

# 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.

<b>1. Committee Information</b>	
<b>a. Full Name</b> SAMPSON FOR BOE	<b>c. ID Number</b>
<b>b. Mailing Address (include City, State and Zip Code)</b> 120 TINGLEY COURT SOUTHERN PINES, NC 28387	<b>d. Date Filed</b> 05/10/2022
	<b>e. Phone Number</b>

<b>2. Report Year</b> 2022	<b>3. Period Start Date (mm/dd/yy)</b> 01/01/2022	<b>4. Period End Date (mm/dd/yy)</b> 04/30/2022	<b>5. Treasurer Full Name</b> ROLLANDE SAMPSON
-------------------------------	--	--	---

<b>6. Type of Committee (Check One)</b>		<b>9. Type of Report (check only one type of report from one category)</b>		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<b>Municipal</b>	<b>State/County</b>	<b>Referendum</b>
<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> PAC	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Referendum	<input type="checkbox"/> Legal Expense Fund	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
<b>7. Type of Fund (if applicable, check one)</b>		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> NC Public Campaign Financing Fund		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
<input type="checkbox"/> Other:		<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	
<b>8. Number of Fundraisers this Report</b> 0		<b>10. Special Report Name</b>		

<b>3. Account Information</b>		<b>3. Account Information</b>	
<b>a. Financial Institution Full Name</b> TRUIST		<b>a. Financial Institution Full Name</b>	
<b>b. Purpose</b> BOE CAMPAIGN	<b>c. Account Code</b> 01	<b>b. Purpose</b>	<b>c. Account Code</b>
	<b>d. Period Begin Balance</b> \$		<b>d. Period Begin Balance</b> \$

**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

\_\_\_\_\_  
Printed Name of Signer

\_\_\_\_\_  
Signature of Appointed Treasurer

05/10/2022  
Date

**FOR OFFICE USE ONLY**

Date Received: 5/10/2022 Employee: ARB Delivery Method: ☐ Normal Mail

Date Postmarked: \_\_\_\_\_ Employee: \_\_\_\_\_ ☐ Registered Mail

Date Scanned: \_\_\_\_\_ Employee: \_\_\_\_\_ ☐ Hand Delivered ☒ Electronically Filed

Date Data Entered: \_\_\_\_\_ Employee: \_\_\_\_\_ ☐ 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

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. Type of Report</b>		<b>3. ID Number</b>	
SAMPSON FOR BOE		2022 First Quarter			
<b>Start of Election Cycle: January 1, 2021</b>		<b>Total this Reporting Period</b>		<b>Total this Election Cycle</b>	
4) Cash on Hand at Start		\$ 0.00		\$ 0.00	
<b>RECEIPTS</b>					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 510.00		\$ 510.00	
6) Contributions from Individuals (CRO-1210)		\$ 1,938.00		\$ 1,938.00	
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00		\$ 0.00	
8) Contributions from Other Political Committees (CRO-1230)		\$ 0.00		\$ 0.00	
9) Loan Proceeds (CRO-1410)		\$ 0.00		\$ 0.00	
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$ 0.00		\$ 0.00	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$ 0.00		\$ 0.00	
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$ 0.00		\$ 0.00	
11c) Outside Sources of Income (CRO-1250)		\$ 0.00		\$ 0.00	
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$ 0.00		\$ 0.00	
11e) Exempt Purchase Price Sales (CRO-1265)		\$ 0.00		\$ 0.00	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 2,448.00		\$ 2,448.00	
<b>EXPENDITURES</b>					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 419.91		\$ 419.91	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$ 0.00		\$ 0.00	
13c) Coordinated Party Expenditures (CRO-1310)		\$ 0.00		\$ 0.00	
14) Aggregated Non-Media Expenditures (CRO-1315)		\$ 69.11		\$ 69.11	
15) Loan Repayments (CRO-1420)		\$ 0.00		\$ 0.00	
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$ 0.00		\$ 0.00	
17) In-Kind Contributions (CRO-1510)		\$ 63.00		\$ 63.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 552.02		\$ 552.02	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 1,895.98		\$ 1,895.98	
<b>ADDITIONAL INFORMATION</b>					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0.00			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 0.00			
22) Debts and Obligations owed by the Committee (CRO-1610)		\$ 1,751.32			
23) Debts and Obligations owed to the Committee (CRO-1620)		\$ 0.00			
24) Account Transfers Within the Committee (CRO-1720)		\$ 0.00			
25) Administrative Support (CRO-1710)		\$ 0.00		\$ 0.00	
26) Forgiven Loans (CRO-1440)		\$ 0.00		\$ 0.00	
27) 48-Hour Notice Reports Sum (CRO-2220)		\$ 0.00		\$ 0.00	
28) Contributions to be Refunded (CRO-1215)		\$ 0.00		\$ 0.00	

