

# Disclosure Report Cover

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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
RE-ELECT LYDIA	
b. Mailing Address (include City, State and Zip Code)	d. Date Filed
35 MCMICHAEL DRIVE PINEHURST, NC 28374	10/29/2023
	e. Phone Number

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2023	09/27/2023	10/23/2023	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 checked="" type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<b>State/County</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<b>Referendum</b> <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
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"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:			
8. Number of Fundraisers this Report			
0			

3. Account Information	3. Account Information
a. Financial Institution Full Name	a. Financial Institution Full Name
FIRST BANK	
b. Purpose	c. Account Code
CAMPAIGN CONTRIBUTIONS AND EXPENDITURES	1A
	d. Period Begin Balance
	\$ 4,777.05
b. Purpose	c. 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

LYDIA BOESCH

Printed Name of Signer

Lydia Boesch

Signature of Appointed Treasurer

10/29/2023

Date

## FOR OFFICE USE ONLY

Date Received: \_\_\_\_\_

Employee: \_\_\_\_\_

**RECEIVED**

### Delivery Method

- Normal Mail
- Registered Mail
- Hand Delivered
- Electronically Filed

Date Postmarked: \_\_\_\_\_

Employee: \_\_\_\_\_

NOV 02 2023

Date Scanned: \_\_\_\_\_

Employee: \_\_\_\_\_

Date Data Entered: \_\_\_\_\_

Employee: \_\_\_\_\_

**MOORE BOE**

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

Use this form to summarize all disclosure reporting forms and to total monetary information

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

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number	
RE-ELECT LYDIA	2023 Pre-Election		
Start of Election Cycle: January 1, 2023		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 4,777.05	\$ 0.00
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 60.00	\$ 180.00
6) Contributions from Individuals	(CRO-1210)	\$ 4,851.76	\$ 23,940.17
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0.00	\$ 0.00
8) Contributions from Other Political Committees	(CRO-1230)	\$ 2,500.00	\$ 2,500.00
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)		\$ 7,411.76	\$ 26,620.17
<b>EXPENDITURES</b>			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 3,582.44	\$ 4,850.39
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)	\$ 6.07	\$ 8.12
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)	\$ 921.00	\$ 14,082.36
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 4,509.51	\$ 18,940.87
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 7,679.30	\$ 7,679.30
<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)	\$ 0.00	
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-3330)	\$ 0.00	\$ 0.00
28) Contributions to be Refunded	(CRO-1215)	\$ 0.00	\$ 0.00

**Aggregated Contributions from Individuals** Page 1 of 1

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

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

<b>1. Committee Full Name (and Fund if applicable)</b> RE-ELECT LYDIA			<b>2. ID Number</b>		
<b>3. Contributor Information</b>					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/> Add	1A	Credit Card		10/04/2023	\$ 10.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1A	Check		09/30/2023	\$ 50.00
<input type="checkbox"/> Remove					
<b>4. Total only this Page</b>					
<b>5. Total of ALL CRO-1205 Pages</b> <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					

