

# Disclosure Report Cover

# MOORE COUNTY PUBLIC COPY

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
COMMITTEE TO ELECT ANN PETERSEN		
b. Mailing Address (include City, State and Zip Code)		d. Date Filed
545 ORCHARD ROAD SOUTHERN PINES, NORTH CAROLINA 28387		10/21/2021
		OCT 22 2021
		e. Phone Number
		910.315.8502

RECEIVED

MOORE BOE

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2021	01/01/2021	10/18/2021	RENA JENKINS

6. Type of Committee (Check One)	9. Type of Report (check only one type of report from one category)																																				
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent <input type="checkbox"/> Expenditure <input type="checkbox"/> Legal Expense Fund	<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 checked="" type="checkbox"/> Pre-election</td> <td><input 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 checked="" 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"/> Special	
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 checked="" 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"/> 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
0	a. Financial Institution Full Name

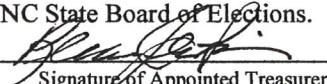
11. Account Information	11. Account Information
a. Financial Institution Full Name	a. Financial Institution Full Name
FIRST BANK	
b. Purpose	c. Account Code
CAMPAIGN ACCOUNT FOR RECEIPTS AND EXPENDITURES AND LOANS	1
d. Period Begin Balance	
\$ 0	\$

## CERTIFICATION

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.

RENA JENKINS

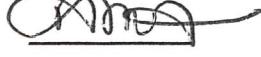
Printed Name of Signer

  
Signature of Appointed Treasurer

10/21/2021

Date

## FOR OFFICE USE ONLY

Date Received:	10/21/21	Employee:	 Signature	Delivery Method
Date Postmarked:		Employee:		<input type="checkbox"/> Normal Mail
Date Scanned:		Employee:		<input type="checkbox"/> Registered Mail
Date Data Entered:		Employee:		<input checked="" type="checkbox"/> Hand Delivered
				<input type="checkbox"/> Electronically Filed
				<input type="checkbox"/> Signer has not received mandatory training

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

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

**Detailed Summary****MOORE COUNTY**

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	
COMMITTEE TO ELECT ANN PETERSEN	PRE-ELECTION		
<b>Start of Election Cycle:</b> January 1, 2021	<b>Total this Reporting Period</b>	<b>Total this Election Cycle</b>	
4) Cash on Hand at Start	\$ 45.00	\$ 45.00	
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 225.00	\$ 225.00
6) Contributions from Individuals	(CRO-1210)	\$ 1,248.72	\$ 1,248.72
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0	\$ 0
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0	\$ 0
9) Loan Proceeds	(CRO-1410)	\$ 0	\$ 0
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$ 0	\$ 0
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0	\$ 0
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	\$ 0	\$ 0
11c) Outside Sources of Income	(CRO-1250)	\$ 0	\$ 0
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$ 0	\$ 0
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$ 0	\$ 0
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 1,473.72	\$ 1,473.72
<b>EXPENDITURES</b>			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 885.96	\$ 885.96
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 0	\$ 0
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0	\$ 0
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 0	\$ 0
15) Loan Repayments	(CRO-1420)	\$ 0	\$ 0
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$ 0	\$ 0
17) In-Kind Contributions	(CRO-1510)	\$ 285.92	\$ 285.92
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 1,171.88	\$ 1,171.88
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 346.84	\$ 346.84
<b>ADDITIONAL INFORMATION</b>			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 0	
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$ 0	
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$ 0	
24) Account Transfers Within the Committee	(CRO-1720)	\$ 0	
25) Administrative Support	(CRO-1710)	\$ 0	\$ 0
26) Forgiven Loans	(CRO-1440)	\$ 0	\$ 0
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$ 0	\$ 0
28) Contributions to be Refunded	(CRO-1215)	\$ 0	\$ 0

