

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 Third Quarter	-9K186R--	
Start of Election Cycle: January 1, 2023		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 693.01	\$ 0.00
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 555.00	\$ 605.00
6) Contributions from Individuals	(CRO-1210)	\$ 4,372.61	\$ 9,702.61
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0.00	\$ 0.00
8) Contributions from Other Political Committees	(CRO-1230)	\$ 3,250.00	\$ 3,250.00
9) Loan Proceeds	(CRO-1410)	\$ 0.00	\$ 1,568.18
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)		\$ 8,177.61	\$ 15,125.79
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 5,242.34	\$ 10,804.33
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	\$ 25.00
15) Loan Repayments	(CRO-1420)	\$ 0.00	\$ 668.18
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$ 0.00	\$ 0.00
17) In-Kind Contributions	(CRO-1510)	\$ 1,672.61	\$ 1,672.61
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 6,914.95	\$ 13,170.12
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 1,955.67	\$ 1,955.67
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 900.00	
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

1. Committee Full Name (and Fund if applicable)			2. ID Number		
COMMITTEE TO ELECT TINA ARNDER REGISTER OF DEEDS			-9K186R--		
3. Contributor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/> Add	1	Cash		10/03/2024	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Check		09/30/2024	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Cash		08/27/2024	\$ 40.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Check		08/14/2024	\$ 30.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Cash		07/26/2024	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Cash		08/23/2024	\$ 20.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Cash		10/03/2024	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Cash		10/15/2024	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Cash		08/27/2024	\$ 20.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Cash		08/27/2024	\$ 20.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Check		09/06/2024	\$ 25.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Cash		07/23/2024	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Cash		10/03/2024	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Cash		10/03/2024	\$ 50.00
<input type="checkbox"/> Remove					
4. Total only this Page					\$ 555.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$ 555.00

Contributions from Individuals

Pg 1 of 5 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 TINA ARNDER REGISTER OF DEEDS				2. ID Number -9K186R--										
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) JAMES V FAULK 104 JILL ST DUDLEY, NC 28333</td> <td>b. Job Title/Profession FUNERAL DIRECTOR</td> <td>d. Comments</td> </tr> <tr> <td></td> <td>c. Employer's Name/Specific Field SHUMATE FAULK FUNERAL HOME</td> <td></td> </tr> <tr> <td></td> <td></td> <td>e. Election Sum to Date \$ 200.00</td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip) JAMES V FAULK 104 JILL ST DUDLEY, NC 28333	b. Job Title/Profession FUNERAL DIRECTOR	d. Comments		c. Employer's Name/Specific Field SHUMATE FAULK FUNERAL HOME				e. Election Sum to Date \$ 200.00
a. Full Name, Mailing Address & Phone (include city, state, & zip) JAMES V FAULK 104 JILL ST DUDLEY, NC 28333	b. Job Title/Profession FUNERAL DIRECTOR	d. Comments												
	c. Employer's Name/Specific Field SHUMATE FAULK FUNERAL HOME													
		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									
<input type="checkbox"/>	1	Check		08/12/2024	\$ 200.00									
<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) R THOMAS FLORES JR 121 ACREVIEW DRIVE GOLDSBORO, NC 27530</td> <td>b. Job Title/Profession NO JOB TITLE/RETIRE</td> <td>d. Comments</td> </tr> <tr> <td></td> <td>c. Employer's Name/Specific Field NOT EMPLOYED/RETIRE</td> <td></td> </tr> <tr> <td></td> <td></td> <td>e. Election Sum to Date \$ 100.00</td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip) R THOMAS FLORES JR 121 ACREVIEW DRIVE GOLDSBORO, NC 27530	b. Job Title/Profession NO JOB TITLE/RETIRE	d. Comments		c. Employer's Name/Specific Field NOT EMPLOYED/RETIRE				e. Election Sum to Date \$ 100.00
a. Full Name, Mailing Address & Phone (include city, state, & zip) R THOMAS FLORES JR 121 ACREVIEW DRIVE GOLDSBORO, NC 27530	b. Job Title/Profession NO JOB TITLE/RETIRE	d. Comments												
	c. Employer's Name/Specific Field NOT EMPLOYED/RETIRE													
		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		08/13/2024	\$ 100.00									
<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) ARNOLD L FLOWERS 3601 ARRINGTON BRIDGE ROAD SEVEN SPRINGS, NC 28578</td> <td>b. Job Title/Profession NO JOB TITLE/RETIRE</td> <td>d. Comments</td> </tr> <tr> <td></td> <td>c. Employer's Name/Specific Field NOT EMPLOYED/RETIRE</td> <td></td> </tr> <tr> <td></td> <td></td> <td>e. Election Sum to Date \$ 100.00</td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip) ARNOLD L FLOWERS 3601 ARRINGTON BRIDGE ROAD SEVEN SPRINGS, NC 28578	b. Job Title/Profession NO JOB TITLE/RETIRE	d. Comments		c. Employer's Name/Specific Field NOT EMPLOYED/RETIRE				e. Election Sum to Date \$ 100.00
a. Full Name, Mailing Address & Phone (include city, state, & zip) ARNOLD L FLOWERS 3601 ARRINGTON BRIDGE ROAD SEVEN SPRINGS, NC 28578	b. Job Title/Profession NO JOB TITLE/RETIRE	d. Comments												
	c. Employer's Name/Specific Field NOT EMPLOYED/RETIRE													
		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		08/20/2024	\$ 100.00									
<input type="checkbox"/>					\$									
<input type="checkbox"/>					\$									
4. Total only this Page				\$ 400.00										
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)				\$ 4,372.61										

