Disclosure Report Cover

updated Report M-26-24

Amendment
☐ Yes   ☒ No

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

1. Committee Information

a. Full Name	c. ID Number
Re-Elect Coram for Wayne	HK18V2

b. Mailing Address (include City, State and Zip Code)	d. Date Filed
506 Cardinal Dr Goldsboro, NC 27534	10-29-24
	e. Phone Number 919-222-3861

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2024	01/01/24	10/19/24	Rodney Bernard Perry, Jr.

6. Type of Committee (Check One)

☒ Candidate Campaign ☐ Party
☐ PAC ☐ Referendum
☐ Independent Expenditure ☐ Joint Fundraiser
☐ Legal Expense Fund

7. Type of Fund (if applicable, check one)

☐ "Booster Fund"
☐ Building Fund

☐ Other:

8. Number of Fundraisers this Report

9. Type of Report (check only one type of report from one category)

Municipal	State/County	Referendum
☐ Organizational	☐ Organizational	☐ Organizational
☐ Thirty-five day	Quarterly	☐ Pre-referendum
☐ Pre-primary	☐ First	☐ Final
☐ Pre-election	☐ Second	☐ Supplemental Final
☐ Pre-runoff	☒ Third	☐ Annual
☐ Semi-annual	☐ Fourth	☐ Special
☐ Mid Year	Semi-annual	
☐ Year End	☐ Mid Year	**10. Special Report Name**
☐ Final	☐ Year End	
☐ Special	☐ Final	
	☐ Special	

11. Account Information

a. Financial Institution Full Name	
Wells Fargo	
b. Purpose	**c. Account Code**
Campaign receipts and Disbursement	1
	d. Period Begin Balance
	$ 0.00

11. Account Information

a. Financial Institution Full Name	
State Employees' Credit Union	
b. Purpose	**c. Account Code**
Campaign receipts and Disbursement	1
	d. Period Begin Balance
	$ 0.00

CERTIFICATION

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

Rodney Bernard Perry	*(signature)*	10-29-2024
Printed Name of Signer	Signature of Appointed Treasurer	Date

FOR OFFICE USE ONLY		Delivery Method
Date Received: _____	Employee: _____	☐ Normal Mail
Date Postmarked: _NOV 26 2024_	Employee: _____	☐ Registered Mail ☐ Hand Delivered
Date Scanned: _____	Employee: _____	☐ Electronically Filed
Date Data Entered: _____	Employee: _____	☐ Signer has not received mandatory training

RECEIVED NCBOF
NOV 26 2024
BY

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

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

Detailed Summary

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
Re-Elect Coram for Wayne		HK18V2

Start of Election Cycle: January 1, 2024		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$ 0.00	$ 0.00

RECEIPTS

			Total this Reporting Period	Total this Election Cycle
5)	Aggregated Contributions from Individuals	(CRO-1205)	$	$
6)	Contributions from Individuals	(CRO-1210)	$ 1492.08	$ 3492.00
7)	Contributions from Political Party Committees	(CRO-1220)	$ 200.00	$ 200.00
8)	Contributions from Other Political Committees	(CRO-1230)	$	$
9)	Loan Proceeds	(CRO-1410)	$	$
10)	Refunds/Reimbursements To the Committee	(CRO-1240)	$	$
11)	Other Receipt Sources			
11a)	Interest on Bank Accounts	(CRO-1250)	$	$
11b)	Contributions from Not-for-Profit Organizations	(CRO-1250)	$	$
11c)	Outside Sources of Income	(CRO-1250)	$	$
11d)	Legal Expense Fund – Other Sources	(CRO-1270)	$	$
11e)	Exempt Purchase Price Sales	(CRO-1265)	$	$
12)	TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		$ 1692.08	$ 3692.00

