

Disclosure Report Cover

| | | |
|-----------|------------------------------|--|
| Amendment | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> 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 | |
| PICK NICK FOR COUNTY COMMISSIONER | | | |
| b. Mailing Address (include City, State and Zip Code) | | d. Date Filed | |
| 233 GAILS RD | | | |
| WEST END NC 27376 | | e. Phone Number | |
| | | | |
| 2. Report Year | 3. Period Start Date (mm/dd/yy) | 4. Period End Date (mm/dd/yy) | 5. Treasurer Full Name |
| 2022 | 3-11-2022 | 4-30-22 | John Thomas Roscoe |
| 6. Type of Committee (Check One) | | 9. Type of Report (check only one type of report from one category) | |
| <input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser | | Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special State/County <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special Referendum <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 | |
| 7. Type of Fund (if applicable, check one) | | 10. Special Report Name | |
| <input type="checkbox"/> Booster Fund <input type="checkbox"/> Building Fund <input type="checkbox"/> Other: | | | |
| 8. Number of Fundraisers this Report | | | |
| 1 | | | |
| 11. Account Information | | 11. Account Information | |
| a. Financial Institution Full Name | | a. Financial Institution Full Name | |
| FIRST BANK | | | |
| b. Purpose | c. Account Code | b. Purpose | c. Account Code |
| CAMPAIGN | 1 | | |
| FINANCE | | | |
| | d. Period Begin Balance | | d. Period Begin Balance |
| | \$ 0 | | \$ |
| 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. | | | |
| John Thomas Roscoe | | 4-30-22 | |
| Printed Name of Signer | | Date | |
| | | | |
| FOR OFFICE USE ONLY | | | |
| Date Received: | 5/3/22 | Employee: | APB |
| Date Postmarked: | | Employee: | |
| Date Scanned: | | Employee: | |
| Date Data Entered: | | Employee: | |
| | | Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training | |
| Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information. You must amend the Statement of Organization (CRO-2100A-E) to make committee changes. | | | |

CRO-1000 7022

NC State Board of Elections

August 2008

MOORE BOE

Detailed Summary

Use this form to summarize all disclosure reporting forms and to total monetary information

| | |
|------------------------------|--|
| Amendment | |
| <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

| | | |
|---|-------------------|--------------|
| 1. Committee Full Name (and Fund if applicable) | 2. Type of Report | 3. ID Number |
| PICK NICK FOR COUNTY COMMISSIDNER | FIRST | |

| | | |
|---|-----------------------------|---------------------------|
| Start of Election Cycle: January 1, <u>2022</u> | Total this Reporting Period | Total this Election Cycle |
| 4) Cash on Hand at Start | \$ <u>0</u> | \$ <u>0</u> |

RECEIPTS

| | | |
|--|-----------------------------|-----------------------------|
| 5) Aggregated Contributions from Individuals (CRO-1205) | \$ <u>445⁰⁰</u> | \$ <u>445⁰⁰</u> |
| 6) Contributions from Individuals (CRO-1210) | \$ <u>3167⁰⁶</u> | \$ <u>3167⁰⁶</u> |
| 7) Contributions from Political Party Committees (CRO-1220) | \$ | \$ |
| 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) | \$ <u>3612⁰⁶</u> | \$ <u>3612⁰⁶</u> |

EXPENDITURES

| | | |
|--|-----------------------------|-----------------------------|
| 13) Disbursements | | |
| 13a) Operating Expenditures (CRO-1310) | \$ <u>100⁰⁰</u> | \$ <u>100⁰⁰</u> |
| 13b) Contributions to Candidates/Political Committees (CRO-1310) | \$ | \$ |
| 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) | \$ <u>100⁰⁰</u> | \$ <u>100⁰⁰</u> |
| 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) | \$ <u>3512⁰⁶</u> | \$ <u>3512⁰⁶</u> |

ADDITIONAL INFORMATION

| | | |
|--|----|----|
| 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) | \$ | \$ |