Contributions from Individuals

Pg 2 of 5 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 TINA ARNDER REGISTER OF DEEDS		-9K186R--																					
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</td> <td>d. Comments</td> </tr> <tr> <td colspan="2">JOHN GERKEN 303 LABONTE DR PIKEVILLE, NC 27863</td> <td></td> </tr> <tr> <td colspan="2">c. Employer's Name/Specific Field</td> <td></td> </tr> <tr> <td colspan="2"></td> <td>e. Election Sum to Date</td> </tr> <tr> <td colspan="2"></td> <td>\$ 200.00</td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments	JOHN GERKEN 303 LABONTE DR PIKEVILLE, NC 27863			c. Employer's Name/Specific Field					e. Election Sum to Date			\$ 200.00			
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments																					
JOHN GERKEN 303 LABONTE DR PIKEVILLE, NC 27863																							
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																		
<input type="checkbox"/>	1	Check		08/16/2024	\$ 200.00																		
<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</td> <td>d. Comments</td> </tr> <tr> <td colspan="2">REX HARRIS 200 EARL DR GOLDSBORO, NC 27530</td> <td>INSURANCE AGENT</td> </tr> <tr> <td colspan="2">c. Employer's Name/Specific Field</td> <td></td> </tr> <tr> <td colspan="2"></td> <td>HARRIS INSURANCE AGENCY</td> </tr> <tr> <td colspan="2"></td> <td>e. Election Sum to Date</td> </tr> <tr> <td colspan="2"></td> <td>\$ 100.00</td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments	REX HARRIS 200 EARL DR GOLDSBORO, NC 27530		INSURANCE AGENT	c. Employer's Name/Specific Field					HARRIS INSURANCE AGENCY			e. Election Sum to Date			\$ 100.00
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments																					
REX HARRIS 200 EARL DR GOLDSBORO, NC 27530		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																		
<input type="checkbox"/>	1	Check		07/16/2024	\$ 100.00																		
<input type="checkbox"/>					\$																		
<input type="checkbox"/>					\$																		
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a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments																					
JUDY HARRISON 262 RICHARD SMITH RD FOUR OAKS, NC 27524		NO JOB TITLE/RETIRED																					
c. Employer's Name/Specific Field																							
		NOT EMPLOYED/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																		
<input type="checkbox"/>	1	Check		08/27/2024	\$ 500.00																		
<input type="checkbox"/>	1	Check		09/19/2024	\$ 500.00																		
<input type="checkbox"/>					\$																		
4. Total only this Page					\$ 1,300.00																		
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 4,372.61																		

Contributions from Individuals

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 -9K186R--
--	----------------------------------

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) NEIL M HINE 118 PINERIDGE LN GOLDSBORO, NC 27534	b. Job Title/Profession OWNER	d. Comments			
	c. Employer's Name/Specific Field HINE CONSTRUCTION				
		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
<input type="checkbox"/>	1	Check		10/15/2024	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) FREIDA HOOD 307 CEDAR RD GOLDSBORO, NC 27534	b. Job Title/Profession NO JOB TITLE/RETIRE	d. Comments			
	c. Employer's Name/Specific Field NOT EMPLOYED/RETIRE				
		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		08/12/2024	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) DEBBIE GREEN LASSITER 386 TURNER SWAMP RD FREMONT, NC 27830	b. Job Title/Profession AUTO	d. Comments			
	c. Employer's Name/Specific Field GREEN'S AUTO SALVAGE				
		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		09/30/2024	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page	\$ 450.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 4,372.61

