

# Disclosure Report Cover

Amendment  
 Yes  No

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

## 1. Committee Information

a. Full Name	RECEIVED	c. ID Number
THE COMMITTEE TO ELECT RONNIE FIELDS SHERIFF		
b. Mailing Address (include City, State and Zip Code)	JUL 07 2022	d. Date Filed
PO BOX 115 CARTHAGE, NC 28327-0115		07/02/2022
	MOORE BOE	e. Phone Number
		(910) 690-0645

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2022	05/01/2022	06/30/2022	TAMMY MOONEY

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"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund	<b>Municipal</b> <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	<b>State/County</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input 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	<b>Referendum</b> <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"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:			
8. Number of Fundraisers this Report			
0			

3. Account Information	3. Account Information
a. Financial Institution Full Name	a. Financial Institution Full Name
FIRST BANK	
b. Purpose	c. Account Code
CAMPAIGN FUND	01
d. Period Begin Balance	
\$	
b. Purpose	c. Account Code
d. Period Begin Balance	
\$	

## 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

Tammy Mooney  
Printed Name of Signer

Tammy Mooney  
Signature of Appointed Treasurer

07/02/2022  
Date

## FOR OFFICE USE ONLY

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

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

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

## Detailed Summary

Amendment  
 Yes  No

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

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number
THE COMMITTEE TO ELECT RONNIE FIELDS SHERIFF	2022 Second Quarter	
<b>Start of Election Cycle: January 1, 2019</b>		<b>Total this Reporting Period</b>
<b>4) Cash on Hand at Start</b>		<b>\$ 29,508.88</b>
<b>RECEIPTS</b>		
5) Aggregated Contributions from Individuals <i>(CRO-1205)</i>	\$ 0.00	\$ 873.55
6) Contributions from Individuals <i>(CRO-1210)</i>	\$ 1,800.00	\$ 47,508.66
7) Contributions from Political Party Committees <i>(CRO-1220)</i>	\$ 0.00	\$ 500.00
8) Contributions from Other Political Committees <i>(CRO-1230)</i>	\$ 0.00	\$ 250.00
9) Loan Proceeds <i>(CRO-1410)</i>	\$ 0.00	\$ 0.00
10) Refunds/Reimbursements to the Committee <i>(CRO-1240)</i>	\$ 0.00	\$ 0.00
11) Other Receipt Sources		
11a) Interest on Bank Accounts <i>(CRO-1250)</i>	\$ 0.00	\$ 0.00
11b) Contributions from Not-For-Profit Organizations <i>(CRO-1250)</i>	\$ 0.00	\$ 0.00
11c) Outside Sources of Income <i>(CRO-1250)</i>	\$ 0.00	\$ 0.00
11d) Legal Expense Fund - Other Sources <i>(CRO-1270)</i>	\$ 0.00	\$ 0.00
11e) Exempt Purchase Price Sales <i>(CRO-1265)</i>	\$ 0.00	\$ 0.00
<b>12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)</b>	<b>\$ 1,800.00</b>	<b>\$ 49,132.21</b>
<b>EXPENDITURES</b>		
13) Disbursements		
13a) Operating Expenditures <i>(CRO-1310)</i>	\$ 5,580.00	\$ 25,625.14
13b) Contributions to Candidates/Political Committees <i>(CRO-1310)</i>	\$ 0.00	\$ 0.00
13c) Coordinated Party Expenditures <i>(CRO-1310)</i>	\$ 0.00	\$ 0.00
14) Aggregated Non-Media Expenditures <i>(CRO-1315)</i>	\$ 0.00	\$ 17.60
15) Loan Repayments <i>(CRO-1420)</i>	\$ 0.00	\$ 0.00
16) Refunds/Reimbursements from the Committee <i>(CRO-1320)</i>	\$ 0.00	\$ 0.00
17) In-Kind Contributions <i>(CRO-1510)</i>	\$ 0.00	\$ 6,137.21
<b>18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)</b>	<b>\$ 5,580.00</b>	<b>\$ 31,779.95</b>
<b>19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)</b>	<b>\$ 25,728.88</b>	<b>\$ 25,728.88</b>
<b>ADDITIONAL INFORMATION</b>		
20) Non-Monetary Gifts Given to Other Committees <i>(CRO-1330)</i>	\$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns) <i>(CRO-1430)</i>	\$ 0.00	
22) Debts and Obligations owed by the Committee <i>(CRO-1610)</i>	\$ 0.00	
23) Debts and Obligations owed to the Committee <i>(CRO-1620)</i>	\$ 0.00	
24) Account Transfers Within the Committee <i>(CRO-1720)</i>	\$ 0.00	
25) Administrative Support <i>(CRO-1710)</i>	\$ 0.00	\$ 0.00
26) Forgiven Loans <i>(CRO-1440)</i>	\$ 0.00	\$ 0.00
27) 48-Hour Notice Reports Sum <i>(CRO-2220)</i>	\$ 0.00	\$ 0.00
28) Contributions to be Refunded <i>(CRO-1215)</i>	\$ 0.00	\$ 0.00