CRO-1205

NC State Board of Elections

April 2007

# 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

<b>1. Committee Full Name (and Fund if applicable)</b> RE-ELECT LYDIA		<b>2. ID Number</b>							
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  LYDIA BOESCH* 35 MCMICHAEL DR PINEHURST, NC 28374-6702</td> <td><b>b. Job Title/Profession</b> ATTORNEY</td> <td><b>d. Comments</b></td> </tr> <tr> <td></td> <td><b>c. Employer's Name/Specific Field</b> SELF-EMPLOYED</td> <td><b>e. Election Sum to Date</b> \$ 13,682.36</td> </tr> </table>				<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  LYDIA BOESCH* 35 MCMICHAEL DR PINEHURST, NC 28374-6702	<b>b. Job Title/Profession</b> ATTORNEY	<b>d. Comments</b>		<b>c. Employer's Name/Specific Field</b> SELF-EMPLOYED	<b>e. Election Sum to Date</b> \$ 13,682.36
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  LYDIA BOESCH* 35 MCMICHAEL DR PINEHURST, NC 28374-6702	<b>b. Job Title/Profession</b> ATTORNEY	<b>d. Comments</b>							
	<b>c. Employer's Name/Specific Field</b> SELF-EMPLOYED	<b>e. Election Sum to Date</b> \$ 13,682.36							
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>						
<input type="checkbox"/>	1A	In-Kind	SPONSORSHIP AT PINEWILD VETERANS						
<input type="checkbox"/>	1A	In-Kind	REFRESHMENTS FOR KELLY CHANCE M&G						
<input type="checkbox"/>	1A	In-Kind	SOCIAL MEDIA SERVICES						
<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>								
09/28/2023	\$ 250.00								
10/13/2023	\$ 71.00								
10/17/2023	\$ 600.00								
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  GREG BRYANT 5 FOX HOUND RUN PINEHURST, NC 28374</td> <td><b>b. Job Title/Profession</b> MANAGING PARTNER</td> <td><b>d. Comments</b></td> </tr> <tr> <td></td> <td><b>c. Employer's Name/Specific Field</b> BILT GROUP</td> <td><b>e. Election Sum to Date</b> \$ 52.05</td> </tr> </table>				<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  GREG BRYANT 5 FOX HOUND RUN PINEHURST, NC 28374	<b>b. Job Title/Profession</b> MANAGING PARTNER	<b>d. Comments</b>		<b>c. Employer's Name/Specific Field</b> BILT GROUP	<b>e. Election Sum to Date</b> \$ 52.05
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  GREG BRYANT 5 FOX HOUND RUN PINEHURST, NC 28374	<b>b. Job Title/Profession</b> MANAGING PARTNER	<b>d. Comments</b>							
	<b>c. Employer's Name/Specific Field</b> BILT GROUP	<b>e. Election Sum to Date</b> \$ 52.05							
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>						
<input type="checkbox"/>	1A	Credit Card							
<input type="checkbox"/>									
<input type="checkbox"/>									
<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>								
10/11/2023	\$ 52.05								
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  SCOTT GREENBLATT 100 BROOKHAVEN ROAD PINEHURST, NC 28374</td> <td><b>b. Job Title/Profession</b> CEO</td> <td><b>d. Comments</b></td> </tr> <tr> <td></td> <td><b>c. Employer's Name/Specific Field</b> VETERANS GUARDIAN VA CLAIM CONSULTING</td> <td><b>e. Election Sum to Date</b> \$ 1,500.00</td> </tr> </table>				<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  SCOTT GREENBLATT 100 BROOKHAVEN ROAD PINEHURST, NC 28374	<b>b. Job Title/Profession</b> CEO	<b>d. Comments</b>		<b>c. Employer's Name/Specific Field</b> VETERANS GUARDIAN VA CLAIM CONSULTING	<b>e. Election Sum to Date</b> \$ 1,500.00
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  SCOTT GREENBLATT 100 BROOKHAVEN ROAD PINEHURST, NC 28374	<b>b. Job Title/Profession</b> CEO	<b>d. Comments</b>							
	<b>c. Employer's Name/Specific Field</b> VETERANS GUARDIAN VA CLAIM CONSULTING	<b>e. Election Sum to Date</b> \$ 1,500.00							
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>						
<input type="checkbox"/>	1A	Credit Card							
<input type="checkbox"/>									
<input type="checkbox"/>									
<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>								
10/11/2023	\$ 1,500.00								
<b>4. Total only this Page</b> \$ 2,473.05									
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> \$ 4,851.76									