# 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.

<b>1. Committee Information</b>				
<b>a. Full Name</b>			<b>c. ID Number</b>	
SAMPSON FOR BOE				
<b>b. Mailing Address (include City, State and Zip Code)</b>			<b>d. Date Filed</b>	
120 TINGLEY COURT SOUTHERN PINES, NC 28387			05/10/2022	
			<b>e. Phone Number</b>	
<b>2. Report Year</b>	<b>3. Period Start Date (mm/dd/yy)</b>	<b>4. Period End Date (mm/dd/yy)</b>	<b>5. Treasurer Full Name</b>	
2022	01/01/2022	04/30/2022	ROLLANDE SAMPSON	
<b>6. Type of Committee (Check One)</b>		<b>9. Type of Report (check only one type of report from one category)</b>		
<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> <b>State/County</b> <b>Referendum</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Organizational <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> 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 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"/> <input type="checkbox"/> Special		
<b>7. Type of Fund (if applicable, check one)</b>		<b>10. Special Report Name</b>		
<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:				
<b>8. Number of Fundraisers this Report</b>				
0				
<b>3. Account Information</b>		<b>3. Account Information</b>		
<b>a. Financial Institution Full Name</b>		<b>a. Financial Institution Full Name</b>		
TRUIST				
<b>b. Purpose</b>	<b>c. Account Code</b>	<b>b. Purpose</b>	<b>c. Account Code</b>	
BOE CAMPAIGN	01			
	<b>d. Period Begin Balance</b>		<b>d. Period Begin Balance</b>	
	\$		\$	
<b>CERTIFICATION</b>				
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				
Printed Name of Signer		Signature of Appointed Treasurer		Date
				05/10/2022
<b>FOR OFFICE USE ONLY</b>				
Date Received:	Employee:	<b>Delivery Method</b>		
		<input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed		
Date Postmarked:	Employee:			
Date Scanned:	Employee:			
Date Data Entered:	Employee:	<input type="checkbox"/> Signer has not received mandatory training		
<b>Please Note:</b> 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

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. Type of Report</b>		<b>3. ID Number</b>	
SAMPSON FOR BOE		2022 First Quarter			
<b>Start of Election Cycle: January 1, 2021</b>			<b>Total this Reporting Period</b>		<b>Total this Election Cycle</b>
4) Cash on Hand at Start			\$ 0.00		\$ 0.00
<b>RECEIPTS</b>					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 510.00		\$ 510.00	
6) Contributions from Individuals (CRO-1210)		\$ 1,938.00		\$ 1,938.00	
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00		\$ 0.00	
8) Contributions from Other Political Committees (CRO-1230)		\$ 0.00		\$ 0.00	
9) Loan Proceeds (CRO-1410)		\$ 0.00		\$ 0.00	
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$ 0.00		\$ 0.00	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$ 0.00		\$ 0.00	
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$ 0.00		\$ 0.00	
11c) Outside Sources of Income (CRO-1250)		\$ 0.00		\$ 0.00	
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$ 0.00		\$ 0.00	
11e) Exempt Purchase Price Sales (CRO-1265)		\$ 0.00		\$ 0.00	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 2,448.00		\$ 2,448.00	
<b>EXPENDITURES</b>					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 419.91		\$ 419.91	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$ 0.00		\$ 0.00	
13c) Coordinated Party Expenditures (CRO-1310)		\$ 0.00		\$ 0.00	
14) Aggregated Non-Media Expenditures (CRO-1315)		\$ 69.11		\$ 69.11	
15) Loan Repayments (CRO-1420)		\$ 0.00		\$ 0.00	
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$ 0.00		\$ 0.00	
17) In-Kind Contributions (CRO-1510)		\$ 63.00		\$ 63.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 552.02		\$ 552.02	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 1,895.98		\$ 1,895.98	
<b>ADDITIONAL INFORMATION</b>					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0.00			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 0.00			
22) Debts and Obligations owed by the Committee (CRO-1610)		\$ 1,751.32			
23) Debts and Obligations owed to the Committee (CRO-1620)		\$ 0.00			
24) Account Transfers Within the Committee (CRO-1720)		\$ 0.00			
25) Administrative Support (CRO-1710)		\$ 0.00		\$ 0.00	
26) Forgiven Loans (CRO-1440)		\$ 0.00		\$ 0.00	
27) 48-Hour Notice Reports Sum (CRO-2220)		\$ 0.00		\$ 0.00	
28) Contributions to be Refunded (CRO-1215)		\$ 0.00		\$ 0.00	