# Contributions from Individuals

Pg 1 of 2

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																																							
THE COMMITTEE TO ELECT RONNIE FIELDS SHERIFF																																									
<p><b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove</p> <table border="1"> <tr> <td colspan="2">a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</td> <td>b. Job Title/Profession</td> <td colspan="3">d. Comments</td> </tr> <tr> <td colspan="2">ALFRED A GRAHAM PO BOX 1262 399 BINGHAM STREET CARTHAGE, NC 28327-1262</td> <td>RETIRED</td> <td colspan="3"></td> </tr> <tr> <td colspan="2"></td> <td>c. Employer's Name/Specific Field</td> <td colspan="3"></td> </tr> <tr> <td colspan="2"></td> <td>RAIL ROAD CRX</td> <td colspan="3"></td> </tr> <tr> <td colspan="2"></td> <td>e. Election Sum to Date</td> <td colspan="3"></td> </tr> <tr> <td colspan="2"></td> <td>\$ 200.00</td> <td colspan="3"></td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments			ALFRED A GRAHAM PO BOX 1262 399 BINGHAM STREET CARTHAGE, NC 28327-1262		RETIRED						c. Employer's Name/Specific Field						RAIL ROAD CRX						e. Election Sum to Date						\$ 200.00			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments																																						
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		RAIL ROAD CRX																																							
		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"/>	01	Check		05/20/2022	\$ 100.00																																				
<input type="checkbox"/>					\$																																				
<input type="checkbox"/>					\$																																				
<p><b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove</p> <table border="1"> <tr> <td colspan="2">a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</td> <td>b. Job Title/Profession</td> <td colspan="3">d. Comments</td> </tr> <tr> <td colspan="2">JAMES R GROEGER 6 STARLIT LANE PINEHURST, NC 28374</td> <td>RETIRED - SELF EMPLOYED</td> <td colspan="3"></td> </tr> <tr> <td colspan="2"></td> <td>c. Employer's Name/Specific Field</td> <td colspan="3"></td> </tr> <tr> <td colspan="2"></td> <td>CONSTRUCTION COMAPNY</td> <td colspan="3"></td> </tr> <tr> <td colspan="2"></td> <td>e. Election Sum to Date</td> <td colspan="3"></td> </tr> <tr> <td colspan="2"></td> <td>\$ 375.00</td> <td colspan="3"></td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments			JAMES R GROEGER 6 STARLIT LANE PINEHURST, NC 28374		RETIRED - SELF EMPLOYED						c. Employer's Name/Specific Field						CONSTRUCTION COMAPNY						e. Election Sum to Date						\$ 375.00			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments																																						
JAMES R GROEGER 6 STARLIT LANE PINEHURST, NC 28374		RETIRED - SELF EMPLOYED																																							
		c. Employer's Name/Specific Field																																							
		CONSTRUCTION COMAPNY																																							
		e. Election Sum to Date																																							
		\$ 375.00																																							
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		05/12/2022	\$ 250.00																																				
<input type="checkbox"/>					\$																																				
<input type="checkbox"/>					\$																																				
<p><b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove</p> <table border="1"> <tr> <td colspan="2">a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</td> <td>b. Job Title/Profession</td> <td colspan="3">d. Comments</td> </tr> <tr> <td colspan="2">PATRICK MOLAMPHY 120 SAINT MELLIONS PINEHURST, NC 28374</td> <td>RETIRED</td> <td colspan="3"></td> </tr> <tr> <td colspan="2"></td> <td>c. Employer's Name/Specific Field</td> <td colspan="3"></td> </tr> <tr> <td colspan="2"></td> <td>MILITARY</td> <td colspan="3"></td> </tr> <tr> <td colspan="2"></td> <td>e. Election Sum to Date</td> <td colspan="3"></td> </tr> <tr> <td colspan="2"></td> <td>\$ 1,000.00</td> <td colspan="3"></td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments			PATRICK MOLAMPHY 120 SAINT MELLIONS PINEHURST, NC 28374		RETIRED						c. Employer's Name/Specific Field						MILITARY						e. Election Sum to Date						\$ 1,000.00			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments																																						
PATRICK MOLAMPHY 120 SAINT MELLIONS PINEHURST, NC 28374		RETIRED																																							
		c. Employer's Name/Specific Field																																							
		MILITARY																																							
		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"/>	01	Check		05/20/2022	\$ 1,000.00																																				
<input type="checkbox"/>					\$																																				
<input type="checkbox"/>					\$																																				
4. Total only this Page \$ 1,350.00																																									
5. Total of ALL CRO-1210 Pages \$ 1,800.00																																									
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>																																									