Contributions from Individuals

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 -9K186R--
--	----------------------------------

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip) GARY ALEXANDER LEWIS 2501 PINENEEDLES RD GOLDSBORO, NC 27534	b. Job Title/Profession ATTORNEY	d. Comments
	c. Employer's Name/Specific Field EVERETT, WOMBLE & LAWRENCE	
		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		07/29/2024	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip) LOIS MOORING 2141 NC 111 N GOLDSBORO, NC 27534 (919) 738-5139	b. Job Title/Profession NO JOB TITLE/RETIRIED	d. Comments
	c. Employer's Name/Specific Field NOT EMPLOYED/RETIRIED	
		e. Election Sum to Date \$ 3,072.61

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	In-Kind	ACCUCOPY FOR YARD SIGNS & CARDS	08/20/2024	\$ 1,672.61
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip) BONNIE OUTLAW 126 US HWY 13 S DUDLEY, NC 28333	b. Job Title/Profession	d. Comments
	c. Employer's Name/Specific Field OUTLAW MOBILE HOMES	
		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		10/11/2024	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page	\$ 1,872.61
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5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$ 4,372.61
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Contributions from Individuals

Pg 5 of 5 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 TINA ARNDER REGISTER OF DEEDS		-9K186R--																																					
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</td> <td>d. Comments</td> </tr> <tr> <td rowspan="3">DAVID PERRY 1906 E WALNUT STREET GOLDSBORO, NC 27530</td> <td>OWNER</td> <td rowspan="3"></td> </tr> <tr> <td>c. Employer's Name/Specific Field</td> </tr> <tr> <td>GOLDSBORO BUILDERS SUPPLY</td> </tr> <tr> <td>e. Election Sum to Date</td> <td>\$ 250.00</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>1</td> <td>Check</td> <td></td> <td>09/04/2024</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	DAVID PERRY 1906 E WALNUT STREET GOLDSBORO, NC 27530	OWNER		c. Employer's Name/Specific Field	GOLDSBORO BUILDERS SUPPLY	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	<input type="checkbox"/>	1	Check		09/04/2024	\$ 250.00	<input type="checkbox"/>					\$	<input type="checkbox"/>					\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments																																					
DAVID PERRY 1906 E WALNUT STREET GOLDSBORO, NC 27530	OWNER																																						
	c. Employer's Name/Specific Field																																						
	GOLDSBORO BUILDERS SUPPLY																																						
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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		09/04/2024	\$ 250.00																																		
<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</td> <td>d. Comments</td> </tr> <tr> <td rowspan="3">JOHN TURNER WALSTON 2503 PINENEEDLES RD GOLDSBORO, NC 27534</td> <td>NO JOB TITLE/RETIRE</td> <td rowspan="3"></td> </tr> <tr> <td>c. Employer's Name/Specific Field</td> </tr> <tr> <td>NOT EMPLOYED/RETIRE</td> </tr> <tr> <td>e. Election Sum to Date</td> <td>\$ 100.00</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>1</td> <td>Check</td> <td></td> <td>07/19/2024</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	JOHN TURNER WALSTON 2503 PINENEEDLES RD GOLDSBORO, NC 27534	NO JOB TITLE/RETIRE		c. Employer's Name/Specific Field	NOT EMPLOYED/RETIRE	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		07/19/2024	\$ 100.00	<input type="checkbox"/>					\$	<input type="checkbox"/>					\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments																																					
JOHN TURNER WALSTON 2503 PINENEEDLES RD GOLDSBORO, NC 27534	NO JOB TITLE/RETIRE																																						
	c. Employer's Name/Specific Field																																						
	NOT EMPLOYED/RETIRE																																						
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		07/19/2024	\$ 100.00																																		
<input type="checkbox"/>					\$																																		
<input type="checkbox"/>					\$																																		
4. Total only this Page \$ 350.00																																							
5. Total of ALL CRO-1210 Pages \$ 4,372.61 (This line must be on line 6 of Detailed Summary Page CRO-1100)																																							