CRO-1100

NC State Board of Elections

August 2008

MOORE BOE

100-100000

100-100000

100-100000

100-100000

100-100000

100-100000

100-100000

Page

1 of 1

Amendment

☐ **Yes**☒ No

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

| 1. Committee Full Name (and Fund if applicable) | | | | 2. ID Number | |
|---|-----------------|--------------------|------------------------|----------------------|----------------------|
| PICK NICK FOR COUNTY COMMISSIONER | | | | | |
| 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 <input type="checkbox"/> Remove | 1 | CHECK | | 4/16/2022 | \$ 50 ⁰⁰ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | CHECK | | 4/16/2022 | \$ 50 ⁰⁰ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | CASH | | 4/16/2022 | \$ 40 ⁰⁰ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | CASH | | 4/16/2022 | \$ 40 ⁰⁰ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | CASH | | 4/16/2022 | \$ 20 ⁰⁰ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | CASH | | 4/16/2022 | \$ 20 ⁰⁰ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | CHECK | | 4/16/2022 | \$ 25 ⁰⁰ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | CHECK | | 4/16/2022 | \$ 50 ⁰⁰ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | CHECK | | 4/16/2022 | \$ 50 ⁰⁰ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | CHECK | | 4/16/2022 | \$ 50 ⁰⁰ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| 4. Total only this Page | | | | | \$ 445 ⁰⁰ |
| 5. Total of ALL CRO-1205 Pages | | | | | \$ 445 ⁰⁰ |
| (This line must be on line 5 of Detailed Summary Page CRO-1100) | | | | | |

CRO-1205

NC State Board of Elections

April 2007

MAY 03 2022

MOORE BOE

4/25/22, 5:51 PM

1. The first part of the document is a letter from the President of the United States to the Congress, dated January 3, 1862. It is a very important document, as it contains the President's message to Congress for the first time since the beginning of the Civil War. The letter is written in a very formal and dignified style, and it is a very good example of the President's power and authority.

2. The second part of the document is a letter from the Secretary of the War Department to the Secretary of the Navy, dated January 10, 1862. It is a very important document, as it contains the Secretary's report to the Navy on the progress of the war. The letter is written in a very formal and dignified style, and it is a very good example of the Secretary's power and authority.

3. The third part of the document is a letter from the Secretary of the War Department to the Secretary of the Navy, dated January 10, 1862. It is a very important document, as it contains the Secretary's report to the Navy on the progress of the war. The letter is written in a very formal and dignified style, and it is a very good example of the Secretary's power and authority.

4. The fourth part of the document is a letter from the Secretary of the War Department to the Secretary of the Navy, dated January 10, 1862. It is a very important document, as it contains the Secretary's report to the Navy on the progress of the war. The letter is written in a very formal and dignified style, and it is a very good example of the Secretary's power and authority.

5. The fifth part of the document is a letter from the Secretary of the War Department to the Secretary of the Navy, dated January 10, 1862. It is a very important document, as it contains the Secretary's report to the Navy on the progress of the war. The letter is written in a very formal and dignified style, and it is a very good example of the Secretary's power and authority.

6. The sixth part of the document is a letter from the Secretary of the War Department to the Secretary of the Navy, dated January 10, 1862. It is a very important document, as it contains the Secretary's report to the Navy on the progress of the war. The letter is written in a very formal and dignified style, and it is a very good example of the Secretary's power and authority.

7. The seventh part of the document is a letter from the Secretary of the War Department to the Secretary of the Navy, dated January 10, 1862. It is a very important document, as it contains the Secretary's report to the Navy on the progress of the war. The letter is written in a very formal and dignified style, and it is a very good example of the Secretary's power and authority.

8. The eighth part of the document is a letter from the Secretary of the War Department to the Secretary of the Navy, dated January 10, 1862. It is a very important document, as it contains the Secretary's report to the Navy on the progress of the war. The letter is written in a very formal and dignified style, and it is a very good example of the Secretary's power and authority.

RECEIVED

Contributions from Individuals

Pg 1 of 4 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 | |
| PICK NICK FOR COUNTY COMMISSIONER | | | | | | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) NICK PICERNO 233 GAILS RD WEST END NC 27376 | | | | b. Job Title/Profession Consultant | | d. Comments |
| | | | | c. Employer's Name/Specific Field Self / Computer Software | | |
| | | | | e. Election Sum to Date \$ 1217 ⁰⁶ | | |
| 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 | | 4/1/2022 | \$ 1217 ⁰⁶ | |
| <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) William Brady PO Box 1466 CARTHAGE NC 28327 | | | | b. Job Title/Profession SELF EMPLOYED | | d. Comments |
| | | | | c. Employer's Name/Specific Field RENTAL PROPERTIES | | |
| | | | | e. Election Sum to Date \$ 500 ⁰⁰ | | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | 1 | CHECK | | 4/16/2022 | \$ 500 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) KATHY BEDDOW 19 EDINBURGH LN PINEHURST NC 28374 | | | | b. Job Title/Profession RETIRED | | d. Comments |
| | | | | c. Employer's Name/Specific Field | | |
| | | | | e. Election Sum to Date \$ 500 ⁰⁰ | | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | | CHECK | | 4/16/2022 | \$ 500 ⁰⁰ | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 2217 ⁰⁶ | |
| 5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100) | | | | | \$ 3167 ⁰⁶ | |