## Aggregated Contributions from Individuals

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

MOORE COUNTY  
PUBLIC COPY

Amendment  
Pg 1 of 4  Yes  No

Contributions from Individuals

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	
COMMITTEE TO ELECT ANN PETERSEN					
<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  ANN PETERSEN 545 ORCHARD ROAD SOUTHERN PINES, NC 28387			<b>b. Job Title/Profession</b> VOLUNTEER CO-ORDINATOR		<b>d. Comments</b> FIRST DEPOSIT TO NEW FIRST BANK CAMPAIGN ACCOUNT
			<b>c. Employer's Name/Specific Field</b> SUNRISE THEATER		
<b>e. Election Sum to Date</b> \$ 45.00					
<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"/>	1	CHECK		07/14/2021	\$ 45.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  MIRIAM CUNNINGHAM 7 VILLAGE GREEN SOUTHERN PINES, NC 28387			<b>b. Job Title/Profession</b> BUSINESS OWNER		<b>d. Comments</b>
			<b>c. Employer's Name/Specific Field</b> ROOF MENDERS, INC.		
<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"/>	1	CHECK		07/14/2021	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  CHARLOTTE LEE BELMORE 210 SOUTH WEYMOUTH ROAD SOUTHERN PINES, NC 28387			<b>b. Job Title/Profession</b> NO JOB TITLE		<b>d. Comments</b>
			<b>c. Employer's Name/Specific Field</b> NOT EMPLOYED		
<b>e. Election Sum to Date</b> \$ 70.00					
<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"/>	1	CHECK		08/18/2021	\$ 70.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>4. Total only this Page</b>					\$ 215.00
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 1,248.72

## Contributions from Individuals

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

**Amendment**  Yes  No

1. Committee Full Name (and Fund if applicable)					2. ID Number	
COMMITTEE TO ELECT ANN PETERSEN						
3. Contributor Information			<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Remove		
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  SUSAN MCKIBBEN 130 NORTH ASHE STREET SOUTHERN PINES, NC 28387			<b>b. Job Title/Profession</b>  ACCUPUNCTURIST		<b>d. Comments</b>  <b>e. Election Sum to Date</b>  \$ 95.00	
			<b>c. Employer's Name/Specific Field</b>  SELF EMPLOYED			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	CHECK		09/07/2021	\$ 95.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information			<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Remove		
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  PAULA BOYER 606 LILY PLACE SOUTHERN PINES, NC 28387			<b>b. Job Title/Profession</b>  NO JOB TITLE		<b>d. Comments</b>  <b>e. Election Sum to Date</b>  \$ 100.00	
			<b>c. Employer's Name/Specific Field</b>  NOT EMPLOYED			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	CHECK		09/08/2021	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information			<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Remove		
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  CLAUDIA L. DONAHUE 590 ORCHARD ROAD SOUTHERN PINES, NC 28387			<b>b. Job Title/Profession</b>  ACTIVE- DUTY		<b>d. Comments</b>  <b>e. Election Sum to Date</b>  \$ 100.00	
			<b>c. Employer's Name/Specific Field</b>  U. S. ARMY			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	CHECK		10/07/2021	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 295.00	
5. Total of ALL CRO-1210 Pages					\$ 1,248.72	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

## MOORE COUNTY

Amendment

PUBLIC COPY of 3 of 4 Yes  No

## Contributions from Individuals

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	
COMMITTEE TO ELECT ANN PETERSEN					
3. Contributor Information <input checked="" type="checkbox"/>			Add <input type="checkbox"/>	Remove <input type="checkbox"/>	
a. Full Name, Mailing Address & Phone (include city, state, & zip)  LYNN ANDERSON 530 ORCHARD ROAD SOUTHERN PINES, NC 28387			b. Job Title/Profession  ARCHITECT		d. Comments
			c. Employer's Name/Specific Field  ANDERSON ARCHITECTURE		e. Election Sum to Date  \$ 100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	CHECK		10/07/2021	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input checked="" type="checkbox"/>			Add <input type="checkbox"/>	Remove <input type="checkbox"/>	
a. Full Name, Mailing Address & Phone (include city, state, & zip)  CAROLYN CLEMONS 403 TEAKWOOD LANE SOUTHERN PINES, NC 28387			b. Job Title/Profession  NO JOB TITLE		d. Comments
			c. Employer's Name/Specific Field  NOT EMPLOYED		e. Election Sum to Date  \$ 100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	CHECK		10/07/2021	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input checked="" type="checkbox"/>			Add <input type="checkbox"/>	Remove <input type="checkbox"/>	
a. Full Name, Mailing Address & Phone (include city, state, & zip)  RUTH PETERSEN 116 HANOVER PLACE CHAPEL HILL, NC 27516			b. Job Title/Profession  SECTION DIRECTOR		d. Comments
			c. Employer's Name/Specific Field  CENTERS FOR DISEASE CONTROL		e. Election Sum to Date  \$ 100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	CHECK		10/07/2021	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 300.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 1,248.72

