

Disclosure Report Cover

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

Amendment

Yes

No

1. Committee Information

a. Full Name

Curtin for Council

c. ID Number

b. Mailing Address (include City, State and Zip Code)

470 Hill Rd
Southern Pines, NC 28387

d. Date Filed

10/24/2025

e. Phone Number

9108504215

2. Report Year

3. Period Start Date (mm/dd/yy)

2025

9/23/2025

4. Period End Date (mm/dd/yy)

10/20/2025

5. Treasurer Full Name

Corrie Dodds

6. Type of Committee (Check One)

- Candidate Campaign Party
- PAC Referendum
- Independent Expenditure Joint Fundraiser
- Legal Expense Fund

7. Type of Fund (if applicable, check one)

- "Booster Fund"
- Building Fund

Other:

8. Number of Fundraisers this Report

9. Type of Report (check only one type of report from one category)

Municipal

- Organizational
- Thirty-five day
- Pre-primary
- Pre-election
- Pre-runoff
- Semi-annual
- Mid Year
- Year End
- Final
- Special

State/County

- Organizational
- Quarterly
- First
- Second
- Third
- Fourth
- Semi-annual
- Mid Year
- Year End
- Final
- Special

Referendum

- Organizational
- Pre-referendum
- Final
- Supplemental Final
- Annual
- Special

10. Special Report Name

11. Account Information

a. Financial Institution Full Name

First Bank

b. Purpose

Committee Fund

c. Account Code

1

d. Period Begin Balance

\$ 1495.00

11. Account Information

a. Financial Institution Full Name

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 of Elections.

Corrie A. Dodds

Printed Name of Signer



Signature of Appointed Treasurer

10-24-2025

Date

FOR OFFICE USE ONLY

Date Received: 10/24/25

Employee: DL

Delivery Method

Normal Mail

Registered Mail

Hand Delivered

Electronically Filed

Signer has not received mandatory training

Date Postmarked: _____

Employee: _____

Date Scanned: _____

Employee: _____

Date Data Entered: _____

Employee: _____

RECEIVED

OCT 24 2025

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

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

Detailed Summary

Amendment

Yes

No

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

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number	
Curtin for Council	2025 Pre Election		
Start of Election Cycle:	January 1, 2025	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 1496.00	\$ 2524.60
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 0	\$ 1.00
6) Contributions from Individuals	(CRO-1210)	\$ 1275.00	\$ 2770.00
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)		\$ 1275.00	\$ 2771.00
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 709.88	\$ 769.88
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)	\$ 0	\$ 0
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 709.88	\$ 769.88
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 565.12	\$ 2001.12
ADDITIONAL INFORMATION			
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	OCT 24 2025	(CRO-2220)	\$ 0
28) Contributions to be Refunded		(CRO-1215)	\$ 0

Contributions from Individuals

Pg 1 of 6 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 type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Geraldine R Curtin 23 President St. Oakdale, NY 11769			b. Job Title/Profession Development Director	d. Comments Self	
				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 checked="" 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) Charles F. Deleot III 335 Crest Rd. Southern Pines, NC 28387			b. Job Title/Profession Retired	d. Comments 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 checked="" 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) Ellie Collins 335 Driftwood Circle Southern Pines, NC 28387			b. Job Title/Profession Retired	d. Comments 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 checked="" 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)				OCT 24 2025	

Contributions from Individuals

Pg 2 of V

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 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			b. Job Title/Profession Admin. Assistant		d. Comments
			c. Employer's Name/Specific Field Moore 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 checked="" 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			b. Job Title/Profession Child Life Spec.		d. Comments
			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 checked="" type="checkbox"/>	1	Anedot		08/27/2025	\$ 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 Lane Southern Pines, NC 28387			b. Job Title/Profession Retired		d. Comments
			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 checked="" 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>					\$

Contributions from Individuals

Pg 3 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			
Curtin for Council						
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 Program Manager	d. Comments		
Chris Deans 414 Stornaway Dr Southern Pines, NC 28387			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 checked="" 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)			b. Job Title/Profession Retired	d. Comments		
Mike Doherty 11213 Lake Jackson Drive Manassas, Va 20111			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 checked="" type="checkbox"/>	1	Anedot		08/27/2025	\$ 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)			b. Job Title/Profession Contractor	d. Comments		
Will Grieshaber 240 Fairway Drive Southern Pines, NC 28387			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 checked="" 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 <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$

Contributions from Individuals

Pg 4 of 4 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) Lacey Miller 696 Azalea Dr Vass. NC 28394			b. Job Title/Profession Ret.	d. Comments e. Election Sum to Date \$ 25.00	
			c. Employer's Name/Specific Field Ret		
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		09/23/2025	\$ 25.00
<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) Trent Fredricks 445 Dogwood Ln Southern Pines, NC 28387			b. Job Title/Profession Sales	d. Comments e. Election Sum to Date \$ 100.00	
			c. Employer's Name/Specific Field Self		
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		10/03/2025	\$ 100.00
<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) Margo Tatgenjorst Drakos 580 E. Massachusetts Ave Southern Pines, NC 28387			b. Job Title/Profession Self Emp	d. Comments e. Election Sum to Date \$ 200.00	
			c. Employer's Name/Specific Field Self		
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		10/05/2025	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page			RECEIVED		\$ 325.00
5. Total of ALL CRO-1210 Pages					\$
(This line must be on line 6 of Detailed Summary Page CRO-1100)			OCT 24 2025		

Contributions from Individuals

Pg 5 of 6 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
Richard Walker 331 Driftwood Cir Unit D Southern Pines, NC 28387			Ret.		
			c. Employer's Name/Specific Field		
			Ret		
					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		10/16/2025	\$ 200.00
<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)			b. Job Title/Profession		d. Comments
Charlottee Lee Belmore 210 S. Weymouth Rd. Southern Pines, NC 28387			Retired		
			c. Employer's Name/Specific Field		
			Retired		
					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		10/16/2025	\$ 100.00
<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)			b. Job Title/Profession		d. Comments
Claudia Donahue 590 Orchard Rd Southern Pines, NC 28387			Self Emp		
			c. Employer's Name/Specific Field		
			Self		
					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		10/16/2025	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page			RECEIVED		\$ 400.00
5. Total of ALL CRO-1210 Pages					\$
(This line must be on line 6 of Detailed Summary Page CRO-1100)			OCT 24 2025		

Contributions from Individuals

Pg 6 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	
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) Donna Cheek 175 N Valley Rd Southern Pines, Nc 28387			b. Job Title/Profession Ret		d. Comments e. Election Sum to Date \$
			c. Employer's Name/Specific Field Ret		
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		10/16/2025	\$ 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) Miriam Cunningham 7 Villiage Green Circle Southern Pines, NC 28387			b. Job Title/Profession Self		d. Comments e. Election Sum to Date \$
			c. Employer's Name/Specific Field Self		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>					\$
<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 c. Employer's Name/Specific Field e. Election Sum to Date \$		d. Comments e. Election Sum to Date \$
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page RECEIVED \$ 550.00					
5. Total of ALL CRO-1210 Pages \$ 2770.00					
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					

Aggregated Contributions from Individuals

Page 1 of 1

Amendment

Yes No

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

4. Total only this Page

5. Total of ALL CRO-1205 Pages

(This line must be on line 5 of Detailed Summary Page CRO-1100)

RECEIVED

CBQ-1205

NC State Board of Elections

April 2007

OCT 24 2025

SEP 29 2025

MOORE BCE

MOORE RACE