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 TINA ARNDER REGISTER OF DEEDS		-9K186R--																		
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. Type of Committee</td> <td>d. Comments</td> </tr> <tr> <td>NC REALTORS PAC 4511 WEYBRIDGE LANE GREENSBORO, NC 27407</td> <td> <input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum </td> <td rowspan="3"> c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality: </td> </tr> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> <tr> <td colspan="3" style="text-align: right;">e. Election Sum to Date</td> </tr> <tr> <td colspan="3" style="text-align: right;">\$ 2,250.00</td> </tr> </table>				a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Committee	d. Comments	NC REALTORS PAC 4511 WEYBRIDGE LANE GREENSBORO, NC 27407	<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:					e. Election Sum to Date			\$ 2,250.00			
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Committee	d. Comments																		
NC REALTORS PAC 4511 WEYBRIDGE LANE GREENSBORO, NC 27407	<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:																		
e. Election Sum to Date																				
\$ 2,250.00																				
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount																
1	Check		09/13/2024	\$ 2,250.00																
				\$																
				\$																
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. Type of Committee</td> <td>d. Comments</td> </tr> <tr> <td>WAYNE COUNTY REPUBLICAN PARTY 147 S CENTER ST GOLDSBORO, NC 27530</td> <td> <input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum </td> <td rowspan="3"> c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: </td> </tr> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> <tr> <td colspan="3" style="text-align: right;">e. Election Sum to Date</td> </tr> <tr> <td colspan="3" style="text-align: right;">Wayne \$ 1,000.00</td> </tr> </table>				a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Committee	d. Comments	WAYNE COUNTY REPUBLICAN PARTY 147 S CENTER ST GOLDSBORO, NC 27530	<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum	c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:					e. Election Sum to Date			Wayne \$ 1,000.00			
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Committee	d. Comments																		
WAYNE COUNTY REPUBLICAN PARTY 147 S CENTER ST GOLDSBORO, NC 27530	<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum	c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:																		
e. Election Sum to Date																				
Wayne \$ 1,000.00																				
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount																
1	Check		09/10/2024	\$ 1,000.00																
				\$																
				\$																
4. Total only this Page				\$ 3,250.00																
5. Total of ALL CRO-1230 Pages (This line must be on line 8 of Detailed Summary Page CRO-1100)				\$ 3,250.00																

Disbursements

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

1. Committee Full Name (and Fund if applicable)		2. ID Number	
COMMITTEE TO ELECT TINA ARNDER REGISTER OF DEEDS		-9K186R--	
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		<input type="checkbox"/> Add <input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	
ACCUCOPY 322 N JOHN ST GOLDSBORO, NC 27530 (919) 751-2400		d. Comments e. Election Sum to Date \$ 3,362.64	
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			
1	Check	B	07/31/2024 \$ 218.84 VOTE CARDS
1	Check	B	09/13/2024 \$ 1,499.84 YARD SIGNS & CARDS
4. Payee Information		<input type="checkbox"/> Add <input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	
ACCUCOPY 322 N JOHN ST GOLDSBORO, NC 27530 (919) 751-2400		d. Comments e. Election Sum to Date \$ 3,362.64	
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			
1	Check	B	10/02/2024 \$ 1,206.28 SIGNS & CARDS
1	Check	B	10/17/2024 \$ 218.84 POSTCARDS
4. Payee Information		<input type="checkbox"/> Add <input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	
CLIFTON BROADHURST 101 ROSEMARY COURT DUDLEY, NC 28333		d. Comments e. Election Sum to Date \$ 3,000.00	
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			
1	Check	O	07/15/2024 \$ 500.00 GET OUT THE VOTE
5. Total only this Page		\$ 3,643.80	
6. Total of ALL CRO-1310 Pages		\$ 5,242.34	
<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>			
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			
<i>* Codes require detailed explanation in required remarks field (k)</i>			

