WEBSITE  POLLMAKERS FOR GOTV CALLS  FACEBOOK ADVERTISEMENT	<b>f. Date (mm/dd/yyyy)</b> 01/12/2024  01/12/2024  01/18/2024	<b>g. Fair Market Amount</b> \$ 32.00  \$ 647.50  \$ 229.00	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  JOE DAUGHTERY 125 OXFORD DRIVE GOLDSBORO, NC 27534	<b>b. Type of Contributor</b> <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>c. Comments</b>  <b>d. Election Sum to Date</b> \$ 20,875.96
<b>e. Description</b> NEW OLD NORTH ADVERTISEMENT  VOTTIV FOR TEXTING SERVICE  VOTTIV FOR VOTER CONTACT	<b>f. Date (mm/dd/yyyy)</b> 01/18/2024  01/31/2024  02/03/2024	<b>g. Fair Market Amount</b> \$ 400.00  \$ 500.00  \$ 149.00	
<b>4. Total only this Page</b>		\$ 2,856.50	
<b>5. Total of ALL CRO-1510 Pages</b> <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		\$ 5,593.49	

**In-Kind Contributions**Amendment  
Pg 2 of 2  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.

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
REELECT DAUGHTERY COMMITTEE		-8K1599--	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  JOE DAUGHTERY 125 OXFORD DRIVE GOLDSBORO, NC 27534	<b>b. Type of Contributor</b> <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>c. Comments</b>  <b>d. Election Sum to Date</b> \$ 20,875.96
<b>e. Description</b> FACEBOOK ADVERTISEMENT	<b>f. Date (mm/dd/yyyy)</b> 02/12/2024	<b>g. Fair Market Amount</b> \$ 120.00	
CAMPAIGNRED ADVERTISEMENT	02/12/2024	\$ 2,166.99	
			\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  VEN FAULK 104 JILL ST DUDLEY, NC 28333	<b>b. Type of Contributor</b> <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>c. Comments</b>  <b>d. Election Sum to Date</b> \$ 450.00
<b>e. Description</b> BILLBOARD ADVERTISEMENT	<b>f. Date (mm/dd/yyyy)</b> 02/05/2024	<b>g. Fair Market Amount</b> \$ 450.00	
			\$
			\$
<b>4. Total only this Page</b>		\$ 2,736.99	
<b>5. Total of ALL CRO-1510 Pages</b> <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		\$ 5,593.49	

# Outstanding Loans

Amendment  
Pg 1 of 1  Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>													
REELECT DAUGHTERY COMMITTEE		-8K1599--													
<b>3. Lender Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b></td> <td><b>b. Job Title/Profession</b></td> <td><b>d. Comments</b></td> </tr> <tr> <td>JOE DAUGHTERY 125 OXFORD DRIVE GOLDSBORO, NC 27534</td> <td>NO JOB TITLE/RETIRED</td> <td></td> </tr> <tr> <td></td> <td>c. Employer's Name/Specific Field NOT EMPLOYED/RETIRED</td> <td>e. Start Date (mm/dd/yyyy) 12/04/2023</td> </tr> <tr> <td></td> <td></td> <td>f. End Date (mm/dd/yyyy)</td> </tr> </table>				<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>	<b>b. Job Title/Profession</b>	<b>d. Comments</b>	JOE DAUGHTERY 125 OXFORD DRIVE GOLDSBORO, NC 27534	NO JOB TITLE/RETIRED			c. Employer's Name/Specific Field NOT EMPLOYED/RETIRED	e. Start Date (mm/dd/yyyy) 12/04/2023			f. End Date (mm/dd/yyyy)
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>	<b>b. Job Title/Profession</b>	<b>d. Comments</b>													
JOE DAUGHTERY 125 OXFORD DRIVE GOLDSBORO, NC 27534	NO JOB TITLE/RETIRED														
	c. Employer's Name/Specific Field NOT EMPLOYED/RETIRED	e. Start Date (mm/dd/yyyy) 12/04/2023													
		f. End Date (mm/dd/yyyy)													
<b>g. Rate</b>	<b>h. Security Pledged</b>	<b>i. Original Loan Amount</b>	<b>j. Remaining Loan Balance</b>												
0.00%		\$ 5,000.00	\$ 5,000.00												
<b>k. Full Name of Lending Institution</b>		<b>l. Loan Number</b>													
<b>3. Lender Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b></td> <td><b>b. Job Title/Profession</b></td> <td><b>d. Comments</b></td> </tr> <tr> <td>JOE DAUGHTERY 125 OXFORD DRIVE GOLDSBORO, NC 27534</td> <td>NO JOB TITLE/RETIRED</td> <td></td> </tr> <tr> <td></td> <td>c. Employer's Name/Specific Field NOT EMPLOYED/RETIRED</td> <td>e. Start Date (mm/dd/yyyy) 01/03/2024</td> </tr> <tr> <td></td> <td></td> <td>f. End Date (mm/dd/yyyy)</td> </tr> </table>				<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>	<b>b. Job Title/Profession</b>	<b>d. Comments</b>	JOE DAUGHTERY 125 OXFORD DRIVE GOLDSBORO, NC 27534	NO JOB TITLE/RETIRED			c. Employer's Name/Specific Field NOT EMPLOYED/RETIRED	e. Start Date (mm/dd/yyyy) 01/03/2024			f. End Date (mm/dd/yyyy)
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>	<b>b. Job Title/Profession</b>	<b>d. Comments</b>													
JOE DAUGHTERY 125 OXFORD DRIVE GOLDSBORO, NC 27534	NO JOB TITLE/RETIRED														
	c. Employer's Name/Specific Field NOT EMPLOYED/RETIRED	e. Start Date (mm/dd/yyyy) 01/03/2024													
		f. End Date (mm/dd/yyyy)													
<b>g. Rate</b>	<b>h. Security Pledged</b>	<b>i. Original Loan Amount</b>	<b>j. Remaining Loan Balance</b>												
%		\$ 10,000.00	\$ 10,000.00												
<b>k. Full Name of Lending Institution</b>		<b>l. Loan Number</b>													
<b>4. Total only this Page</b>		\$ 15,000.00													
<b>5. Total of ALL CRO-1430 Pages</b> <i>(This line must be on line 21 of Detailed Summary Page CRO-1100)</i>		\$ 15,000.00													



# **NORTH CAROLINA**

## **STATE BOARD OF ELECTIONS**

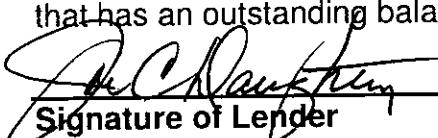
### **Loan Proceeds Statement**

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:** Reelect Daugherty Committee
- **Person or committee to make loan:** Joe Daugherty
- **Date of loan to committee:** 1/4/2024
- **Name of lending institution (source):**
- **Amount of loan:** \$10,000
- **Description (if in-kind loan):**
- **Names of all parties responsible for payment of loan (guarantors):**
- **Period of loan:**
- **Rate of interest of loan:** 0%
- **Security pledged for loan:**

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

  
**Signature of Lender**

2/26/2024  
**Date Signed**

  
**Signature of Treasurer of Committee**

2/26/2024  
**Date Signed**