

# 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	SEP 29 2021	c. ID Number
LINDA FOR WP		
b. Mailing Address (include City, State and Zip Code)	d. Date Filed	
36 PINE RIDGE DRIVE WHISPERING PINES, NC 28327	09/25/2021	
		e. Phone Number

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2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2021	07/08/2021	09/21/2021	LYDIA BOESCH*

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

3. Account Information	3. Account Information
a. Financial Institution Full Name	a. Financial Institution Full Name
FIRST BANK	
b. Purpose	c. Account Code
TO COLLECT CAMPAIGN CONTRIBUTIONS AND PAY CAMPAIGN EXPENSES	1
d. Period Begin Balance	
\$ 50.00	
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

Lydia Boesch

Printed Name of Signer

Lydia Boesch

Signature of Appointed Treasurer

09/25/2021

Date

## FOR OFFICE USE ONLY

Date Received:	<u>9-29-21</u>	Employee:	<u>KS</u>	Delivery Method
Date Postmarked:	<u>9-27-21</u>	Employee:		<input checked="" type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input checked="" type="checkbox"/> Electronically Filed
Date Scanned:		Employee:		
Date Data Entered:		Employee:		<input type="checkbox"/> Signer has not received mandatory training

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

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

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Amendment  
 Yes  No

**Detailed Summary**

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
LINDA FOR WP	2021 Thirty-five-day	

Start of Election Cycle: January 1, 2021	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	\$ 50.00	\$ 0.00

**RECEIPTS**

5) Aggregated Contributions from Individuals <i>(CRO-1205)</i>	\$ 0.00	\$ 0.00
6) Contributions from Individuals <i>(CRO-1210)</i>	\$ 1,993.48	\$ 2,588.99
7) Contributions from Political Party Committees <i>(CRO-1220)</i>	\$ 0.00	\$ 0.00
8) Contributions from Other Political Committees <i>(CRO-1230)</i>	\$ 0.00	\$ 0.00
9) Loan Proceeds <i>(CRO-1410)</i>	\$ 0.00	\$ 0.00
10) Refunds/Reimbursements to the Committee <i>(CRO-1240)</i>	\$ 0.00	\$ 0.00
11) Other Receipt Sources		
11a) Interest on Bank Accounts <i>(CRO-1250)</i>	\$ 0.00	\$ 0.00
11b) Contributions from Not-For-Profit Organizations <i>(CRO-1250)</i>	\$ 0.00	\$ 0.00
11c) Outside Sources of Income <i>(CRO-1250)</i>	\$ 0.00	\$ 0.00
11d) Legal Expense Fund - Other Sources <i>(CRO-1270)</i>	\$ 0.00	\$ 0.00
11e) Exempt Purchase Price Sales <i>(CRO-1265)</i>	\$ 0.00	\$ 0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)	\$ 1,993.48	\$ 2,588.99

**EXPENDITURES**

13) Disbursements		
13a) Operating Expenditures <i>(CRO-1310)</i>	\$ 0.00	\$ 0.00
13b) Contributions to Candidates/Political Committees <i>(CRO-1310)</i>	\$ 0.00	\$ 0.00
13c) Coordinated Party Expenditures <i>(CRO-1310)</i>	\$ 0.00	\$ 0.00
14) Aggregated Non-Media Expenditures <i>(CRO-1315)</i>	\$ 0.00	\$ 0.00
15) Loan Repayments <i>(CRO-1420)</i>	\$ 0.00	\$ 0.00
16) Refunds/Reimbursements from the Committee <i>(CRO-1320)</i>	\$ 0.00	\$ 0.00
17) In-Kind Contributions <i>(CRO-1510)</i>	\$ 1,578.48	\$ 2,123.99
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 1,578.48	\$ 2,123.99
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 465.00	\$ 465.00