# Contributions from Individuals

PG 2 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

<b>1. Committee Full Name (and Fund if applicable)</b> RE-ELECT LYDIA					<b>2. ID Number</b>							
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  RALPH HENDRIX 13 OXTON CIRCLE PINEHURST, NC 28374</td> <td><b>b. Job Title/Profession</b> EYE CARE</td> <td><b>d. Comments</b></td> </tr> <tr> <td></td> <td><b>c. Employer's Name/Specific Field</b> SELF</td> <td><b>e. Election Sum to Date</b> \$ 200.00</td> </tr> </table>							<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  RALPH HENDRIX 13 OXTON CIRCLE PINEHURST, NC 28374	<b>b. Job Title/Profession</b> EYE CARE	<b>d. Comments</b>		<b>c. Employer's Name/Specific Field</b> SELF	<b>e. Election Sum to Date</b> \$ 200.00
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  RALPH HENDRIX 13 OXTON CIRCLE PINEHURST, NC 28374	<b>b. Job Title/Profession</b> EYE CARE	<b>d. Comments</b>										
	<b>c. Employer's Name/Specific Field</b> SELF	<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"/>	1A	Check		10/16/2023	\$ 200.00							
<input type="checkbox"/>					\$							
<input type="checkbox"/>					\$							
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  FAISON KUESTER 4140 SHARON COMMONS LANE CHARLOTTE, NC 28210</td> <td><b>b. Job Title/Profession</b> PROPERTY DEVELOPMENT</td> <td><b>d. Comments</b></td> </tr> <tr> <td></td> <td><b>c. Employer's Name/Specific Field</b> SELF</td> <td><b>e. Election Sum to Date</b> \$ 500.00</td> </tr> </table>							<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  FAISON KUESTER 4140 SHARON COMMONS LANE CHARLOTTE, NC 28210	<b>b. Job Title/Profession</b> PROPERTY DEVELOPMENT	<b>d. Comments</b>		<b>c. Employer's Name/Specific Field</b> SELF	<b>e. Election Sum to Date</b> \$ 500.00
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  FAISON KUESTER 4140 SHARON COMMONS LANE CHARLOTTE, NC 28210	<b>b. Job Title/Profession</b> PROPERTY DEVELOPMENT	<b>d. Comments</b>										
	<b>c. Employer's Name/Specific Field</b> SELF	<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"/>	1A	Check		10/21/2023	\$ 500.00							
<input type="checkbox"/>					\$							
<input type="checkbox"/>					\$							
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  MARCUS LAROSE 85 PONTE VEDRA DR PINEHURST, NC 28374</td> <td><b>b. Job Title/Profession</b> OWNER BROKER</td> <td><b>d. Comments</b></td> </tr> <tr> <td></td> <td><b>c. Employer's Name/Specific Field</b> SANDHILLS RENTALS, LLC</td> <td><b>e. Election Sum to Date</b> \$ 520.51</td> </tr> </table>							<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  MARCUS LAROSE 85 PONTE VEDRA DR PINEHURST, NC 28374	<b>b. Job Title/Profession</b> OWNER BROKER	<b>d. Comments</b>		<b>c. Employer's Name/Specific Field</b> SANDHILLS RENTALS, LLC	<b>e. Election Sum to Date</b> \$ 520.51
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  MARCUS LAROSE 85 PONTE VEDRA DR PINEHURST, NC 28374	<b>b. Job Title/Profession</b> OWNER BROKER	<b>d. Comments</b>										
	<b>c. Employer's Name/Specific Field</b> SANDHILLS RENTALS, LLC	<b>e. Election Sum to Date</b> \$ 520.51										
<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"/>	1A	Credit Card		10/04/2023	\$ 520.51							
<input type="checkbox"/>					\$							
<input type="checkbox"/>					\$							
<b>4. Total only this Page</b>					\$ 1,220.51							
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 4,851.76							

# Contributions from Individuals

Page 3 of 5

Amendment  
 Yes  No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1203 is not used