EXPENDITURES

			Total this Reporting Period	Total this Election Cycle
13)	Disbursements			
13a)	Operating Expenditures	(CRO-1310)	$ 1092.08	$ 3092.00
13b)	Contributions to Candidates/Political Committees	(CRO-1310)	$ 600.00	$ 600.00
13c)	Coordinated Party Expenditures	(CRO-1310)	$	$
14)	Aggregated Non-Media Expenditures	(CRO-1315)	$	$
15)	Loan Repayments	(CRO-1420)	$	$
16)	Refunds/Reimbursements From the Committee	(CRO-1320)	$	$
17)	In-Kind Contributions	(CRO-1510)	$	$
18)	TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		$ 1692.08	$ 3692.00
19)	Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		$ 0.00	$ 0.00

ADDITIONAL INFORMATION

			Total this Reporting Period	Total this Election Cycle
20)	Non-Monetary Gifts Given to Other Committees	(CRO-1330)	$	
21)	Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	$	
22)	Debts and Obligations owed By the Committee	(CRO-1610)	$	
23)	Debts and Obligations owed To the Committee	(CRO-1620)	$	
24)	Account Transfers Within the Committee	(CRO-1720)	$	
25)	Administrative Support	(CRO-1710)	$	$
26)	Forgiven Loans	(CRO-1440)	$	$
27)	48-Hour Notice Reports Sum	(CRO-2220)	$	$
28)	Contributions to be Refunded	(CRO-1215)	$	$

Contributions from Individuals

Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
Re-Elect Coram for Wayne	HJ18V2

3. Contributor Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
Bobby Jones 308 E. Chestnut Street Goldsboro, NC 27530	Retired	
	c. Employer's Name/Specific Field	
		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
☐	1	check		10/12/2024	$ 100.00
☐					$
☐					$

3. Contributor Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
Rick Stovall 662 Lakeshore Goldsboro, NC 275354	Dentist Dr.	
	c. Employer's Name/Specific Field	
		e. Election Sum to Date $

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	check		10/12/2024	$ 200.00
☐					$
☐					$

3. Contributor Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
Edward Royal 611 E. Elm Street Goldsboro, NC 27530	Bus Driver	
	c. Employer's Name/Specific Field	
		e. Election Sum to Date $

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	cash		10/12/2024	$ 20.00
☐					$
☐					$

4. Total only this Page	$ 320.00
5. Total of ALL CRO-1210 Pages	$

(This line must be on line 6 of Detailed Summary Page CRO-1100)

CRO-1210   NC State Board of Elections   April 2007

Contributions from Individuals

Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
Re-Elect Coram for Wayne	HK18V2

3. Contributor Information   ☒ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
Martha Rowe 3224 Central Heights Rd Apt A4 Goldsboro, NC 27534	Retired	
	c. Employer's Name/Specific Field	
		e. Election Sum to Date $

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Cash		10-12-2024	$ 20.00
☐					$
☐					$

3. Contributor Information   ☒ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
Edward Cotton 121 Woods Mill Rd Goldsboro, NC 27534	Self-Employed	
	c. Employer's Name/Specific Field	
		e. Election Sum to Date $

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Check		10-12-2024	$ 30.00
☐					$
☐					$

3. Contributor Information   ☒ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
Barbara Dentonio 152 Parks Rd Goldsboro, NC		
	c. Employer's Name/Specific Field	
		e. Election Sum to Date $

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Cash		10-12-2024	$ 10.00
☐					$
☐					$

4. Total only this Page	$ 60.00
5. Total of ALL CRO-1210 Pages	$

(This line must be on line 6 of Detailed Summary Page CRO-1100)

CRO-1210   NC State Board of Elections   April 2007

Contributions from Individuals

Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
Re-Elect Coram for Wayne	HK18V2

3. Contributor Information   ☒ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
Viola Figueroa 152 Parks Rd Goldsboro, NC	Retail	
	c. Employer's Name/Specific Field	
		e. Election Sum to Date $

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Cash		10-12-2024	$ 10.00
☐					$
☐					$