**ADDITIONAL INFORMATION**

20) Non-Monetary Gifts Given to Other Committees <i>(CRO-1330)</i>	\$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns) <i>(CRO-1430)</i>	\$ 0.00	
22) Debts and Obligations owed by the Committee <i>(CRO-1610)</i>	\$ 0.00	
23) Debts and Obligations owed to the Committee <i>(CRO-1620)</i>	\$ 0.00	
24) Account Transfers Within the Committee <i>(CRO-1720)</i>	\$ 0.00	
25) Administrative Support <i>(CRO-1710)</i>	\$ 0.00	\$ 0.00
26) Forgiven Loans <i>(CRO-1440)</i>	\$ 0.00	\$ 0.00
27) 48-Hour Notice Reports Sum <i>(CRO-2220)</i>	\$ 0.00	\$ 0.00
28) Contributions to be Refunded <i>(CRO-1215)</i>	\$ 0.00	\$ 0.00

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Contributions from Individuals

Pg 1 of 5

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			
LINDA FOR WP					
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession RETIRED	d. Comments	
HENRY CATINELLA 3096 RHODA STREET GRAND BLANC, MI 48507			c. Employer's Name/Specific Field RETIRED	e. Election Sum to Date \$ 20.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	Cash		09/18/2021	\$ 20.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession RETIRED	d. Comments	
MIKE FREIDEL 125 DEVONSHIRE AVE WEST END, NC 27326			c. Employer's Name/Specific Field RETIRED	e. Election Sum to Date \$ 40.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	Cash		09/18/2021	\$ 40.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession RETIRED	d. Comments	
JUDY GENESER 78 CARDINAL LANE WHISPERING PINES, NC 28327			c. Employer's Name/Specific Field RETIRED	e. Election Sum to Date \$ 50.00	
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		09/18/2021	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>4. Total only this Page</b> \$ 110.00					
<b>5. Total of ALL CRO-1210 Pages</b> \$ 1,993.48 <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>					

