

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	c. ID Number
Little Fox Moore County Register of Deeds	
b. Mailing Address (include City, State and Zip Code)	d. Date Filed
PO Box 783 Southern Pines NC 28388	07/12/2022
	e. Phone Number
	910-695-9770

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	Kelli Thomas
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"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> 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	<input type="checkbox"/> 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
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			

11. Account Information		11. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
First Citizens		RECEIVED	
b. Purpose	c. Account Code	b. Purpose	c. Account Code
All	1		
d. Period Begin Balance		JUL 1 2022	
\$		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 of Elections.

Kelli Thomas

Printed Name of Signer

Kelli Thomas

Signature of Appointed Treasurer

07/12/2022

Date

FOR OFFICE USE ONLY

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

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

Amendment

Yes

No

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number
Little for More County Register of Deeds	Quarter 2	
Start of Election Cycle: January 1, 2022	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	\$ 371.50	\$ 1299.05
RECEIPTS		
5) Aggregated Contributions from Individuals (CRO-1205)	\$	\$
6) Contributions from Individuals (CRO-1210)	\$ 7050	\$ 15350
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)	\$ 7050	\$ 15350
EXPENDITURES		
13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$ 6247.30	\$ 13596.00 RECEIVED
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$	\$
13c) Coordinated Party Expenditures (CRO-1310)	\$	\$ JUL 12 2022
14) Aggregated Non-Media Expenditures (CRO-1315)	\$	\$
15) Loan Repayments (CRO-1420)	\$	\$ MOORE BOE
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)	\$ 6247.30	\$ 1269.05
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 1774.80	\$
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)	\$	\$

Disbursements

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)		2. ID Number				
Little for Moore County Register of Deeds						
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)		b. Coordinated Committee Name		d. Comments		
Martin E Blaine PO Box 17623 Raleigh NC 27619						
		c. Level Registered (Specify)		e. Election Sum to Date		
		<input type="checkbox"/> Federal	<input checked="" type="checkbox"/> County:	\$ 5871		
		<input type="checkbox"/> State	<input type="checkbox"/> Municipality:			
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 145 W Pennsylvania Ave Southern Pines NC 28387						
		c. Level Registered (Specify)		e. Election Sum to Date		
		<input type="checkbox"/> Federal	<input checked="" type="checkbox"/> County:	\$ 280		
		<input type="checkbox"/> State	<input type="checkbox"/> Municipality:			
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 Village Printers PO Box 2139 Pinehurst NC 28374				JUL 12 2002		
		c. Level Registered (Specify)		MOORE BOB		
		<input type="checkbox"/> Federal	<input checked="" type="checkbox"/> County:	\$ 804.53		
		<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	05/11/2022	\$ 5871	Postcard mailings
					\$	
f. Account Code		g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1		check	A	05/15/2022	\$ 280	ad RECEIVED
					\$	
5. Total only this Page						\$ 6247.30
6. Total of ALL CRO-1310 Pages						\$ 6247.30
(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)						

Contributions from Individuals

Pg 1 of 9 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	
<i>Littletor McLegster of Deeds</i>					
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	
<i>Mary Longo 102 Rossmore Ct. Pinehurst NC 28374</i>			<i>Retired</i>		
			c. Employer's Name/Specific Field <i>Retired</i>		
			e. Election Sum to Date \$ <i>100</i> -		
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	
<i>Thomas Kragel 80 Wohnhill Ct. Pinehurst NC 28374</i>			<i>Retired</i>		
			c. Employer's Name/Specific Field <i>Retired</i>		
			e. Election Sum to Date \$ <i>100</i> <i>RECEIVED</i>		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>					<i>JUL 12 2002</i>
<input type="checkbox"/>					\$
<input type="checkbox"/>					<i>MOORE BOE</i>
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	
<i>Kurt Wohlrab 75 Woodenbridge Ln Pinehurst NC 28374</i>			<i>Dr.</i>		
			c. Employer's Name/Specific Field <i>Pinehurst Surgical Ortho</i>		
			e. Election Sum to Date \$ <i>500</i> -		
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				\$ <i>100</i>	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)				\$ <i>7650</i>	