# Aggregated Contributions from Individuals

Page 1 of 1

Amendment

☐ Yes ☒ No

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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
SAMPSON FOR BOE						
<b>3. Contributor Information</b>						
<b>a. Amend</b>	<b>b. Account Code</b>	<b>c. Form of Payment</b>	<b>d. In-Kind Description</b>	<b>e. Date (mm/dd/yyyy)</b>	<b>f. Amount</b>	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		04/19/2022	\$ 10.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		04/12/2022	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		04/22/2022	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		04/24/2022	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		04/10/2022	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		04/27/2022	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		04/19/2022	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		04/10/2022	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		04/19/2022	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		04/21/2022	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Check		04/10/2022	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		04/10/2022	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	01	Credit Card		04/18/2022	\$ 50.00	
<b>4. Total only this Page</b>					\$ 510.00	
<b>5. Total of ALL CRO-1205 Pages</b> (This line must be on line 5 of Detailed Summary Page CRO-1100)					\$ 510.00	

CRO-1205

NC State Board of Elections

April 2007

# 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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
SAMPSON FOR BOE						
<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>		<b>d. Comments</b>
LYNN ANTIL 8 MAPLES LANE PINEHURST, NC 28374 (910) 528-2191				NOT EMPLOYED		
				<b>c. Employer's Name/Specific Field</b>		
				NONE		
				<b>e. Election Sum to Date</b>		
				\$ 500.00		
<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	Credit Card		04/13/2022	\$ 500.00	
<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>		<b>d. Comments</b>
MAGGIE BONECUTTER 840 BURNING TREE ROAD PINEHURST, NC 28374 (704) 779-1095				MARKETING WRITER		
				<b>c. Employer's Name/Specific Field</b>		
				SELF-EMPLOYED		
				<b>e. Election Sum to Date</b>		
				\$ 75.00		
<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	Credit Card		03/31/2022	\$ 25.00	
<input type="checkbox"/>	01	Credit Card		04/11/2022	\$ 50.00	
<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>		<b>d. Comments</b>
CHRISTOPH DIASIO 10 SPUR ROAD PINEHURST, NC 28374 (910) 295-2940				PEDIATRICIAN		
				<b>c. Employer's Name/Specific Field</b>		
				SANDHILLS PEDIATRICS INC		
				<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	Credit Card		04/25/2022	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 825.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 1,938.00	

# Contributions from Individuals

Pg 2 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

<b>1. Committee Full Name (and Fund if applicable)</b> SAMPSON FOR BOE					<b>2. ID Number</b>	
<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>		<b>d. Comments</b>	
JOHN FARRELL 21 GREY ABBEY DRIVE PINEHURST, NC 28374 (910) 992-2370			RETIRED			
			<b>c. Employer's Name/Specific Field</b>			
			RETIRED		<b>e. Election Sum to Date</b>	
				\$ 100.00		
<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	Credit Card		04/08/2022	\$ 100.00	
<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>		<b>d. Comments</b>	
TAMMY GREENBLATT 100 BROOKHAVEN RD PINEHURST, NC 28374 (833) 577-8387			CLIENT CLAIMS COORDINATOR		4/10 Meet & Greet	
			<b>c. Employer's Name/Specific Field</b>			
			Veterans Guardian VA Claim Consulting		<b>e. Election Sum to Date</b>	
				\$ 500.00		
<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		04/10/2022	\$ 500.00	
<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>		<b>d. Comments</b>	
KARIN KENT 25 DOVE RD PINEHURST, NC 28374 (910) 639-2284			RETIRED			
			<b>c. Employer's Name/Specific Field</b>			
			RETIRED		<b>e. Election Sum to Date</b>	
				\$ 100.00		
<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	Credit Card		04/13/2022	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 700.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 1,938.00	

