

Disclosure Report Cover

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

Amendment
 Yes No

1. Committee Information

a. Full Name Ritter for Register	c. ID Number
b. Mailing Address (include City, State and Zip Code) 1084 Dover Church Road Seagrove, NC 27341	d. Date Filed 07/12/2022
	e. Phone Number 910-464-2764

2. Report Year 2022	3. Period Start Date (mm/dd/yy) 05/01/2022	4. Period End Date (mm/dd/yy) 06/30/2022	5. Treasurer Full Name Angela Lynn Ritter
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6. Type of Committee (Check One) <input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent <input type="checkbox"/> Expenditure <input type="checkbox"/> Legal Expense Fund	7. Type of Fund (if applicable, check one) <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:	9. Type of Report (check only one type of report from one category) <table border="1"> <tr> <td>Municipal</td> <td>State/County</td> <td>Referendum</td> </tr> <tr> <td><input type="checkbox"/> Organizational</td> <td><input type="checkbox"/> Organizational</td> <td><input type="checkbox"/> Organizational</td> </tr> <tr> <td><input type="checkbox"/> Thirty-five day</td> <td>Quarterly</td> <td><input type="checkbox"/> Pre-referendum</td> </tr> <tr> <td><input type="checkbox"/> Pre-primary</td> <td><input type="checkbox"/> First</td> <td><input type="checkbox"/> Final</td> </tr> <tr> <td><input type="checkbox"/> Pre-election</td> <td><input checked="" type="checkbox"/> Second</td> <td><input type="checkbox"/> Supplemental Final</td> </tr> <tr> <td><input type="checkbox"/> Pre-runoff</td> <td><input type="checkbox"/> Third</td> <td><input type="checkbox"/> Annual</td> </tr> <tr> <td><input type="checkbox"/> Semi-annual</td> <td><input type="checkbox"/> Fourth</td> <td><input type="checkbox"/> Special</td> </tr> <tr> <td><input type="checkbox"/> Mid Year</td> <td><input type="checkbox"/> Semi-annual</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Year End</td> <td><input type="checkbox"/> Mid Year</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Final</td> <td><input type="checkbox"/> Year End</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Special</td> <td><input type="checkbox"/> Final</td> <td></td> </tr> <tr> <td></td> <td><input type="checkbox"/> Special</td> <td></td> </tr> </table>	Municipal	State/County	Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Thirty-five day	Quarterly	<input type="checkbox"/> Pre-referendum	<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final	<input type="checkbox"/> Pre-election	<input checked="" type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final	<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual	<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special	<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year		<input type="checkbox"/> Final	<input type="checkbox"/> Year End		<input type="checkbox"/> Special	<input type="checkbox"/> Final			<input type="checkbox"/> Special		10. Special Report Name
Municipal	State/County	Referendum																																					
<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational																																					
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<input type="checkbox"/> Final	<input type="checkbox"/> Year End																																						
<input type="checkbox"/> Special	<input type="checkbox"/> Final																																						
	<input type="checkbox"/> Special																																						
8. Number of Fundraisers this Report																																							

11. Account Information a. Financial Institution Full Name First Bank	11. Account Information a. Financial Institution Full Name
b. Purpose All Campaign Expenses	c. Account Code 1
d. Period Begin Balance \$ 180.25	e. Purpose
	d. 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 of Elections.

Angela Lynn Ritter

Printed Name of Signer

Angela Lynn Ritter

Signature of Appointed Treasurer

07/11/2022

Date

FOR OFFICE USE ONLY

Date Received:

7/12/2022

Employee:

APB

Delivery Method

Date Postmarked:

Employee:

Normal Mail

Date Scanned:

JUL 12 2022

Employee:

Registered Mail

Date Data Entered:

MOOREBOE

Employee:

Hand Delivered

Electronically Filed

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

Amendments

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
Ritter for Register	Second Quarter	
Start of Election Cycle: January 1, 2022		Total this Reporting Period
4) Cash on Hand at Start	\$ 180.25	\$ 0.00
RECEIPTS		
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ \$
6) Contributions from Individuals	(CRO-1210)	\$ 430.00 \$ 6,359.00
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 Net-for-Profit Organizations	(CRO-1250)	\$ \$
11c) Outside Sources of Income	(CRO-1250)	\$ \$
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$ \$
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$ \$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$ 430.00	\$ 6,359.00
EXPENDITURES		
13) Disbursements		
13a) Operating Expenditures	(CRO-1310)	\$ 100.00 \$ 5,107.75
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)	\$ 430.00 \$ 1,171.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 530.00	\$ 6,278.75
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 80.25	\$ 80.25
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)	\$ \$

Contributions from IndividualsPg 1 of 1

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		
Ritter for Register						
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 Machinist		d. Comments		
Andrew Ritter 1084 Dover Church Road Seagrove, NC 27341 910-464-2764		c. Employer's Name/Specific Field Jordan Lumber Co.		e. Election Sum to Date \$ 4,019.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Credit	Newspaper Ad	05/11/2022	\$ 280.00	
<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 Machinist		d. Comments		
Andrew Ritter 1084 Dover Church Road Seagrove, NC 27341 910-464-2764		c. Employer's Name/Specific Field Jordan Lumber Co.		e. Election Sum to Date \$ 4,019.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Credit	Newspaper Ad	05/16/2022	\$ 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		
				e. Election Sum to Date \$		
		c. Employer's Name/Specific Field				
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				\$ 430.00		
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>				\$ 430.00		

Disbursements

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

1. Committee Full Name (and Fund if applicable)					2. ID Number
Ritter for Register					
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) Westmoore Family Restaurant 2172 NC Hwy 705 Seagrove, NC 27341 910-464-5222			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:					
			Moore		
					e. Election Sum to Date \$ 100.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	O	05/18/2022	\$100.00	Election Party Catering
				\$	
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					\$ 100.00
6. Total of ALL CRO-1310 Pages					
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					\$ 100.00
7. Purpose Codes (List detailed expenditure code in (h.) above)					
A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate		
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses		
I - Postage	J - Penalties	K* - Office Expenses	Q* - Donation to Legal Expense Fund		
O* - Other					
<i>* Codes require detailed explanation in required remarks field (k)</i>					

In-Kind Contributions

Pg 1 of 1

Amendment

Yes

No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.

Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Ritter for Register			
3. Contributor Information <input type="button" value="Add"/> <input type="button" value="Remove"/>			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
Andrew Ritter 1084 Dover Church Road Seagrove, NC 27341 910-464-2764		c. Comments d. Election Sum to Date \$ 1,171.00	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Pilot Newspaper Ad		05/11/2022	\$ 280.00
Pilot Newspaper Ad		05/16/2022	\$ 150.00
			\$
3. Contributor Information <input type="button" value="Add"/> <input type="button" value="Remove"/>			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor <input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
 		c. Comments d. Election Sum to Date \$	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
			\$
			\$
			\$
3. Contributor Information <input type="button" value="Add"/> <input type="button" value="Remove"/>			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor <input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
 		c. Comments d. Election Sum to Date \$	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
			\$
			\$
			\$
4. Total only this Page			\$ 430.00
5. Total of ALL CRO-1510 Pages			\$ 430.00
<i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>			