Contributions from Individuals

Pg 2 of 9 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			
<i>Little for NC Register of Deeds</i>					
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 <i>Contractor</i>	d. Comments	
<i>Trent Frechman 101 Elkington Way Pinehurst NC 28374</i>			c. Employer's Name/Specific Field <i>Self</i>	e. Election Sum to Date <i>\$ 200 -</i>	
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 <i>Furniture Whslv</i>	d. Comments	
<i>Karen Brisson 1215 E. Massachusetts Ave Southern Pines NC 28387</i>			c. Employer's Name/Specific Field <i>Self</i>	e. Election Sum to Date <i>\$ 200 - RECEIVED</i>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>					\$ JUL 18 2007
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$ MOORE BOE
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 <i>Realtor</i>	d. Comments	
<i>Scarlett Allison 100 Bel Air Dr. Pinehurst NC 28374</i>			c. Employer's Name/Specific Field <i>Self</i>	e. Election Sum to Date <i>\$ 300</i>	
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				\$ <u>700 -</u>	
5. Total of ALL CRO-1210 Pages				\$ <u>1658</u>	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					

Contributions from Individuals

Pg 3 of 9 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
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3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove	
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a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
Toy Clark 50 Ponte Vedra Pinehurst NC 28374		Business Owner	
		c. Employer's Name/Specific Field	
		Clark Caddie	e. Election Sum to Date
			\$ 200 -

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
Kristen Grover 305 Lake Durnoch Dr. Pinehurst NC 28374		Art Dealer	
		c. Employer's Name/Specific Field	
		Self	e. Election Sum to Date
			\$ 200 - RECEIVED

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>					\$ JUL 12 2007
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$ MOORE BOE

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
Erin Reville 5 El Dorado St. Pinehurst NC 28374		Business Owner	
		c. Employer's Name/Specific Field	
		111 Main	e. Election Sum to Date
			\$ 200 -

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	\$ 600 -
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5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$ 7650
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Contributions from Individuals

Pg 4 of 8 Yes No ^{Amendment}

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

1. Committee Full Name (and Fund if applicable)

Little for NC Register of Deeds

2. ID Number

3. Contributor Information

Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)

Grace Heffner
305 S Valley Rd
Southern Pines NC 28387

b. Job Title/Profession

PA

c. Employer's Name/Specific Field

Pinehurst Surgical

d. Comments

e. Election Sum to Date

\$ 250 -

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

Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)

John Moore
170 Inverrary Rd.
Pinehurst NC 28374

b. Job Title/Profession

Doctor

c. Employer's Name/Specific Field

Pinehurst Surgical

RECEIVED
\$ 500

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>					\$ 1250 -
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information

Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)

Harriet Speight
90 Cherry Hill Dr.
Pinehurst NC 28374

b. Job Title/Profession

Retired

c. Employer's Name/Specific Field

Retired

e. Election Sum to Date

\$ 500 -

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	\$ 1250 -
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$ 7650

Contributions from Individuals

Pg 5 of 9 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	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) Stephen Lader PO Box 2150 Southern Pines NC 28388			
b. Job Title/Profession Atty		d. Comments	
c. Employer's Name/Specific Field Robbins May Rich		e. Election Sum to Date \$ 200	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description
<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) Neil Conti 25 Shaw Rd NW Pinehurst NC 28374			
b. Job Title/Profession Doctor		d. Comments	
c. Employer's Name/Specific Field Pinehurst Surgical		e. Election Sum to Date \$ 250 RECEIVED	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description
<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) Catherine Laroche 85 Ponte Vedra Pinehurst NC 28374			
b. Job Title/Profession Realtor		d. Comments	
c. Employer's Name/Specific Field Self		e. Election Sum to Date \$ 200	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
4. Total only this Page <input type="checkbox"/> Add <input type="checkbox"/> Remove \$ 650			
5. Total of ALL CRO-1210 Pages <input type="checkbox"/> Add <input type="checkbox"/> Remove \$ 7150			