RECEIVED

MAY 03 2022

Contributions from Individuals

Pg 2 of 4

| |
|---|
| Amendment |
| <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 | |
| PICK NICK FOR COUNTY COMMISSIONER | | | | | | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Jo Ann Egitto 203 Plantation DR Southern Pines NC 28382 | | | RETIRED | | | |
| | | | 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 | | 4/16/2022 | \$ 200 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) | | | b. Job Title/Profession | | d. Comments | |
| KEN BENWAY 8 MARTIN WAY Whispering Pines NC 28327 | | | Retired | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Military | | 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 | | 4/16/2022 | \$ 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) | | | b. Job Title/Profession | | d. Comments | |
| DAN DENT 4230 CYPRESS CHURCH RD CAMERON NC 28326 | | | Contractor | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Self/ HOME | | e. Election Sum to Date | |
| | | | BUILDER | | \$ 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 | | 4/16/2022 | \$ 200 ⁰⁰ | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 500 ⁰⁰ | |
| 5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100) | | | | | \$ 3167 ⁰⁶ | |

RECEIVED

MAY 03 2022

Contributions from Individuals

Pg 3 of 4

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 | |
| PICK NICK FOR COUNTY COMMISSIONER | | | | | | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| MYONE BIBBY 528 DOWD ROAD CARHAGE NC 28327 | | | HOUSEWIFE | | | |
| | | | 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 | |
| <input type="checkbox"/> | 1 | CHECK | | 4/16/2022 | \$ 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) | | | b. Job Title/Profession | | d. Comments | |
| JIM BUSBY 170 E Connecticut Ave Southern Pines NC 28387 | | | CPA | | | |
| | | | c. Employer's Name/Specific Field | | e. Election Sum to Date | |
| | | | BUSBY & Co. | | \$ 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 | | 4/16/2022 | \$ 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) | | | b. Job Title/Profession | | d. Comments | |
| John Zumwalt 130 Oakhurst Vista WEST END NC 27376 | | | RETIRED | | | |
| | | | c. Employer's Name/Specific Field | | e. Election Sum to Date | |
| | | | MILITARY | | \$ 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 | | 4/16/2022 | \$ 100 ⁰⁰ | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 300 ⁰⁰ | |
| 5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100) | | | | | \$ 3167 ⁰⁶ | |

RECEIVED

MAY 03 2022

Contributions from Individuals

Pg 4 of 4

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 | |
| PICK NICK FOR COUNTY COMMISSIONER | | | | | | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| SCOTT CHASE 301 McREYNOLDS ST CAETHAGE NC 28327 | | | MANAGER | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Gibson Guitars | | e. Election Sum to Date | |
| | | | | | \$ 150. ⁰⁰ | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | 1 | CHECK | | 4/11/2022 | \$ 150. 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) | | | b. Job Title/Profession | | d. Comments | |
| | | | | | | |
| | | | 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 | |
| <input type="checkbox"/> | | | | | \$ | |
| <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) | | | b. Job Title/Profession | | d. Comments | |
| | | | | | | |
| | | | 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 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 150. ⁰⁰ | |
| 5. Total of ALL CRO-1210 Pages | | | | | RECEIVED \$ 3167. ⁰⁰ | |
| (This line must be on line 6 of Detailed Summary Page CRO-1100) | | | | | | |

CRO-1210

NC State Board of Elections

April 2007

MAY 03 2022

MOORE BOE

Disbursements

MAY 08 2012

Pg 1 of 1

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) MOORE BOE PICK NICK FOR COUNTY COMMISSIONER | | | | | | 2. ID Number | |
| 3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.) | | | | | | | |
| <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) JOE KEEN CARTHAGE, NC 28387 | | | | b. Coordinated Committee Name | | d. Comments | |
| | | | | 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 \$ 100⁰⁰ | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | |
| 1 | CHECK | C | 4-17-22 | \$ 100⁰⁰ | CAMPAIGN EVENT | | |
| | | | | \$ | MUSICIAN | | |
| 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 | | d. Comments | |
| | | | | 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 \$ | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | |
| | | | | \$ | | | |
| | | | | \$ | | | |
| 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 | | d. Comments | |
| | | | | 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 \$ | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | |
| | | | | \$ | | | |
| | | | | \$ | | | |
| 5. Total only this Page | | | | | | \$ 100⁰⁰ | |
| 6. Total of ALL CRO-1310 Pages | | | | | | \$ 100⁰⁰ | |
| (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) | | | | | | | |