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Amendment  
 Yes  No

Contributions from Individuals

Pg 2 of 5

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																																							
LINDA FOR WP																																									
<p><b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove</p> <table border="1"> <tr> <td>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</td> <td>b. Job Title/Profession</td> <td colspan="4">d. Comments</td> </tr> <tr> <td>JEANNE HAMMOND 4 VINSON LANE PINEHURST, NC 28374</td> <td>RETIRED</td> <td colspan="4"></td> </tr> <tr> <td></td> <td>c. Employer's Name/Specific Field</td> <td colspan="4"></td> </tr> <tr> <td></td> <td>RETIRED</td> <td colspan="4"></td> </tr> <tr> <td></td> <td>e. Election Sum to Date</td> <td colspan="4"></td> </tr> <tr> <td></td> <td>\$ 20.00</td> <td colspan="4"></td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments				JEANNE HAMMOND 4 VINSON LANE PINEHURST, NC 28374	RETIRED						c. Employer's Name/Specific Field						RETIRED						e. Election Sum to Date						\$ 20.00				
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments																																							
JEANNE HAMMOND 4 VINSON LANE PINEHURST, NC 28374	RETIRED																																								
	c. Employer's Name/Specific Field																																								
	RETIRED																																								
	e. Election Sum to Date																																								
	\$ 20.00																																								
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount																																				
<input type="checkbox"/>	1	Cash		09/18/2021	\$ 20.00																																				
<input type="checkbox"/>					\$																																				
<input type="checkbox"/>					\$																																				
<p><b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove</p> <table border="1"> <tr> <td>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</td> <td>b. Job Title/Profession</td> <td colspan="4">d. Comments</td> </tr> <tr> <td>EARL KEY 207 TARTAN TRAIL SOUTHERN PINES, NC 28387</td> <td>MARKETING</td> <td colspan="4"></td> </tr> <tr> <td></td> <td>c. Employer's Name/Specific Field</td> <td colspan="4"></td> </tr> <tr> <td></td> <td>RETIRED</td> <td colspan="4"></td> </tr> <tr> <td></td> <td>e. Election Sum to Date</td> <td colspan="4"></td> </tr> <tr> <td></td> <td>\$ 20.00</td> <td colspan="4"></td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments				EARL KEY 207 TARTAN TRAIL SOUTHERN PINES, NC 28387	MARKETING						c. Employer's Name/Specific Field						RETIRED						e. Election Sum to Date						\$ 20.00				
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments																																							
EARL KEY 207 TARTAN TRAIL SOUTHERN PINES, NC 28387	MARKETING																																								
	c. Employer's Name/Specific Field																																								
	RETIRED																																								
	e. Election Sum to Date																																								
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f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount																																				
<input type="checkbox"/>	1	Cash		09/18/2021	\$ 20.00																																				
<input type="checkbox"/>					\$																																				
<input type="checkbox"/>					\$																																				
<p><b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove</p> <table border="1"> <tr> <td>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</td> <td>b. Job Title/Profession</td> <td colspan="4">d. Comments</td> </tr> <tr> <td>JENNIFER KING 30 LAKE HILLS DRIVE PINEHURST, NC 28374</td> <td>RETIRED</td> <td colspan="4"></td> </tr> <tr> <td></td> <td>c. Employer's Name/Specific Field</td> <td colspan="4"></td> </tr> <tr> <td></td> <td>RETIRED</td> <td colspan="4"></td> </tr> <tr> <td></td> <td>e. Election Sum to Date</td> <td colspan="4"></td> </tr> <tr> <td></td> <td>\$ 20.00</td> <td colspan="4"></td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments				JENNIFER KING 30 LAKE HILLS DRIVE PINEHURST, NC 28374	RETIRED						c. Employer's Name/Specific Field						RETIRED						e. Election Sum to Date						\$ 20.00				
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments																																							
JENNIFER KING 30 LAKE HILLS DRIVE PINEHURST, NC 28374	RETIRED																																								
	c. Employer's Name/Specific Field																																								
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	e. Election Sum to Date																																								
	\$ 20.00																																								
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount																																				
<input type="checkbox"/>	1	Cash		09/18/2021	\$ 20.00																																				
<input type="checkbox"/>					\$																																				
<input type="checkbox"/>					\$																																				
4. Total only this Page \$ 60.00																																									
5. Total of ALL CRO-1210 Pages \$ 1,993.48 (This line must be on line 6 of Detailed Summary Page CRO-1100)																																									

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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

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
LINDA FOR WP					
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  MITCHELL O LANCASTER 40 REDTAIL LANE PINEHURST, NC 28374			<b>b. Job Title/Profession</b>	<b>d. Comments</b>	
			BANKING		
<b>c. Employer's Name/Specific Field</b>  ATM USA			<b>e. Election Sum to Date</b>		
			\$ 200.00		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	1	Check		08/17/2021	\$ 200.00
<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 (include city, state, &amp; zip)</b>  MARGARET S SMETANA 2 SQUIRES LANE PINEHURST, NC 28374			<b>b. Job Title/Profession</b>	<b>d. Comments</b>	
			RETIRED CPA		
<b>c. Employer's Name/Specific Field</b>  AMERICAN EXPRESS TAX & BUSINESS			<b>e. Election Sum to Date</b>		
			\$ 25.00		
<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		09/18/2021	\$ 25.00
<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 (include city, state, &amp; zip)</b>  MARGE SWIERZ 1 OAK TREE LANE PINEHURST, NC 28374			<b>b. Job Title/Profession</b>	<b>d. Comments</b>	
			NURSING		
<b>c. Employer's Name/Specific Field</b>  RETIRE			<b>e. Election Sum to Date</b>		
			\$ 20.00		
<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	Cash		09/18/2021	\$ 20.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>4. Total only this Page</b>					\$ 245.00
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 1,993.48