# Contributions from Individuals

Pg 2 of 2

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>			
THE COMMITTEE TO ELECT RONNIE FIELDS SHERIFF					
<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> SELF		<b>d. Comments</b>	
CHARLES R POPE 2345 LOBELIA RD VASS, NC 28394		<b>c. Employer's Name/Specific Field</b> FARMER		<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	Check		05/12/2022	\$ 250.00
<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> RETIRED		<b>d. Comments</b>	
DAVID ROEDER 4 WILSHIRE LANE PINEHURST, NC 28374		<b>c. Employer's Name/Specific Field</b> USAF COL.		<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		05/20/2022	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>4. Total only this Page</b> \$ 450.00					
<b>5. Total of ALL CRO-1210 Pages</b> \$ 1,800.00					
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					

# 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

1. Committee Full Name (and Fund if applicable)		2. ID Number	
THE COMMITTEE TO ELECT RONNIE FIELDS SHERIFF			
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 checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:	
LIGHT HOUSE AT LITTLE RIVER RESTAURANT 500 LITTLE RIVER FARM BLVD CARTHAGE, NC 28327		d. Comments e. Election Sum to Date \$ 2,400.00	
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 05/18/2022 \$ 2,400.00 AFTER PRIMARY \$ GATHERING			
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 checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:	
MOORE COUNTY REPUBLICAN MEN'S CLUB PO BOX 1812 SOUTHERN PINES, NC 28387		d. Comments e. Election Sum to Date \$ 1,820.00	
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 C 05/06/2022 \$ 1,300.00 REGAN DINNER 5/18/2022 \$			
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:	
SEVEN LAKES NEWS CORPORATION PO BOX 1191 WEST END, NC 27376 (910) 685-0320		d. Comments e. Election Sum to Date \$ 200.00	
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 A 05/03/2022 \$ 200.00 SEVEN LAKES PAPER AD \$			
5. Total only this Page \$ 3,900.00			
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	
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  
 Yes  No

Pg 2 of 2

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			
THE COMMITTEE TO ELECT RONNIE FIELDS SHERIFF					
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		d. Comments	
THE PILOT NEWSPAPER 145 W PENNSYLVANIA AVE SOUTHERN PINES, NC 28327					
		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	
				\$	1,680.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	Debit Card	A	05/12/2022	\$ 840.00	NEWSPAPER AD
01	Debit Card	A	05/12/2022	\$ 840.00	NEWSPAPER ADS
5. Total only this Page					\$ 1,680.00
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>					\$ 5,580.00
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)					