

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

1. Committee Information

a. Full Name	c. ID Number
Curtin For Council	
b. Mailing Address (include City, State and Zip Code)	d. Date Filed
470 Hill Rd	9/29/2025
	e. Phone Number
	9108504215

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2025	07/11/2025	09/23/2025	Corrie A Dodds

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 Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser	Municipal <input checked="" type="checkbox"/> Organizational <input checked="" type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input 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	State/County <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	Referendum <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) <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input checked="" type="checkbox"/> Other:	10. Special Report Name		
8. Number of Fundraisers this Report			

11. Account Information		11. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
First Bank			
b. Purpose	c. Account Code	b. Purpose	c. Account Code
Committee Fund	1		
	d. Period Begin Balance		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.

Corrie A Dodds

Printed Name of Signer

Signature of Appointed Treasurer

09/29/2025

Date

FOR OFFICE USE ONLY

Date Received:

9/29/25

Employee:

[Signature]

Date Postmarked:

Employee:

Date Scanned:

Employee:

Date Data Entered:

Employee:

Delivery Method

- ☐ Normal Mail
☐ Registered Mail
☒ Hand Delivered
☐ Electronically Filed
☐ Signer has not received mandatory training

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

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

Detailed Summary

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

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

1. Committee Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
Curtin for Council		35 day			
Start of Election Cycle: January 1, _____		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 0		\$ 0	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 1.00		\$ 1.00	
6) Contributions from Individuals (CRO-1210)		\$ 1500.00		\$ 1500.00	
7) Contributions from Political Party Committees (CRO-1220)		\$		\$	
8) Contributions from Other Political Committees (CRO-1230)		\$		\$	
9) Loan Proceeds (CRO-1410)		\$		\$	
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$ 1496.00		\$	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$		\$	
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$		\$	
11c) Outside Sources of Income (CRO-1250)		\$		\$	
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$		\$	
11e) Exempt Purchase Price Sales (CRO-1265)		\$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 1501.00		\$ 1501.00	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 60.00		\$ 60.00	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$		\$	
13c) Coordinated Party Expenditures (CRO-1310)		\$		\$	
14) Aggregated Non-Media Expenditures (CRO-1315)		\$		\$	
15) Loan Repayments (CRO-1420)		\$		\$	
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$		\$	
17) In-Kind Contributions (CRO-1510)		\$ 5.00		\$ 5.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 65.00		\$ 65.00	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 1436.00		\$ 1436.00	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$			
21) Outstanding Debts (CRO-1430)		\$			
22) Outstanding Debts (CRO-1610)		\$			
23) Outstanding Debts (CRO-1620)		\$			
24) Outstanding Debts (CRO-1720)		\$			
25) Outstanding Debts (CRO-1710)		\$		\$	
26) Outstanding Debts (CRO-1440)		\$		\$	
27) Outstanding Debts (CRO-2220)		\$		\$	
28) Outstanding Debts (CRO-1215)		\$		\$	

CRO

ard of Elections

August 2008

35 day Report
Line 4 - 0
Missing filing fee 5.00
contribution & In-kind
line 13 - Disbursements
Need CRO-1310 disclosing
Where you spent the \$

Detailed Summary

Amendment

☐

Yes

☒

No

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

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number		
Curtin for Council	35 day Report			
Start of Election Cycle:	January 1,	2025	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 1495.00	0	\$ 1495.00
RECEIPTS				
5) Aggregated Contributions from Individuals	<i>(CRO-1205)</i>	\$ 1.00		\$ 1.00
6) Contributions from Individuals	<i>(CRO-1210)</i>	\$ 1495.00		\$ 1495.00
7) Contributions from Political Party Committees	<i>(CRO-1220)</i>	\$ 0		\$ 0
8) Contributions from Other Political Committees	<i>(CRO-1230)</i>	\$ 0		\$ 0
9) Loan Proceeds	<i>(CRO-1410)</i>	\$ 0		\$ 0
10) Refunds/Reimbursements To the Committee	<i>(CRO-1240)</i>	\$ 0		\$ 0
11) Other Receipt Sources				
11a) Interest on Bank Accounts	<i>(CRO-1250)</i>	\$ 0		\$ 0
11b) Contributions from Not-for-Profit Organizations	<i>(CRO-1250)</i>	\$ 0		\$ 0
11c) Outside Sources of Income	<i>(CRO-1250)</i>	\$ 0		\$ 0
11d) Legal Expense Fund – Other Sources	<i>(CRO-1270)</i>	\$ 0		\$ 0
11 e) Exempt Purchase Price Sales	<i>(CRO-1265)</i>	\$ 0		\$ 0
12) TOTAL RECEIPTS <i>(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)</i>		\$ 1496.00		\$ 1496.00
EXPENDITURES				
13) Disbursements				
13a) Operating Expenditures	<i>(CRO-1310)</i>	\$ 60.00		\$ 60.00
13b) Contributions to Candidates/Political Committees	<i>(CRO-1310)</i>	\$ 0		\$ 0
13c) Coordinated Party Expenditures	<i>(CRO-1310)</i>	\$ 0		\$ 0
14) Aggregated Non-Media Expenditures	<i>(CRO-1315)</i>	\$ 0		\$ 0
15) Loan Repayments	<i>(CRO-1420)</i>	\$ 0		\$ 0
16) Refunds/Reimbursements From the Committee	<i>(CRO-1320)</i>	\$ 0		\$ 0
17) In-Kind Contributions	<i>(CRO-1510)</i>	\$ 0		\$ 0
18) TOTAL EXPENDITURES <i>(Add lines 13a, 13b, 13c, 14, 15, 16 and 17)</i>		\$ 60.00		\$ 60.00
19) Cash on Hand at End <i>(Add lines 4 and 12 together, then subtract line 18)</i>		\$ 1436.00		\$ 1436.00
ADDITIONAL INFORMATION				
20) Non-Monetary Gifts Given to Other Committees	<i>(CRO-1330)</i>	\$ 0		
21) Outstanding Loans (incl. ones from other campaigns)	<i>(CRO-1430)</i>	\$ 0		
22) Debts and Obligations owed By the Committee	<i>(CRO-1610)</i>	\$ 0		
23) Debts and Obligations owed To the Committee	<i>(CRO-1620)</i>	\$ 0		
24) Account Transfers Within the Committee	<i>(CRO-1720)</i>	\$ 0		
25) Administrative Support	<i>(CRO-1710)</i>	\$ 0		\$ 0
26) Forgiven Loans	<i>(CRO-1440)</i>	\$ 0		\$ 0
27) 48-Hour Notice Reports Sum	<i>(CRO-2220)</i>	\$ 0		\$ 0
28) Contributions to be Refunded	<i>(CRO-1215)</i>	\$ 0		\$ 0