**MOORE COUNTY**  
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Pg 4 of 5

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

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
LINDA FOR WP					
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  LINDA VANDERCOOK 36 PINE RIDGE DR WHISPERING PINES, NC 28327 (253) 267-4345			<b>b. Job Title/Profession</b>	<b>d. Comments</b>	
			OPERATIONS PROGRAM MANAGER		
			<b>c. Employer's Name/Specific Field</b>		
			THRIFTBOOKS		
			<b>e. Election Sum to Date</b>		
			\$ 2,173.99		
<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	In-Kind	BOOTH SUPPLIES - CANDY, STAND	07/10/2021	\$ 27.89
<input type="checkbox"/>	1	In-Kind	BOOTH SUPPLIES - EASEL, CLIPBOARD	07/10/2021	\$ 48.48
<input type="checkbox"/>	1	In-Kind	PRINTED MAPS	07/10/2021	\$ 51.01
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  LINDA VANDERCOOK 36 PINE RIDGE DR WHISPERING PINES, NC 28327 (253) 267-4345			<b>b. Job Title/Profession</b>	<b>d. Comments</b>	
			OPERATIONS PROGRAM MANAGER		
			<b>c. Employer's Name/Specific Field</b>		
			THRIFTBOOKS		
			<b>e. Election Sum to Date</b>		
			\$ 2,173.99		
<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	In-Kind	WEBSITE MONTHLY	07/20/2021	\$ 16.00
<input type="checkbox"/>	1	In-Kind	WEB SITE ANNUAL	07/20/2021	\$ 128.52
<input type="checkbox"/>	1	In-Kind	STICKERS	07/21/2021	\$ 31.16
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  LINDA VANDERCOOK 36 PINE RIDGE DR WHISPERING PINES, NC 28327 (253) 267-4345			<b>b. Job Title/Profession</b>	<b>d. Comments</b>	
			OPERATIONS PROGRAM MANAGER		
			<b>c. Employer's Name/Specific Field</b>		
			THRIFTBOOKS		
			<b>e. Election Sum to Date</b>		
			\$ 2,173.99		
<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	In-Kind	DOOR HANGERS	07/25/2021	\$ 158.97
<input type="checkbox"/>	1	In-Kind	PRINTED MAPS FROM VILLAGE OF	07/26/2021	\$ 5.00
<input type="checkbox"/>	1	In-Kind	THANK YOU CARDS	08/01/2021	\$ 13.98
<b>4. Total only this Page</b>					\$ 481.01
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 1,993.48

## MOORE COUNTY

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## Contributions from Individuals

 Pg 5 of 6

 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			
LINDA FOR WP					
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  LINDA VANDERCOOK 36 PINE RIDGE DR WHISPERING PINES, NC 28327 (253) 267-4345			<b>b. Job Title/Profession</b>  OPERATIONS PROGRAM MANAGER	<b>d. Comments</b>  THRIFTBOOKS	
			<b>c. Employer's Name/Specific Field</b>  THRIFTBOOKS	<b>e. Election Sum to Date</b>  \$ 2,173.99	
<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	In-Kind	PALM CARDS	08/06/2021	\$ 96.30
<input type="checkbox"/>	1	In-Kind	SIGNS	08/12/2021	\$ 345.00
<input type="checkbox"/>	1	In-Kind	STICKERS	08/21/2021	\$ 78.63
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  LINDA VANDERCOOK 36 PINE RIDGE DR WHISPERING PINES, NC 28327 (253) 267-4345			<b>b. Job Title/Profession</b>  OPERATIONS PROGRAM MANAGER	<b>d. Comments</b>  THRIFTBOOKS	
			<b>c. Employer's Name/Specific Field</b>  THRIFTBOOKS	<b>e. Election Sum to Date</b>  \$ 2,173.99	
<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	In-Kind	LAWN SIGNS BALANCE DUE	08/26/2021	\$ 346.49
<input type="checkbox"/>	1	In-Kind	STICKERS, BUSINESS CARDS, ADDRESS	09/06/2021	\$ 100.55
<input type="checkbox"/>	1	In-Kind	SIGN RULE CARDS	09/15/2021	\$ 32.10
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  LINDA VANDERCOOK 36 PINE RIDGE DR WHISPERING PINES, NC 28327 (253) 267-4345			<b>b. Job Title/Profession</b>  OPERATIONS PROGRAM MANAGER	<b>d. Comments</b>  THRIFTBOOKS	
			<b>c. Employer's Name/Specific Field</b>  THRIFTBOOKS	<b>e. Election Sum to Date</b>  \$ 2,173.99	
<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	In-Kind	SIGN SUPPLIES	09/17/2021	\$ 98.40
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>4. Total only this Page</b> \$ 1,097.47					
<b>5. Total of ALL CRO-1210 Pages</b> \$ 1,993.48 <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					