Contributions from Individuals

Pg 6 of 9 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	
Little for NC Register of Deeds					
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	
Michelle Blue 432 Meyer Farm Dr Pinehurst NC 28374		Office Manager			
c. Employer's Name/Specific Field		Arthur Blue Law			
e. Election Sum to Date		\$ 500 -			
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	
James ERHodes 125 Ponte Vedra Pinehurst NC 28374		Banker			
c. Employer's Name/Specific Field		First Citizens			
e. Election Sum to Date		\$ 250		RECEIVED	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>					JUL 18 2017
<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	
Jody Foyles 19 Masters Ridge Southern Pines NC 28387		Attny			
c. Employer's Name/Specific Field		Self			
e. Election Sum to Date		\$ 200 -		MOORE BOE	
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				\$ 950	
5. Total of ALL CRO-1210 Pages				\$ 7600	

Contributions from Individuals

Pg 7 of 9

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

Little for NC Register of Deeds

3. Contributor Information

Add Remove

a. Full Name, Mailing Address & Phone
 (include city, state, & zip)

Edward Herlin
 12 Fortrose Circle
 Pinehurst NC 28374

b. Job Title/Profession

Retired

d. Comments

c. Employer's Name/Specific Field

Retired

e. Election Sum to Date

\$ 150 -

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

Add Remove

a. Full Name, Mailing Address & Phone
 (include city, state, & zip)

Patrick McClain
 70 Bel Air Drive
 Pinehurst NC 28374

b. Job Title/Profession

Pharmacist

d. Comments

c. Employer's Name/Specific Field

Self

e. Election Sum to Date

\$ 200 -

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>				JUL	\$ 417
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

RECEIVED
 MOORE BOE

3. Contributor Information

Add Remove

a. Full Name, Mailing Address & Phone
 (include city, state, & zip)

Alexander Lemons
 720 Lake Dornoch Dr
 Pinehurst NC 28374

b. Job Title/Profession

Doctor

d. Comments

c. Employer's Name/Specific Field

Pinehurst
 Surgical

e. Election Sum to Date

\$ 150 -

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 \$ 500 -

5. Total of ALL CRO-1210 Pages \$ 7650

Contributions from Individuals

Pg 8 of 9 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	
<i>Little for Moore County Register of Deeds</i>					
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
<i>Larry Caddell</i> Po Box 877 Carthage NC 28327				<i>Retired</i>	
				c. Employer's Name/Specific Field	
				<i>Retired</i>	
				e. Election Sum to Date	\$ <i>1000</i> -
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
<i>Gregg Allen</i> Po Box 801 Southern Pines NC 28388				<i>PC Investor</i>	
				c. Employer's Name/Specific Field	
				<i>Self</i>	
				e. Election Sum to Date	<i>RECEIVED</i>
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>					<i>JU \$ 72.70</i>
<input type="checkbox"/>					
<input type="checkbox"/>					<i>MOORE BOE</i>
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
<i>Edward Manning</i> 3713 Jamestown Cr Raleigh NC 27609				<i>Accountant</i>	
				c. Employer's Name/Specific Field	
				<i>Self</i>	
				e. Election Sum to Date	\$ <i>100</i> -
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				\$ <i>2100</i> -	
5. Total of ALL CRO-1210 Pages				\$ <i>7650</i>	
(This line must be on line 6 of Detailed Summary Page CRO-1100)					

Contributions from Individuals

Pg 9 of 9 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	
<i>Little for Moore County Register of Deeds</i>					
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	
<i>Donald Adams 135 Apawamus Cir Pinehurst NC 28374</i>		<i>Attorney</i>			
c. Employer's Name/Specific Field					
		<i>Self</i>		e. Election Sum to Date	
				\$ <i>200</i>	
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	
				\$ <i>RECEIVER</i>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>				<i>JUL</i>	\$ <i>200</i>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$ <i>MOORE BOE</i>
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				\$ <i>200</i>	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)				\$ <i>7650</i>	