Disbursements

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 -9K186R-								
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 <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> GOLDSBORO NEWS-ARGUS 109 E ASH ST GOLDSBORO, NC 27530 (919) 739-7809</td> <td>b. Coordinated Committee Name</td> <td>d. Comments</td> </tr> <tr> <td colspan="2" style="text-align: center;">c. Level Registered (Specify)</td> <td rowspan="2">e. Election Sum to Date \$ 566.00</td> </tr> <tr> <td><input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:</td> <td></td> </tr> </table>			a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> GOLDSBORO NEWS-ARGUS 109 E ASH ST GOLDSBORO, NC 27530 (919) 739-7809	b. Coordinated Committee Name	d. Comments	c. Level Registered (Specify)		e. Election Sum to Date \$ 566.00	<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> GOLDSBORO NEWS-ARGUS 109 E ASH ST GOLDSBORO, NC 27530 (919) 739-7809	b. Coordinated Committee Name	d. Comments								
c. Level Registered (Specify)		e. Election Sum to Date \$ 566.00								
<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:										
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks					
1	Check	A	10/07/2024	\$ 566.00	POLITICAL AD					
				\$						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			b. Coordinated Committee Name	d. Comments						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> CIENNA HOLLOWAY 506 KING DR GOLDSBORO, NC 27530			c. Level Registered (Specify)	e. Election Sum to Date \$ 750.00						
					<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks					
1	Check	O	08/16/2024	\$ 750.00	BOOTS ON GROUND					
				\$						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			b. Coordinated Committee Name	d. Comments						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> LIMELIGHT INK PO BOX 496 GOLDSBORO, NC 27533 (919) 922-2449			c. Level Registered (Specify)	e. Election Sum to Date \$ 401.38						
					<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks					
1	Check	B	10/17/2024	\$ 182.54	T-SHIRTS					
				\$						
5. Total only this Page			\$ 1,498.54							
6. Total of ALL CRO-1310 Pages			\$ 5,242.34							
<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>										
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

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 -9K186R--										
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 <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td>a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> SOUTHERN WAYNE HIGH REUNION 124 WALTER FULCHER RD DUDLEY, NC 28333</td> <td>b. Coordinated Committee Name</td> <td>d. Comments</td> </tr> <tr> <td colspan="2" style="text-align: center;">c. Level Registered (Specify)</td> <td rowspan="2">e. Election Sum to Date \$ 100.00</td> </tr> <tr> <td><input type="checkbox"/> Federal</td> <td><input type="checkbox"/> County:</td> </tr> <tr> <td><input type="checkbox"/> State</td> <td><input type="checkbox"/> Municipality:</td> </tr> </table>			a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> SOUTHERN WAYNE HIGH REUNION 124 WALTER FULCHER RD DUDLEY, NC 28333	b. Coordinated Committee Name	d. Comments	c. Level Registered (Specify)		e. Election Sum to Date \$ 100.00	<input type="checkbox"/> Federal	<input type="checkbox"/> County:	<input type="checkbox"/> State	<input type="checkbox"/> Municipality:
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> SOUTHERN WAYNE HIGH REUNION 124 WALTER FULCHER RD DUDLEY, NC 28333	b. Coordinated Committee Name	d. Comments										
c. Level Registered (Specify)		e. Election Sum to Date \$ 100.00										
<input type="checkbox"/> Federal	<input type="checkbox"/> County:											
<input type="checkbox"/> State	<input type="checkbox"/> Municipality:											
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks							
1	Check	O	10/03/2024	\$ 100.00	GOLF SPONSOR							
				\$								
5. Total only this Page			\$ 100.00									
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>			\$ 5,242.34									
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)												

In-Kind Contributions

Amendment

Pg 1 of 1 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 TINA ARNDER REGISTER OF DEEDS		-9K186R--	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip) LOIS MOORING 2141 NC 111 N GOLDSBORO, NC 27534 (919) 738-5139		b. Type of Contributor <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	c. Comments d. Election Sum to Date \$ 3,072.61
e. Description ACCUCOPY FOR YARD SIGNS & CARDS		f. Date (mm/dd/yyyy) 08/20/2024	g. Fair Market Amount \$ 1,672.61
			\$
			\$
4. Total only this Page		\$ 1,672.61	
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		\$ 1,672.61	

CRO-1510

NC State Board of Elections

December 2007

Outstanding Loans

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 TINA ARNDER REGISTER OF DEEDS		-9K186R--	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip) LOIS MOORING 2141 NC 111 N GOLDSBORO, NC 27534 (919) 738-5139		b. Job Title/Profession NO JOB TITLE/RETIRED	d. Comments e. Start Date (mm/dd/yyyy) 04/01/2024
		c. Employer's Name/Specific Field NOT EMPLOYED/RETIRED	f. End Date (mm/dd/yyyy) _____
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$ 900.00	\$ 900.00
k. Full Name of Lending Institution		l. Loan Number	
4. Total only this Page		\$ 900.00	
5. Total of ALL CRO-1430 Pages <i>(This line must be on line 21 of Detailed Summary Page CRO-1100)</i>		\$ 900.00	