CRO-1100

NC State Board of Elections

August 2008

MOORE ROF

Page 1 of 1

Amendment
☐ Yes ☒ No

1. Committee Full Name (and Fund if applicable)	2. ID Number
Curtin for Council	11/20/20

[illegible]

\$ 1.00 ✓

\$ 1.00

April 2007

MOORE BOE

Contributions from Individuals

Pg 1 of 3

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	
Curtin for Council						
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Geraldine R. Curtin 23 President St. Oakdale, NY 11769 631-346-1827			Development Director			
			c. Employer's Name/Specific Field			
			Self Employed		e. Election Sum to Date	
					\$ 220.00	
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		07/18/2025	\$ 220.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Charles F. Deleot III 335 Crest Rd. Southern Pines, NC 28387 910-692-7878			Retired			
			c. Employer's Name/Specific Field			
			Retired		e. Election Sum to Date	
					\$ 200.00	
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		08/18/2025	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Ellie Collins 335 Driftwood Circle Southern Pines, NC 28387 910-692-8289			Retired			
			c. Employer's Name/Specific Field			
			Retired		e. Election Sum to Date	
					\$ 25.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Anedot		08/25/2025	\$ 25.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					RECEIVED \$ 445.00 ✓	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					SEP 29 2025 \$ _____	

Contributions from Individuals

Pg 1 of 3

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	
Curtin for Council						
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Michaelene Walker 331 Driftwood Circle Unit D Southern Pines, NC 28387 315-907-2857			b. Job Title/Profession		d. Comments	
			Admin. Assistant			
			c. Employer's Name/Specific Field			
			Moore County Arts Council		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		08/01/2025		\$ 100.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Sarah Jane Gibson 1348 Green Oaks Ln Unit M Charlotte, NC 28205 336-337-0762			b. Job Title/Profession		d. Comments	
			Child Life Specialist			
			c. Employer's Name/Specific Field			
			Atrium		e. Election Sum to Date	
				\$ 25.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	1	Anedot		0827/2025		\$ 25.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Elizabeth Strickland 120 Riding Ln Southern Pines, NC 28387 NO PHONE			b. Job Title/Profession		d. Comments	
			Retired			
			c. Employer's Name/Specific Field			
			Retired		e. Election Sum to Date	
				\$ 75.00		
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		08/26/2025		\$ 75.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
4. Total only this Page					\$ 200.00 ✓	
5. Total of ALL CRO-1210 Pages					\$ _____	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

RECEIVED

Contributions from Individuals

Pg 3 of 3

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	
Curtin For Council						
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Chris Deans 414 Stornaway Dr Southern Pines, NC 28387 19103150841			b. Job Title/Profession		d. Comments	
			Program Manager			
			c. Employer's Name/Specific Field			
			Dept of Defense		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	Anedot		08/30/2025		\$ 100.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Mike Doherty 11213 Lake Jackson Drive Manassas, VA 20111 17816400814			b. Job Title/Profession		d. Comments	
			Retired			
			c. Employer's Name/Specific Field			
			Retired		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	Anedot		09/05/2025		\$ 250.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Will Grieshaber 240 Fairway Drive Southern Pines, NC 28387 19079031063			b. Job Title/Profession		d. Comments	
			Contractor			
			c. Employer's Name/Specific Field			
			Contractor		e. Election Sum to Date	
				\$ 500.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	1	Anedot		09/21/2025		\$ 500.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
4. Total only this Page					\$ 850.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 1495.00	

RECEIVED

SEP 29 2025