## MOORE COUNTY

## PUBLIC COPY

Pg 4 of 4

Amendment

 Yes  No

## Contributions from Individuals

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	
COMMITTEE TO ELECT ANN PETERSEN					
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)  BETTY BROWN 125 HORSESHOE ROAD SOUTHERN PINES, NC 28387			b. Job Title/Profession	d. Comments	
			NO JOB TITLE		
			c. Employer's Name/Specific Field		
			NOT EMPLOYED		
				e. Election Sum to Date	
				\$ 125.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input checked="" type="checkbox"/>	1	IN-KIND	FOOD	09/08/2021	\$ 25.00
<input type="checkbox"/>	1	CHECK		10/07/2021	\$ 100.00
<input type="checkbox"/>					\$
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)  MARGO TATGENHORST DRAKOS 225 SOUTH WEYMOUTH ROAD SOUTHERN PINES, NC 28387			b. Job Title/Profession	d. Comments	
			FOUNDER & CEO		
			c. Employer's Name/Specific Field		
			ARTISTYEAR		
				e. Election Sum to Date	
				\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	CHECK		10/14/2021	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)  SCOTT HARRIS 465 EAST INDIANA AVENUE SOUTHERN PINES, NC 28387			b. Job Title/Profession	d. Comments	
			NO JOB TITLE		
			c. Employer's Name/Specific Field		
			NOT EMPLOYED		
				e. Election Sum to Date	
				\$ 63.72	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	IN-KIND	FOOD/MEETING	10/17/2021	\$ 63.72
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page				\$ 438.72	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>				\$ 1,248.72	

# Disbursements

# MOORE COUNTY

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
COMMITTEE TO ELECT ANN PETERSEN					
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 checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  MOORE COUNTY BOARD OF ELECTION 700 PINEHURST AVENUE CARTHAGE, NC 28327			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal	<input type="checkbox"/> County:	
<input type="checkbox"/> State	<input checked="" type="checkbox"/> Municipality:				
			e. Election Sum to Date		\$ 31.36
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	CHECK	H	07/15/2021	\$5.00	M.C.B.O.E. FILING FEE
1	CHECK	O	10/11/2021	\$26.36	VOTER LISTS
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  DC'S CREATIVE CONCEPTS 4225 MURDOCKSVILLE ROAD WEST END, NC 27376			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal	<input type="checkbox"/> County:	
<input type="checkbox"/> State	<input checked="" type="checkbox"/> Municipality:				
			e. Election Sum to Date		\$ 769.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	CHECK	B	09/07/2021	\$481.50	SIGNS
1	CHECK	B	10/07/2021	\$287.50	SIGNS
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  JELLISON PRESS 160 PINEHURST AVENUE SUITE 1 SOUTHERN PINES, NC 28387			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal	<input type="checkbox"/> County:	
<input type="checkbox"/> State	<input checked="" type="checkbox"/> Municipality:				
			e. Election Sum to Date		\$ 85.60
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	CHECK	B	10/04/2021	\$85.60	HAND-OUT CARDS
				\$	
<b>5. Total only this Page</b>					\$ 885.96
<b>6. Total of ALL CRO-1310 Pages</b>					\$ 885.96
(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)					
<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)					

## MOORE COUNTY

PUBLIC COPY

Pg 1 of 1  Yes  No

## In-Kind Contributions

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>		<b>2. ID Number</b>	
COMMITTEE TO ELECT ANN PETERSEN			
<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>b. Type of Contributor</b>	<b>c. Comments</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>d. Election Sum to Date</b>  \$ 125.00	
<b>e. Description</b> FOOD FOR MEET & GREET		<b>f. Date (mm/dd/yyyy)</b> 09/08/2021	<b>g. Fair Market Amount</b> \$ 25.00
			\$
			\$
<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>b. Type of Contributor</b>	<b>c. Comments</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>d. Election Sum to Date</b>  \$ 197.20	
<b>e. Description</b> WIX.COM - WEBSITE CREATION		<b>f. Date (mm/dd/yyyy)</b> 08/10/2021	<b>g. Fair Market Amount</b> \$ 108.00
WINE INSIDERS.COM - BEVERAGES FOR MEET & GREET		10/01/2021	\$ 89.20
			\$
<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>b. Type of Contributor</b>	<b>c. Comments</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>d. Election Sum to Date</b>  \$ 63.72	
<b>e. Description</b> FOOD FOR MEET & GREET		<b>f. Date (mm/dd/yyyy)</b> 10/17/2021	<b>g. Fair Market Amount</b> \$ 63.72
			\$
			\$
<b>4. Total only this Page</b>			\$ 285.92
<b>5. Total of ALL CRO-1510 Pages</b> (This line must be on line 17 of Detailed Summary Page CRO-1100)			\$ 285.92