# 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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
SAMPSON FOR BOE						
<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>		<b>d. Comments</b>	
RENEE PORTFILIO 470 SAINT ANDREWS DRIVE PINEHURST, NC 28374 (910) 585-1489			SCHOOL COUNSELOR			
			<b>c. Employer's Name/Specific Field</b>			
			MOORE COUNTY SCHOOLS			
					<b>e. Election Sum to Date</b>	
					\$ 100.00	
<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	Credit Card		04/21/2022	\$ 100.00	
<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>		<b>d. Comments</b>	
BARBARA ROTHBEIND 210 LAKE FOREST DRIVE SW PINEHURST, NC 28374 (910) 603-0600			OFFICE MANAGER			
			<b>c. Employer's Name/Specific Field</b>			
			MATTHEW ROTHBEIND ATTORNEY AT LAW PC			
					<b>e. Election Sum to Date</b>	
					\$ 100.00	
<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	Credit Card		04/13/2022	\$ 100.00	
<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>		<b>d. Comments</b>	
CLARE RUGGLES 55 OAKMONT CIRCLE PINEHURST, NC 28374 (910) 603-0326			EXECUTIVE DIRECTOR			
			<b>c. Employer's Name/Specific Field</b>			
			NORTHERN MOORE RESOURCE CENTER			
					<b>e. Election Sum to Date</b>	
					\$ 100.00	
<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	Credit Card		04/11/2022	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 300.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 1,938.00	



# 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

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
SAMPSON FOR BOE					
<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>		<b>d. Comments</b>
ROLLANDE SAMPSON 120 TINGLEY COURT SOUTHERN PINES, NC 28387			MILITART LIAISON		
			<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>
			MOORE COUNTY SCHOOLS		
					\$ 113.00
<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	In-Kind	WEBSITE FEE - CAMPAIGNPARTNERS.C	03/10/2022	\$ 5.00
<input type="checkbox"/>	01	In-Kind	WEBSITE FEE - CAMPAIGNPARTNERS.C	03/10/2022	\$ 29.00
<input type="checkbox"/>	01	Credit Card		03/30/2022	\$ 50.00
<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>		<b>d. Comments</b>
ROLLANDE SAMPSON 120 TINGLEY COURT SOUTHERN PINES, NC 28387			MILITART LIAISON		
			<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>
			MOORE COUNTY SCHOOLS		
					\$ 113.00
<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	In-Kind	WEBSITE FEE - CAMPAIGNPARTNERS.C	04/09/2022	\$ 29.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>4. Total only this Page</b>					\$ 113.00
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 1,938.00

CRO-1210

NC State Board of Elections

April 2007

# Disbursements

Pg 1 of 1

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

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
SAMPSON FOR BOE							
<b>3. Type of Disbursement</b> <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							
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
MUIRFIELD BROADCASTING 200 SHORT ROAD SOUTHERN PINES, NC 28387 (910) 695-0044				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 366.35	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
01	Debit Card	A	04/14/2022	\$ 366.35	STAR 102.5 RADIO		
				\$	ADVERTISING		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
STRIPE 185 Berry St #550 SAN FRANCISCO, CA 94107				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 53.56	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
01	Electric Funds Tran	O	04/30/2022	\$ 53.56	STRIPE TRANSFER FEE		
				\$			
<b>5. Total only this Page</b>						\$ 419.91	
<b>6. Total of ALL CRO-1310 Pages</b>							
(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)						\$ 419.91	
<b>7. Purpose Codes</b> (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

# Aggregated Non-Media Expenditures

Page 1 of 1

Amendment

☐ Yes ☒ No

Optional form used to report NC Non-Media Expenditures of \$50 or less.