<b>1. Committee Full Name (and Fund if applicable)</b> RE-ELECT LYDIA		<b>2. ID Number</b>											
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  STUART MILLS PO BOX 1479 PINEHURST, NC 28374</td> <td><b>b. Job Title/Profession</b> EXECUTIVE DIRECTOR</td> <td colspan="2"><b>d. Comments</b></td> </tr> <tr> <td></td> <td><b>c. Employer's Name/Specific Field</b> PARTNERS FOR CHILDREN FAMILIES</td> <td colspan="2"><b>e. Election Sum to Date</b> \$ 250.00</td> </tr> </table>				<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  STUART MILLS PO BOX 1479 PINEHURST, NC 28374	<b>b. Job Title/Profession</b> EXECUTIVE DIRECTOR	<b>d. Comments</b>			<b>c. Employer's Name/Specific Field</b> PARTNERS FOR CHILDREN FAMILIES	<b>e. Election Sum to Date</b> \$ 250.00			
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  STUART MILLS PO BOX 1479 PINEHURST, NC 28374	<b>b. Job Title/Profession</b> EXECUTIVE DIRECTOR	<b>d. Comments</b>											
	<b>c. Employer's Name/Specific Field</b> PARTNERS FOR CHILDREN FAMILIES	<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"/>	1A	Credit Card		10/11/2023	\$ 250.00								
<input type="checkbox"/>					\$								
<input type="checkbox"/>					\$								
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  ROBERT MIRMAN 45 PINE VALLEY ROAD PINEHURST, NC 28374</td> <td><b>b. Job Title/Profession</b> CEO</td> <td colspan="2"><b>d. Comments</b></td> </tr> <tr> <td></td> <td><b>c. Employer's Name/Specific Field</b> ELIANT</td> <td colspan="2"><b>e. Election Sum to Date</b> \$ 100.00</td> </tr> </table>				<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  ROBERT MIRMAN 45 PINE VALLEY ROAD PINEHURST, NC 28374	<b>b. Job Title/Profession</b> CEO	<b>d. Comments</b>			<b>c. Employer's Name/Specific Field</b> ELIANT	<b>e. Election Sum to Date</b> \$ 100.00		<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  ROBERT MIRMAN 45 PINE VALLEY ROAD PINEHURST, NC 28374	<b>b. Job Title/Profession</b> CEO	<b>d. Comments</b>											
	<b>c. Employer's Name/Specific Field</b> ELIANT	<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"/>	1A	Check		10/09/2023	\$ 100.00								
<input type="checkbox"/>					\$								
<input type="checkbox"/>					\$								
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1"> <tr> <td><b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  RICHARD NORDLAND 100 LAKE SHORE DRIVE PINEHURST, NC 28374</td> <td><b>b. Job Title/Profession</b> DIRECTOR OF SALES</td> <td colspan="2"><b>d. Comments</b></td> </tr> <tr> <td></td> <td><b>c. Employer's Name/Specific Field</b> NORDLAND PRODUCTS INC</td> <td colspan="2"><b>e. Election Sum to Date</b> \$ 154.10</td> </tr> </table>				<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  RICHARD NORDLAND 100 LAKE SHORE DRIVE PINEHURST, NC 28374	<b>b. Job Title/Profession</b> DIRECTOR OF SALES	<b>d. Comments</b>			<b>c. Employer's Name/Specific Field</b> NORDLAND PRODUCTS INC	<b>e. Election Sum to Date</b> \$ 154.10		<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b>  RICHARD NORDLAND 100 LAKE SHORE DRIVE PINEHURST, NC 28374	<b>b. Job Title/Profession</b> DIRECTOR OF SALES	<b>d. Comments</b>											
	<b>c. Employer's Name/Specific Field</b> NORDLAND PRODUCTS INC	<b>e. Election Sum to Date</b> \$ 154.10											
<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"/>	1A	Credit Card		10/11/2023	\$ 154.10								
<input type="checkbox"/>					\$								
<input type="checkbox"/>					\$								
<b>4. Total only this Page</b>				<b>k. Amount</b>	\$ 504.10								
<b>5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)</b>				<b>k. Amount</b>	\$ 4,851.76								

# Contributions from Individuals

Pg 4 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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>
RE-ELECT LYDIA						
<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> NO JOB TITLE	<b>d. Comments</b>		
KEVIN REED 205 MCCASKILL RD E APT 114 PINEHURST, NC 28374			<b>c. Employer's Name/Specific Field</b> NOT EMPLOYED	<b>e. Election Sum to Date</b> \$ 104.10		
<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"/>	1A	Credit Card		10/11/2023	\$ 104.10	
<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> OWNER	<b>d. Comments</b>		
ALISON RICHARDSON 64 KILBRIDE DR PINEHURST, NC 28374			<b>c. Employer's Name/Specific Field</b> GENTLE RENEW LLC	<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"/>	1A	Credit Card		10/11/2023	\$ 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> NO JOB TITLE	<b>d. Comments</b>		
RICHARD L STEERE 73 STONEYKIRK DR PINEHURST, NC 28374			<b>c. Employer's Name/Specific Field</b> NOT EMPLOYED	<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"/>	1A	Check		09/27/2023	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>						\$ 304.10
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 4,851.76

# Contributions from Individuals

Page 5 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

<b>1. Committee Full Name (and Fund if applicable)</b> RE-ELECT LYDIA		<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 (include city, state, &amp; zip)</b>  ROBERT THRUSH PO BOX 3371 PINEHURST, NC 28374		<b>b. Job Title/Profession</b> NO JOB TITLE			
		<b>c. Employer's Name/Specific Field</b> NOT EMPLOYED			
<b>d. Comments</b>					
<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"/>	1A	Money Order		10/17/2023	\$ 250.00
<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>  PAULI LOHSE WELLS 250 FRYE ROAD PINEHURST, NC 28374		<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> \$ 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"/>	1A	Check		10/23/2023	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>4. Total only this Page</b>					\$ 350.00
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 4,851.76

**Contributions from Other Political Committees** Pg. 1 of 1

**Amendment**  
 Yes  No

Use this form to report contributions from other candidate, referendum or PAC committees