3. Contributor Information   ☒ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
Dennis Peele 813 Westview Ct Goldsboro, NC	Retired	
	c. Employer's Name/Specific Field Military	
		e. Election Sum to Date $

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Cash		10-12-2024	$ 20.00
☐					$
☐					$

3. Contributor Information   ☒ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
Jackee Hayes 103 Hooks Ct Pikeville, NC 27863	Minister	
	c. Employer's Name/Specific Field	
		e. Election Sum to Date $

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Cash		10-12-2024	$ 20.00
☐					$
☐					$

4. Total only this Page	$ 50.00
5. Total of ALL CRO-1210 Pages	$

(This line must be on line 6 of Detailed Summary Page CRO-1100)

CRO-1210   NC State Board of Elections   April 2007

Contributions from Individuals

Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
Re-Elect Coram for Wayne	HK18V2

3. Contributor Information   ☒ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
Thomas Family 1913 Cooke Ave Goldsboro, NC 27530	Retired	
	c. Employer's Name/Specific Field	
		e. Election Sum to Date $

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Cash		10-12-2024	$ 30.00
☐					$
☐					$

3. Contributor Information   ☒ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
Glenda White 112 Southern Plaza Dudley, NC 28333	Minister	
	c. Employer's Name/Specific Field	
		e. Election Sum to Date $

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Cash		10-12-2024	$ 30.00
☐					$
☐					$

3. Contributor Information   ☒ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
Sharon Matthews 240 Andrews Ave Goldsboro, NC 27530	Beautician	
	c. Employer's Name/Specific Field	
		e. Election Sum to Date $

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Cash		10-12-2024	$ 40.00
☐					$
☐					$

4. Total only this Page	$ 100.00
5. Total of ALL CRO-1210 Pages	$

(This line must be on line 6 of Detailed Summary Page CRO-1100)

CRO-1210   NC State Board of Elections   April 2007

Contributions from Individuals

Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
Re-Elect Coram for Wayne	HK18V2

3. Contributor Information   ☒ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
Candra Parks 150 Woodbine St Apt 64A Kernersville, NC	Teacher	
	c. Employer's Name/Specific Field	
		e. Election Sum to Date $

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Cash		10-12-2024	$ 24.00
☐					$
☐					$

3. Contributor Information   ☒ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
Carol Smith 915 Gurleys Rd Princeton, NC	Retired	
	c. Employer's Name/Specific Field	
		e. Election Sum to Date $

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Check		10-12-2024	$ 50.00
☐					$
☐					$

3. Contributor Information   ☒ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
Constance Coram 506 Cardinal Dr Goldsboro, NC 27534	Register of Deeds	
	c. Employer's Name/Specific Field	
		e. Election Sum to Date $

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Card		10-12-2024	$ 888.08
☐					$
☐					$

4. Total only this Page	$ 962.08
5. Total of ALL CRO-1210 Pages	$ 1497.08

(This line must be on line 6 of Detailed Summary Page CRO-1100)

CRO-1210   NC State Board of Elections   April 2007

Contributions from Political Party Committees

Pg __1__ of __1__

Use this form to report contributions from a political party

1. Committee Full Name (and Fund if applicable)	2. ID Number
Re-Elect Coram for Wayne	HK18V2

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Comments
Wayne County Senior Dems 560 W New Hope Rd Goldsboro, NC 27534	
	c. Election Sum to Date $

d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount
1	Check		10-1-2024	$ 200.00
				$
				$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Comments
	c. Election Sum to Date $

d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount
				$
				$
				$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Comments
	c. Election Sum to Date $

d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount
				$
				$
				$

4. Total only this Page	$	200.00
5. Total of ALL CRO-1220 Pages *(This line must be on line 7 of Detailed Summary Page CRO-1100)*	$	200.00

CRO-1220   NC State Board of Elections   April 2007

Disbursements

Amendment
☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
Re-Elect Coram for Wayne	HK18V2