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
SAMPSON FOR BOE						
<b>3. Payee Information</b>						
<b>a. Amend</b>	<b>b. Account Code</b>	<b>c. Form of Payment</b>	<b>d. Purpose Code</b>	<b>e. Date (mm/dd/yyyy)</b>	<b>f. Amount</b>	<b>g. Required Remarks</b>
<input type="checkbox"/> Add	01	Electric Funds Tran	O	03/22/2022	\$ 33.11	CHECKS
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	01	Electric Funds Tran	O	04/14/2022	\$ 36.00	BANK FEE
<input type="checkbox"/> Remove						
<b>4. Total only this Page</b>					\$ 69.11	
<b>5. Total of ALL CRO-1315 Pages</b>					\$ 69.11	
<i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>						
<b>6. Purpose Codes (List detailed expenditure code in (d) above)</b>						
<b>B* - Printing</b>		<b>C* - Fundraising</b>		<b>D - To Another Candidate</b>		
<b>E - Salaries</b>		<b>F* - Equipment</b>		<b>G - Political Party</b>		
<b>I - Postage</b>		<b>J - Penalties</b>		<b>H* - Holding Public Office Expenses</b>		
<b>O* - Other</b>		<b>K* - Office Expenses</b>		<b>Q* - Donations to Legal Expense Fund</b>		
<b>* Codes require detailed explanation in required remarks field (g)</b>						

CRO-1315

NC State Board of Elections

December 2009

# 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.

<b>1. Committee Full Name (and Fund if applicable)</b> SAMPSON FOR BOE		<b>2. ID Number</b>	
<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) ROLLANDE SAMPSON 120 TINGLEY COURT SOUTHERN PINES, NC 28387		<b>b. Type of Contributor</b> <input checked="" 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	
		<b>c. Comments</b>	
		<b>d. Election Sum to Date</b> \$ 113.00	
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	<b>g. Fair Market Amount</b>
WEBSITE FEE - CAMPAIGNPARTNERS.COM		03/10/2022	\$ 5.00
WEBSITE FEE - CAMPAIGNPARTNERS.COM		03/10/2022	\$ 29.00
WEBSITE FEE - CAMPAIGNPARTNERS.COM		04/09/2022	\$ 29.00
<b>4. Total only this Page</b>		\$ 63.00	
<b>5. Total of ALL CRO-1510 Pages</b> (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 63.00	

CRO-1510

NC State Board of Elections

December 2007

# Debts and Obligations Owed By the Committee

Pg 1 of 1

Amendment

☐ Yes ☒ No

Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card purchases.

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
SAMPSON FOR BOE			
<b>3. Creditor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor.</b>	
ROLLANDE SAMPSON 120 TINGLEY COURT SOUTHERN PINES, NC 28387		<b>b. Description of Creditor</b> PRINTING & OFFICE EXPENSES	
<b>c. Beginning Balance</b>	<b>d. Total Amount Paid</b>	<b>e. Total Amount Incurred</b>	<b>f. Remaining Balance</b>
\$ 0.00	\$ 0.00	\$ 1,751.32	\$ 1,751.32
<b>g. Incurred Debts (what the committee received this period)</b>			
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>	
STAPLES 290 TURNER STREET ABERDEEN, NC 28315 (910) 692-2781	03/18/2022	\$ 42.79	
	<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>	
	B	BUSINESS CARDS	
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>	
STAPLES 290 TURNER STREET 28315 (910) 692-2781	03/25/2022	\$ 128.38	
	<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>	
	B	BUSINESS CARDS/POSTCARDS	
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>	
VISTAPRINT NORTH AMERICA 95 Hayden Ave 02421 (781) 676-7310	03/25/2022	\$ 929.25	
	<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>	
	B	CAMPAIGN YARD SIGNS & TSHIRTS	
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>	
VISTAPRINT NORTH AMERICA 95 Hayden Ave 02421 (781) 676-7310	04/09/2022	\$ 650.90	
	<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>	
	B	CAMPAIGN YARD SIGNS	
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>	
95 Hayden Ave 02421 (910) 692-2781		\$	
	<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>	
<b>4. Total only this Page</b> (This should be the sum of all items 'g3.' from this page)		\$ 1,751.32	
<b>5. Total of ALL CRO-1610 Pages</b> (This line must be on line 22 of Detailed Summary Page CRO-1100)		\$ 1,751.32	
<b>6. Purpose Codes (List detailed expenditure code in (g4.))</b>			
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	O* - Other
* Codes require detailed explanation in required remarks field (g5.)			