<b>1. Committee Full Name (and Fund if applicable)</b> RE-ELECT LYDIA		<b>2. ID Number</b>		
<b>3. Contributor Information</b> <div style="display: flex; justify-content: space-between;"> <span><input type="checkbox"/> Add</span> <span><input type="checkbox"/> Remove</span> </div>				
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  BISHOP FOR CONGRESS 1531 MILLBRIDGE PKWY WAXHAW, NC 28173		<b>b. Type of Committee</b> <div style="display: flex; justify-content: space-between;"> <input checked="" type="checkbox"/> Candidate           <input type="checkbox"/> PAC         </div> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Referendum           <input type="checkbox"/> County:         </div> <div style="display: flex; justify-content: space-between;"> <input checked="" type="checkbox"/> Federal           <input type="checkbox"/> Municipality:         </div> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> State           <input type="checkbox"/> Municipality:         </div>	<b>d. Comments</b>	
			<b>e. Election Sum to Date</b> \$ 2,500.00	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. In-Kind Description</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>
1A	Check		09/29/2023	\$ 2,500.00
				\$
				\$
<b>4. Total only this Page</b>				\$ 2,500.00
<b>5. Total of ALL CRO-1230 Pages</b> <i>(This line must be on line 8 of Detailed Summary Page CRO-1100)</i>				\$ 2,500.00

**CRO-1230**

NC State Board of Elections

April 2007

# Disbursements

Pg 1 of 1

Amendment  
 Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>			
RE-ELECT LYDIA					
<b>3. Type of Disbursement</b> (Please use separate CRO-1310 forms for each type of Disbursement.)					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b> MEDA CORPORATION 65 TOWN MOUNTAIN ROAD ASHEVILLE, NC 28804		<b>b. Coordinated Committee Name</b>  <b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	<b>d. Comments</b>  <b>e. Election Sum to Date</b> \$ 2,330.50		
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>		
1A	Check	B	10/19/2023		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b> WEEB BROADCASTING STATION PO BOX 1855 SOUTHERN PINES, NC 28388		<b>b. Coordinated Committee Name</b>  <b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	<b>d. Comments</b>  <b>e. Election Sum to Date</b> \$ 1,152.00		
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>		
1A	Check	A	09/29/2023		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</b> WINRED 1776 WILSON BLVD SUITE 530 ARLINGTON, VA 22219		<b>b. Coordinated Committee Name</b>  <b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	<b>d. Comments</b>  <b>e. Election Sum to Date</b> \$ 108.06		
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>		
1A	Draft	O	10/11/2023		
<b>5. Total only this Page</b> \$ 3,582.44					
<b>6. Total of ALL CRO-1310 Pages</b> \$ 3,582.44					
(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)					

# 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> RE-ELECT LYDIA					<b>2. ID Number</b>	
<b>3. Payee Information</b>						
<input type="checkbox"/> Add	b. Account Code 1A	c. Form of Payment Draft	d. Purpose Code O	e. Date (mm/dd/yyyy) 10/11/2023	f. Amount \$ 6.07	g. Required Remarks CREDIT CARD FEE NORDLAND
<b>4. Total only this Page</b>					\$	6.07
<b>5. Total of ALL CRO-1315 Pages</b> <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>					\$	6.07
<b>6. Purpose Codes (List detailed expenditure code in (d) above)</b>						
	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* - Donations to Legal Expense Fund			
O* - Other						
* Codes require detailed explanation in required remarks field (g)						

CRO-1315

NC State Board of Elections

December 2009

**In-Kind Contributions**Pg 1 of 1

<b>Amendment</b>	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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> RE-ELECT LYDIA	<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 (include city, state, &amp; zip)</b> LYDIA BOESCH* 35 MCMICHAEL DR PINEHURST, NC 28374-6702	<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> \$ 13,682.36		
<b>e. Description</b> SPONSORSHIP AT PINEWILD VETERANS EVENT	<b>f. Date (mm/dd/yyyy)</b> 09/28/2023	<b>g. Fair Market Amount</b> \$ 250.00
REFRESHMENTS FOR KELLY CHANCE M&G	10/13/2023	\$ 71.00
SOCIAL MEDIA SERVICES	10/17/2023	\$ 600.00
<b>4. Total only this Page</b>	\$ 921.00	
<b>5. Total of ALL CRO-1510 Pages</b> <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>	\$ 921.00	

CRO-1510

NC State Board of Elections

December 2007