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information   ☒ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
Signs on the Cheap 11525 Stonehollow Dr B220 Austin, TX 78758	**c. Level Registered (Specify)** ☐ Federal ☒ County: ☐ State ☐ Municipality:	
		e. Election Sum to Date $

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Card	B*	10-1-2024	$674.45	
				$	

4. Payee Information   ☒ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
Vista Print Internet	**c. Level Registered (Specify)** ☐ Federal ☒ County: ☐ State ☐ Municipality:	
		e. Election Sum to Date $

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Card	B*	10-1-2024	$202.38	
				$	

4. Payee Information   ☒ Add   ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
Hardee's Mount Olive #1506485 Mount Olive, NC 28365	**c. Level Registered (Specify)** ☐ Federal ☒ County: ☐ State ☐ Municipality:	Lunch for electioneers
		e. Election Sum to Date $

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Card	O*	10-18-2024	$25.58	
				$	

5. Total only this Page	$ 902.41
6. Total of ALL CRO-1310 Pages *(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)* *(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)* *(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)*	$

7. Purpose Codes (List detailed expenditure code in (h.) above)

A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
I - Postage	J - Penalties	K* - Office Expenses	Q* - Donation to Legal Expense Fund
O* - Other			

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

CRO-1310   NC State Board of Elections   December 2009

Disbursements

Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
Re-Elect Coram for Wayne	HK18V2

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
Sheetz 1001 N Spence Ave Goldsboro, NC 27533	**c. Level Registered (Specify)** ☐ Federal ☒ County: ☐ State ☐ Municipality:	Gas
		e. Election Sum to Date $

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Card	O*	10-8-2024	$41.58	
				$	

4. Payee Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
Sam's Club 2811 N Park Dr Goldsboro, NC 27534	**c. Level Registered (Specify)** ☐ Federal ☒ County: ☐ State ☐ Municipality:	Food for electioneers
		e. Election Sum to Date $

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Card	O*	10-10-2024	$65.03	
				$	

4. Payee Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
McCall's Barbecue 139 Miller's Chapel Rd Goldsboro, NC 27534	**c. Level Registered (Specify)** ☐ Federal ☒ County: ☐ State ☐ Municipality:	Food for electioneers
		e. Election Sum to Date $

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Card	O*	10-12-2024	$60.61	
				$	

5. Total only this Page $ 167.22

6. Total of ALL CRO-1310 Pages
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)
$

7. Purpose Codes (List detailed expenditure code in (h.) above)

A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
I - Postage	J - Penalties	K* - Office Expenses	Q* - Donation to Legal Expense Fund
O* - Other			

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

CRO-1310   NC State Board of Elections   December 2009

Disbursements

Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
Re-Elect Coram for Wayne	HK18V2

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
Dollar Tree 916 N Spence AVe Goldsboro, NC 27534	**c. Level Registered (Specify)** ☐ Federal ☒ County: ☐ State ☐ Municipality:	**e. Election Sum to Date** $

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Card	O*	10-11-2024	$22.45	
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
GOTV 210 S William St Goldsboro, NC 27530	**c. Level Registered (Specify)** ☐ Federal ☒ County: ☐ State ☐ Municipality:	**e. Election Sum to Date** $

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	G	10-11-2024	$500.00	
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
Wayne County Dems 210 S William St Goldsboro, NC 27530	**c. Level Registered (Specify)** ☐ Federal ☒ County: ☐ State ☐ Municipality:	**e. Election Sum to Date** $

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	G	8-15-2024	$100.00	
				$	

5. Total only this Page	$ 622.45
6. Total of ALL CRO-1310 Pages *(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)* *(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)* *(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)*	$ 1692.08

7. Purpose Codes (List detailed expenditure code in (h.) above)

A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
I - Postage	J - Penalties	K* - Office Expenses	Q* - Donation to Legal Expense Fund
O* - Other			

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

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