## MOORE COUNTY

### Amendment

Page 1 of 2  Yes  No

## In-Kind Contributions

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

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

1. Committee Full Name (and Fund if applicable)		2. ID Number	
LINDA FOR WP			
3. Contributor Information		<input type="checkbox"/> Add	<input type="checkbox"/> Remove
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
LINDA VANDERCOOK 36 PINE RIDGE DR WHISPERING PINES, NC 28327 (253) 267-4345		<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	d. Election Sum to Date
			\$ 2,173.99
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
BOOTH SUPPLIES - CANDY, STAND		07/10/2021	\$ 27.89
BOOTH SUPPLIES - EASEL, CLIPBOARD		07/10/2021	\$ 48.48
PRINTED MAPS		07/10/2021	\$ 51.01
3. Contributor Information		<input type="checkbox"/> Add	<input type="checkbox"/> Remove
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
LINDA VANDERCOOK 36 PINE RIDGE DR WHISPERING PINES, NC 28327 (253) 267-4345		<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	d. Election Sum to Date
			\$ 2,173.99
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
WEBSITE MONTHLY		07/20/2021	\$ 16.00
WEB SITE ANNUAL		07/20/2021	\$ 128.52
STICKERS		07/21/2021	\$ 31.16
3. Contributor Information		<input type="checkbox"/> Add	<input type="checkbox"/> Remove
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
LINDA VANDERCOOK 36 PINE RIDGE DR WHISPERING PINES, NC 28327 (253) 267-4345		<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	d. Election Sum to Date
			\$ 2,173.99
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
DOOR HANGERS		07/25/2021	\$ 158.97
PRINTED MAPS FROM VILLAGE OF WHISPERING PINES		07/26/2021	\$ 5.00
THANK YOU CARDS		08/01/2021	\$ 13.98
4. Total only this Page		\$ 481.01	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 1,578.48	

**MOORE COUNTY  
PUBLIC COPY**

Amendment

Pg 2 of 2  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>
LINDA FOR WP		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove		
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  LINDA VANDERCOOK 36 PINE RIDGE DR WHISPERING PINES, NC 28327 (253) 267-4345	<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> \$ 2,173.99
<b>e. Description</b> PALM CARDS	<b>f. Date (mm/dd/yyyy)</b> 08/06/2021	<b>g. Fair Market Amount</b> \$ 96.30
SIGNS	08/12/2021	\$ 345.00
STICKERS	08/21/2021	\$ 78.63
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove		
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  LINDA VANDERCOOK 36 PINE RIDGE DR WHISPERING PINES, NC 28327 (253) 267-4345	<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> \$ 2,173.99
<b>e. Description</b> LAWN SIGNS BALANCE DUE	<b>f. Date (mm/dd/yyyy)</b> 08/26/2021	<b>g. Fair Market Amount</b> \$ 346.49
STICKERS, BUSINESS CARDS, ADDRESS LABELS	09/06/2021	\$ 100.55
SIGN RULE CARDS	09/15/2021	\$ 32.10
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove		
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  LINDA VANDERCOOK 36 PINE RIDGE DR WHISPERING PINES, NC 28327 (253) 267-4345	<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> \$ 2,173.99
<b>e. Description</b> SIGN SUPPLIES	<b>f. Date (mm/dd/yyyy)</b> 09/17/2021	<b>g. Fair Market Amount</b> \$ 98.40
		\$
		\$
<b>4. Total only this Page</b>		\$ 1,097.47
<b>5. Total of ALL CRO-1510 Pages</b> <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		\$ 1,578.48